Template

Entire dispensary

Review plan (10)

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Hot Flash Support

Template by Fullscript

Updated Sep 29th, 2023

Preview **Evidence**

Evidence rating

The following protocols were developed using only **a,b,c**-quality evidence

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Overview

Approximately 50.3% to 82.1% of women going through menopause experience hot flashes and night sweats. (Ziaei 2007) To help manage symptoms, 40-50% of women rely on the use of complementary therapies such as plant-based supplements. (Franco 2016)

Plant compounds called phytoestrogens have been found to have similar structures and functions when compared to the hormones within humans. (Abdali 2010) Estradiol is an estrogen steroid hormone that naturally drops throughout a woman's life cycle. Decreases in estradiol levels create vasomotor instability, which contributes to hot flashes. Utilizing plant compounds is theorized to help compensate for the estradiol drops through a woman's life cycle. (Abdali 2010)

Lower rates of postmenopausal symptoms have been observed in Asian women. Thi thought to be due to the high dietary intake of soybeans, which contain isoflavones. Isoflavones are thought to work as phytoestrogens and have a high binding affinity to

estrogen beta receptors. (Cheng 2007) This sheds light on the mechanism behind how phytoestrogens are able to reduce hot flash frequency and vaginal dryness scores. (Franco 2016)

Based on the current research findings, the ingredients in the protocol below have demonstrated efficacy in improving hot flashes associated with menopause.

Isoflavones

Isoflavones

40-80 mg, total isoflavones per day (dosing varies based on isoflavone), minimum 12 weeks (Khaodhiar 2008)(van de Weijer 2002)(Cheng 2007)(Ferrari 2009)(Mainini 2013)

- A meta-analysis of 17 trials found reduced frequency (20.6%) and severity (26.2%) of hot flashes when compared to placebo; further analysis found isoflavones with 18.8 mg of genistein were twice as effective for reducing the frequency of hot flashes. (Taku 2012)
- Daidzein-rich isoflavone supplementation in doses of 40 mg and 60 mg improved frequency of hot flashes by 43% and 41% after eight weeks, and 52% and 51% after 12 weeks, respectively, when compared to 32% and 39% with placebo, without any alteration of endogenous sex hormones or thyroid hormones. (Khaodhiar 2008)
- For acute menopausal symptoms, 60 mg of isoflavones for six weeks decreased hot flashes by 57% and night sweats by 43%, with no other changes in serum levels of lipoproteins, estradiol, and follicular stimulating hormones when compared to that of placebo. (Cheng 2007)
- Mean number of hot flushes decreased by 36.2% and 41.2 % in the treatment group compared to 24.0% and 29.3% with placebo at week six and 12, respectively. (Ferrari 2009)
- Red clover isoflavones decreased Kupperman Index score at three months and number of hot flushes at one month compared to placebo, with no effects on cardiovascular risk markers. (Mainini 2013)
- Hot flush frequency decreased in a pooled mean analysis when compared to that of placebo, while having no statistically significant reported side effects. (Chen 2015)

St. John's wort

St. John’s wort (*Hypericum perforatum)*

900 mg, three times per day, minimum of 12 weeks (Al-Akoum 2009)(Abdali 2010) or as directed (Eatemadnia 2019)

- Women aged 40 to 65 with three or more hot flashes per day experienced better quality of life as shown by improvements in baseline questionnaire after three months of supplementation. (Al-Akoum 2009)
- Supplementation produced a significant decrease in Kupperman Index scores, as demonstrated by a reduction in the frequency and intensity of hot flashes when compared to placebo. (Eatemadnia 2019)

Black cohosh

Black cohosh (*Actaea racemosa)*

100 mg, once per day, 12 weeks (Gao 2018)(Frei-Kleiner 2005)

- Menopausal vasomotor symptoms reduced by 26% in pooled analysis among individuals taking black cohosh. Shams 2010
- All three treatment groups (black cohosh, estradiol valerate/progesterone, and estradiol valerate/medroxyprogesterone acetate) experienced decreased Kupperman menopause scores after 3 months; the black cohosh group experienced the lowest incidence of breast tenderness at 12.9% (vs. 36.7% and 14.3%, respectively) and vaginal bleeding at 6.5% (vs. 26.7% and 82.1%, respectively). (Zheng 2013)
- In a trial of 122 menopausal women lasting 12 weeks, women with an initial Kupperman Index equal or greater than 20 experienced a 47% reduction in scores from a dried ethanolic extract group, compared to 21% in the placebo group. (Frei-Kleiner 2005)
- In a trial of 120 menopausal women lasting six months, both the black cohosh and fluoxetine treatment groups experienced significantly decreased Kupperman Index and Beck's depression scale scores; however, monthly scores for hot flushes and night sweats decreased by 85% in the black cohosh group, compared to 62% in the fluoxetine group. (Oktem 2007)

Rhubarb extract

Rhubarb extract – ERr 731

4 mg, once per day, 12 weeks (Kaszkin-Bettag 2009)(Heger 2006)(Hasper 2009)

- Menopause Rating Scale (MRS) decreased overall as shown by a decrease in number and severity of hot flushes in treatment group when compared to placebo. (Kaszkin-Bettag 2009)

- Total score for MRS II decreased as shown by a decrease in the severity of hot flushes, and an increase of menopause-specific quality of life; no adverse effects were found as indicated by a lack of findings through endometrial biopsies, bleeding, weight changes, blood pressure, and heart rate. (Heger 2006)

Vitamin E

Vitamin E

400-800 IU, total per day, minimum 4 weeks (Ziaei 2007)(Barton 1998)

- Severity score and frequency of hot flashes were significantly decreased when compared to placebo. (Ziaei 2007)
- Supplementation reduced the frequency of hot flashes by one per day compared to the placebo. (Barton 1998)

Vitex

Vitex (*Vitex agnus-castus*)

30 mg *Vitex agnus-castus* extracts for 8 weeks **(Zahra 2011)(Naseri 2019)**

- A randomized double-blind clinical trial of 52 women found that vitex significantly reduced total menopausal symptoms, anxiety, and vasomotor dysfunction compared to placebo. (Naseri 2019)
- A clinical trial of 60 postmenopausal women found that daily Vitex agnus-castus significantly reduced the frequency of hot flashes compared to placebo over 8 weeks, as measured by the Blatt-Kupperman Index. (Zahra 2011)
- One study found that adding a combination of *Nigella sativa* and *Vitex agnus-castus* to citalopram significantly improved vasomotor, physical, and psychosocial symptoms in menopausal women compared to citalopram alone. (Molaie 2019)

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