

Letter to the Editor: Recommending the Intake of Estrogenic Plants in Prevention of Neurodegeneration in Women after Menopause

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To the Editor

Madam, neurodegenerative diseases, including Parkinson's disease and dementia, exhibit varying prevalence among women across different continents. In Asia, Parkinson's disease affects approximately 1.8% of women aged 65 and older in China and Japan, and 0.7% in India, with higher rates in urban areas. In South Asia, including Pakistan and India, dementia prevalence is around 1.6% for women aged 60 and above. In Europe, up to 10% of women over 65 suffer from dementia, primarily Alzheimer's, with Parkinson's affecting about 1.5-2.5%. North America reports about 12% of women over 65 with dementia and 2% with Parkinson's, with the U.S. showing slightly higher prevalence in women 2. In Africa, dementia affects approximately 4% of older women, although underreporting is common. South America shows 7.5% dementia prevalence among women over 65, with Parkinson's affecting about 1.2% [1]. In Australia and Oceania, dementia prevalence is between 8-10%, with Parkinson's at 2.2% among older women [2].

According to "Estrogenic Plants: to Prevent Neurodegeneration and Memory Loss and Other Symptoms in Women after Menopause" [3] intakes of estrogenic plants help prevent neurodegenerative diseases and memory loss in women. Plants such as Cranberry, ginger, hops, milk thistle, red clover, salvia officinalis, soy, black cohosh, ushuva (snakeroot) andvitex have been observed to prevent neurodegeneration. Estrogen directly impacts the release of acetylcholine, serotonin and dopamine. By inhibiting the accumulation of betaamyloid it yields in prevention of Alzheimer's disease [4]. However, the menopause hormone therapy has been observed to be a cause to cancer and many other cardiovascular diseases [3]. That's why the use of Estrogenic plants shall be beneficial toward preventing neurogenerative diseases in women experiencing menopause. The most common medicine recommended to the cases of neurodegenerative diseases usually are L-dopa for Parkinsons and ACE inhibitors 5 for Alzheimer's. Studies have revealed L-dopa can cause dyskinesia, hallucination, psychosis and mood distress. Cholinesterase inhibitors cause cognitive impairment in women during menopause. The use of estrogenic plants should be prescribed to women at the time of menopause to prevent common neurodegenerative diseases including Parkinsons, Alzheimer's and dementia.

Given the limitations and side effects of current treatments for neurodegenerative diseases, incorporating estrogenic plants could provide a safer, complementary approach to improving women's health and reducing neurodegeneration at menopause [5].

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