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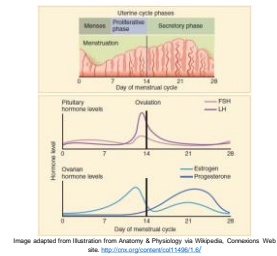
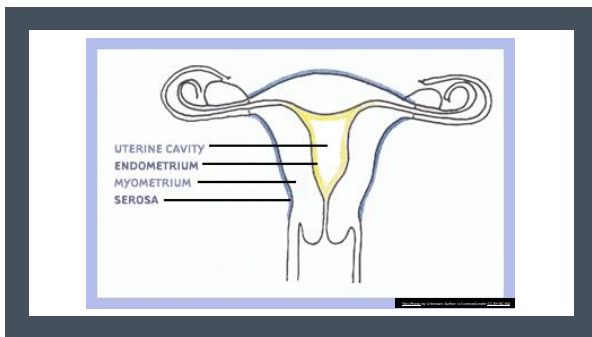
Go with the Flow:
Herbal Support for
Abnormal Uterine
Bleeding
with Camille Freeman, RH, LDN

The Plan

- Menstrual Cycle as a Vital Sign
- Abnormal Uterine Bleeding
- Herbal Support
- Case Application



The Menstrual Cycle as a Vital Sign



A "Normal" Cycle

From Bahamondes & Ali (2015)

Frequency of menses: 24-38 days

Duration of flow: 4.5-8 days

Volume of menstrual fluid: 5-80 mL

Postovulatory phase: 11-17 days

Cervical fluid builds & peaks at ovulation



Acute AUB

- "an episode of bleeding in a woman of reproductive age, who is not pregnant, that is of sufficient quantity to require immediate intervention to prevent further blood loss".

Chronic AUB

- "bleeding from the uterine corpus that is abnormal in duration, volume, and/or frequency and has been present for the majority of the last 6 months" (Bahamondes & Ali, 2015)

"Abnormal Uterine Bleeding" includes/replaces

menorrhagia, metrorrhagia, essential menorrhagia, idiopathic menorrhagia, primary menorrhagia, functional menorrhagia, ovulatory or anovulatory menorrhagia, hypermenorrhoea, hypomenorrhoea, menometrorrhagia, polymenorrhoea, polymenorrhagia, epimenorrhoea, epimenorrhagia, metropathica hemorrhagica, uterine hemorrhage and dysfunctional and functional uterine bleeding.

Root causes of abnormal uterine bleeding

Disorders of endometrial origin

Disorders of the HPO axis

Disorders of hemostasis

Seek Diagnosis and Referral

- Periods have not started by age 14 with either hirsutism or suggestion of eating disorder
- Periods have not started by age 15
- Periods more often than q 21 d or less often than q 45 d
- Periods > 90 days apart even one time
- Periods last > 7 days
- Passage of large clots
- Periods require pad or tampon change more than once every 1-2 h
- Periods are heavy and there is hx of excessive bruising/bleeding or family hx of bleeding disorder

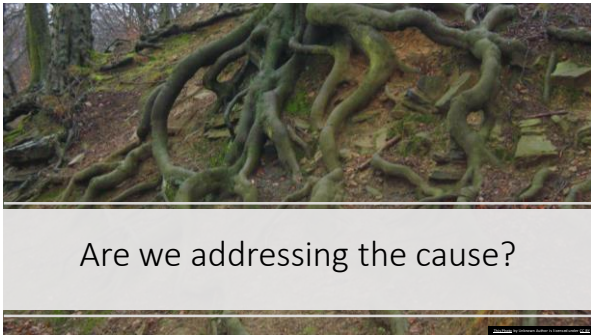


Herbal Support for AUB

with a focus on Heavy Menstrual Bleeding

Possible causes of heavy menstrual bleeding

- Perimenopause, excess estradiol
- Pregnancy & being postpartum
- Uterine fibroids
- Deficiency in local vasoconstrictors that regulate bleeding
- Some types of cancers
- Thyroid disruption
- Coagulation disorders
- Uterine tone?

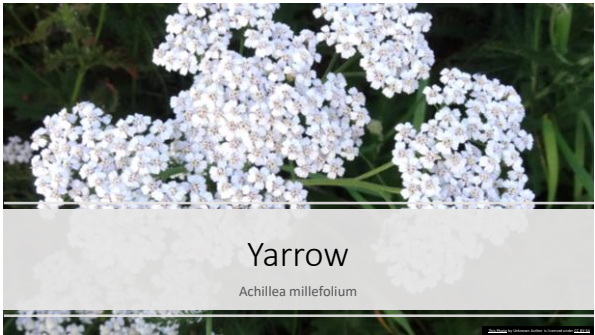


Are we addressing the cause?

- Hemostatic herbs: lady's mantle, yarrow, cinnamon, shepherd's purse, sage, red raspberry, ginger
- Rebuilding herbs: nettle, chamomile, adaptogens
- Other support as needed: constitutional herbs, HPO support (e.g. Vitex, white peony), liver support, iron supplementation, topical preparations for some conditions, send out for referral if cause not known



Lady's Mantle
Alchemilla vulgaris



Yarrow
Achillea millefolium



Cinnamon

Cinnamomum verum



Shepherd's purse

Capsella bursa-pastoris



Considerations when using herbs for HMB

- Check for iron sufficiency!!
- Separate from iron-containing supplements/foods
- Address root cause concurrently or after bleeding under control
- Consider length of use, esp. for tannin-rich herbs
- If conception is possible, adjust dosing strategies to compensate



Link to Shared Google Doc for Cases

<https://bit.ly/2KBaQez>



Thank you for joining me!

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