

Appendix 1

The Frail Proof Buyer's Guide

1/7/25

Mini-reviews of books on menopause, andropause, HRT, TRT, and anti-aging, with links to other background material

This section, which is also available as a stand-alone book, is provided as supplement to [Frail Proof](http://www.frailproof.com/) (<http://www.frailproof.com/>). It contains links to background material on what hormones are and what they do and on the many benefits that accrue from optimizing them.

For background on the general philosophy that justifies biohacking and other anti-aging protocols, start with the science behind to our evolution-derived bodies and behavior. *The Selfish Gene* by Richard Dawkins is a great introduction to the evolutionary processes involved, but any of the popular recent books on evolutionary psychology, including Sapolsky's *Behave* and Wright's *The Moral Animal*, will also serve as great sources of inspiration and motivation: The bodies and brains of human beings are incredibly imperfect contraptions and keeping them in good condition and "fixing" them when necessary is an individual obligation and our collective destiny.

There are a wide range of Internet sites related to the topics covered in *FP*. Unfortunately they vary a lot in quality and signal-to-noise ratio. For thyroid issues I recommend <https://stopthethyroidmadness.com/> as a good starting point, their emphasis on T3+T4 treatment being especially informative and in conflict with what most doctors currently recommend.

There are also lots of sites that cover TRT and men's health, but unfortunately the majority of the content on them is of the "broscience" variety: Anecdotal reports that you have to read hundreds or thousands of to have any hope of digesting down to a reasonable awareness of the state of the art. Mostly what you'll develop is a great sympathy for the vast number of men who are suffering what can only be considered abuse at the hands of their incompetent doctors (e.g., only dosing testosterone once every two or three weeks, dosing testosterone without hCG, or receiving no assessment or treatment of estrogen levels, etc.).

Unfortunately I also can't recommend any current Internet site that specializes in hormone therapy for women: So few

postmenopausal women are currently maintaining optimal (or even “normal”) levels of hormones, or indeed even receiving all three required hormones, that there is very little broscience (or would that be “sisscience”?) to rely on in this domain. Keep in mind that any site or book that exclusively or even primarily recommends oral (synthetic or bioidentical) or cyclic delivery modes is not a viable source of quality information because they’re tied to protocols that are obsolete, ineffective, and frequently even dangerous. This applies to almost all of the hormone-related information you’ll find in FaceBook groups, most of which have the additional problem of overt, even proud, censorship of any information that conflicts with the biases of the moderators. For example, anyone who posts links to peer-reviewed research that conflicts with the recommendations of the Wiley Protocol will get banned from WP-oriented groups, a policy that denies the members of those groups the facts they need to make informed decisions. The one notable exception to this rule is [Menopausal Hormone Therapies](#), which was co-founded by the author.

The same unfortunately applies to the current crop of books on menopause, the overall sense one gets from reading more than a few of them is that hormone optimization is only in its “stone knives and bearskins” stage, a stage where leeches and trepanation (cutting holes in the skull to let the evil spirits out) could be standard treatment: It’s rare to find two of them that even partially overlap in their recommended protocol, to the extent they even specify a protocol and target hormone levels at all.

Nevertheless I’ll review the most popular of those books here to help ensure you don’t waste time on those that you wouldn’t benefit from reading. They are most likely to be useful if you’ve failed to keep up with the continuous stream of health fads covered in the popular media (regarding diet, exercise, effects of stress, etc.) and so will find their coverage of these topics informative.

The common theme of most of these books is they primarily appeal to placebo effects and the human characteristic that “misery loves company”. Which is not to say that those things have no value, especially if there aren’t any alternative treatments. But the whole point of **FP** is to show that viable alternative treatments do exist, and if you implement them you will no longer benefit from hearing about other people’s suffering and whatever philosophies they offer up that might make that suffering more bearable.

A good litmus test to apply to any book you’re considering reading is the author’s opinion on the quality and general applicability of the outcome of the Women’s Health Initiative (WHI) study. If they support it, my considered opinion is that not only does this disqualify them

from being considered an expert in the field, it should disqualify them from practicing medicine at all because it indicates an irredeemable preference for the status quo and a willful ignorance of anything that challenges that, regardless of what is in the best interests of their clients.

Which brings us to Wikipedia, and in particular the WHI article ([https://en.wikipedia.org/wiki/Women%27s Health Initiative](https://en.wikipedia.org/wiki/Women%27s_Health_Initiative)): While Wikipedia can be an excellent source of background information in non-controversial domains, it has serious “foxes guarding the henhouse” problems elsewhere. The core of the issue is that self-selected “editors” with strong biases, or indeed direct conflicts of interest, can simply override any attempt to change (fix) articles when the state of the science or even the popular consensus has shifted (voice of experience here). While there are many ways to address this problem (such as designing a structured way to present multiple viewpoints, or having biases systematically examined by provably impartial juries), the organization has not implemented any of them. Which is why I no longer support Wikipedia financially or with my edits. Take anything you read on that site on a controversial subject, including HRT and hormone therapies in general, with your BS detector fully activated. And then be sure to check out other sources (such as the references provided in **FP**, and/or some of the books listed below) before forming any strong opinions on the matter.

A second good test to use when judging the quality of books and other sources of information is the reliance on anecdotes over peer-reviewed published research. They take the form of “Person W had problem X which was treated with protocol Y and the outcome was Z”. The best of these is where “W” is you: Only then can you be sure that Y was the only change you made and that there is a good chance that Y usually or always achieves Z. Second best is where W is a patient of a doctor, in which case the anecdote becomes a “case study”. You’re still not sure if Y was the only intervention, or indeed the Z actually occurred or that it wasn’t just a result of the placebo effect. Worst is where W is your wife’s cousin’s Facebook friend, in which case we call it “fake news”. The same is generally true if you’re hearing the story on TV or reading it in a supermarket-checkout-line tabloid: The main purpose of stories in those forums is to sell advertising, not help you optimize your health.

Almost all of these books on menopause make a fundamental error when describing the relative risks associated with different forms of the hormones. Most gloss over these differences, citing research that only tested one particular substance and generalizing that to all others in the same category, implying that there is no significant difference

between them. The rest (mostly those that endorse “bioidentical” hormones) imply the differences are far larger than they actually are, ignoring the fact that even doubling a negligible risk usually results in a still-negligible risk. The truth is somewhere in between: While there are significant differences in risk as a function of the particular hormone analogs you use, these differences are small compared with differences in risk that result from under or overdosing as the result of dose size (particularly the E to P ratio), timing (relative to half lives, and cyclic vs. continuous protocols), and how they are administered (oral, transdermal, injection, pellets, etc.). Unlike **FP**, none of these books makes any serious effort to objectively explore these issues.

I’ve included a few books on this list that cover hormones or anti-aging in general because there is a lot of overlap in these fields. I’ve also included a few that focus on testosterone and TRT, most of these being clearly superior to the books on menopause if only because they almost all take an optimization/biohacking approach vs. assuming that alleviating symptoms is enough. Women can benefit from reading them because there are large areas where the issues and protocols overlap and to get steeped in the biohacking ethic.

The primary metric used to rank these books is their utility for biohacking: The specificity of the protocol recommended and the quality of the evidence used to support those recommendations. You’ll have to read the descriptions if you’re looking for something else.

1. ***Dr. Colbert’s Hormone Health Zone: Lose Weight, Restore Energy, Feel 25 Again! (5*)***

Good overview of the issues, and with lots of specific recommendations.

The good:

- The best of the current crop of hormone books.
- Well researched with lots of good references.
- Good coverage of thyroid, adrenals, and cortisol, although the conclusion about the latter two is that it’s seldom necessary to treat them specifically if you properly optimize the other hormone levels.
- Lots of specifics on dosing and target hormone levels for both men and women, and all levels provided are for serum rather than saliva or urine.
- Strong advocate of testosterone for women, and as pellets or injections.
- Advocates for optimization rather than merely treating to address symptoms.

- Appropriately skeptical of doctors and their current prescribing (underdosing) regimens and of transdermal and oral protocols.

The bad:

- Way too many anecdotes and the author admits that many of them are “composites” (i.e., made up), although they are at least from his own practice.
- Way too many exclamation points!
- Overly fanatic of pellet therapy and doesn’t address the issue of inability to reliably achieve target serum levels that plague that mode (most people are either over or underdosed on pellets, sometimes wildly so, something that just isn’t a problem with injections, an alternative the book endorses only tepidly).
- Recommends only sublingual/buccal or oral progesterone, which is especially odd considering he recommends injections for T even for women.
- Fails to properly diagnose women having periods or blood spotting while on HRT: He recommends decreasing estrogen when the real problem is underdosing or inconsistently dosing an oral/sublingual/transdermal progestin (a problem that is *very* common).
- A little cavalier about recommending HGH supplementation: There are many peer-reviewed papers that link high IGF-1 to significantly increased risk of many forms of cancer, a risk he doesn’t even mention.
- Minor formatting and consistency issues (e.g., the target serum levels are different in different sections!).
- Recommends Christianity as a part of the protocol and contains biblical citations throughout.

2. ***Stop the Thyroid Madness (4*)***

Limited to thyroid and adrenals, but provides by far the best coverage of these subjects.

The good:

- Strong advocate for hormone therapies.
- Very skeptical of old-school docs and synthetic hormones (horror stories galore of absolutely epic incompetence).
- Solid protocol with specific dosing and lab level targets.
- Well referenced and indexed.

The bad:

- Inadequate coverage of how other hormones, particularly sex hormones play a role even in thyroid function.

- Somewhat out of date, although this is made up for by the STTM website (i.e., use this book to get the background information but the website to get the latest updates on protocols).
- Makes some claims that are not supported by the peer-reviewed literature, although that's mostly because the available peer-reviewed literature is completely inadequate.

3. ***The Youth Effect (4*)***

Solid overview of HRT and TRT that never received the popularity it deserved.

The good:

- Strong advocate for HRT, including testosterone.
- Appropriately skeptical of old-school docs, oral hormones, synthetics, polypharmacy, and the WHI study.
- Appropriate references, although grouped by chapter instead of by footnotes/citations.

The bad:

- Appeals generally to restoring levels found in your 20s, but with no specific dosing or target level information and several statements that symptom relief is the primary goal.
- Disparages injection protocols as are typically done in doctor's offices (IM only of large doses with weeks-long delays between them).
- No coverage of thyroid, adrenals/cortisol, insulin resistance, or other issues common in older adults.

4. ***The Natural Superwoman (4*)***

Approachable overview of menopause and anti-aging with few glaring flaws.

The good:

- Strong advocate for HRT, including testosterone.
- Appropriately skeptical of old-school docs, oral hormones, synthetics, saliva testing, cyclic protocols, the WHI study, and herbal supplements.
- Relatively free of faddish recommendations and fake anecdotes.
- Reasonable transdermal protocol.
- Usable (if unconventional) list of references and index.

The bad:

- Emphasizes (E3) estriol, although doesn't require it.
- Doesn't provide target levels, although does mention optimization is to levels at age 20.

- No mention of injections.
- Weak on diagnosis and treatment of thyroid.
- Some redundancy in discussions of supplement benefits, and too much coverage of the standard “diet and exercise” recommendations.

5. ***The Good News About Estrogen (4*)***

A refresh of *The Natural Superwoman* that’s unfortunately even weaker on how-to information.

The good:

- Strong advocate for HRT, including testosterone. More complete and updated E2 information than the previous book.
- Appropriately skeptical of old-school docs, oral hormones, synthetics, pellets, saliva testing, cyclic protocols, the WHI study, and herbal supplements.
- Relatively free of faddish recommendations and fake anecdotes.
- Reasonable transdermal protocol.
- Good list of references, but no footnotes so it’s hard to tie specific claims to their supporting research.

The bad:

- Emphasizes (E3) estriol, although doesn’t require it.
- Doesn’t any dose or provide target levels, nor even any discussion of the difference between symptom relief protocols vs. optimization
- Misrepresents injection, relegating them to the most serious conditions.
- Weak on diagnosis and treatment of thyroid.
- Much redundancy in discussions of symptoms, and too much coverage of the standard “diet and exercise” recommendations.

6. ***Homone Repair Manual (4*)***

Solid middle-of-the-road book but only endorses a light protocol supported by obsolete (even cherrypicked) research.

The good:

- Good coverage of the background material, and especially of perimenopause.
- Appropriately skeptical of the WHI, most herbal supplements, and antidepressants.
- Lots of examples of how to talk to your doc about these issues.
- Proper footnotes and references, though the references are definitely biased to support a very light protocol.

The bad:

- Weak protocol recommendation based on OMP and a 50 (half-sized) patch with no testosterone (and lots of false information about T in general).
- No discussion of antiaging or "optimization level" HRT which most books above this in the rankings include.
- Superficial coverage of thyroid issues.
- Could be cut by at least 25% by removing redundant information (mostly about recommending the same supplements for a variety of different conditions).

7. ***The Testosterone Optimization Therapy Bible: The Ultimate Guide to Living a Fully Optimized Life (4*)***

The definitive guide, albeit with many flaws in the specific protocols it recommends.

The good:

- At least touches on everything you could possibly want to know about hormones (more like an encyclopedia than a bible, I'd say).
- Huge number of good references and links to informative websites.
- Abundant tables and graphs with recommended protocols, lab levels, etc.
- Appropriately critical of non-effective supplements and protocols, including testosterone "boosters" and transdermal/topical.
- Good coverage of supplements that *do* work, and recommended off-label uses of other beneficial drugs.

The bad:

- Over 600 pages, although if you can handle that it is the best route to mastery of the domain.
- Contains material (such as a section on spirituality) that readers may prefer to find elsewhere, or not at all.
- Good coverage of the benefits hCG, but lacking in endorsement that it should be a standard component of any male hormone optimization protocol.
- Recommends T3/T4 thyroid compounds for weight loss, a risky protocol that in the past caused many people to end up in the emergency room which is part of the reason why many doctors now refuse to prescribe these compounds at all.

- The chapter on hormone optimization in women is scattershot, with a lot of good information mixed in with anecdotes and bogus “appeal to nature” recommendations. The recommendation of a complex cyclic transdermal protocol (a derivative of the Wiley Protocol) fundamentally conflicts with the conclusions drawn elsewhere in the book and with the recommendations published in peer-reviewed journals.
- Expensive, albeit for much more material than in the MANual (the previous version of this book).
- Relatively low production values (sloppy editing, low quality illustrations, etc.), especially considering the price.
- As is the case with the MANual, you can’t trust the reviews on Amazon because 5-star reviews are essentially being purchased via an appeal at the end of the book to get free swag in exchange for a good review.
- No index, and it’s big enough to need one.
- Numerous problems with references and URLs including many typos and dead links. It’s also annoying that there are no URL links in the references even though many of the cited papers (or at least the abstracts) are available on the Internet.

8. ***You Are Not Broken (4*)***

A sex self help book that has more good information in the single chapter on menopause than most of the books on this list.

The good:

- Very skeptical of the WHI and doctors who haven’t learned from the complete repudiation of its findings.
- Strong advocate for HRT including testosterone, the function and benefits of which are discussed throughout the book.
- Effectively refutes the argument that aging is “natural” and that treating menopause as a disease of aging is inappropriate.
- Lots of great information about how to improve your sex life, which is something nearly everyone can benefit from, especially older men and women.

The bad:

- No specific protocol is recommended, but at least does essentially recommend dosing to levels necessary to restore sexual function, which generally means replacement levels.

- A little redundant in giving you permission to enjoy sex and to do the work necessary to achieve that, although perhaps those things bear repeating.

9. ***The Great Menopause Myth: The Truth on Mastering Midlife Hormonal Mayhem, Beating Uncomfortable Symptoms & Aging to Thrive (4*)***

Complete and modern overview of the physiology of menopause that epically fails when it comes to recommending protocols.

The good:

- Among the best overviews of what's happening during the menopause process.
- Appropriately skeptical of symptom-relieving dosing, oral hormones, the WHI, herbal supplements, non-hormonal treatments, and saliva and urine testing.
- Strong promoter of transvaginal/transrectal and injection modes.
- Decent index and reference list, although references are grouped by chapter and it's often difficult to trace a particular claim to a specific reference.

The bad:

- No dosing or target level recommendations although it tends to recommend physiological (i.e., premenopausal) levels rather than mere symptom relief.
- Strong proponent of cyclic protocols with a laughable attempt at justifying this position: The primary support is an article in the Alzheimer's treatment section of the UpToDate service that cites a single out of date paper on hippocampus neurons in a mouse model of Alzheimer's (overall, a great example of the idiom "grasping at straws").
- Overly skeptical of synthetic progestins and vastly overstates the risks of using them.
- Superficial coverage of thyroid issues.

10. ***Feminine Forever (4*)***

The original menopause/HRT book. Written in 1966 it's filled with archaic descriptions of the technology of HRT, but with a surprisingly relevant protocol and philosophy.

The good:

- Great history of HRT prior to the 1960s, something not provided by other books on this list.
- Excellent analysis of the process of menopause and summary of the benefits of HRT.

- Effective protocol and dosing, albeit the exact products used have been rendered obsolete by advancements in technology since then.
- Criticisms of the medical establishment and the press are surprisingly relevant to our world 60 years later.

The bad:

- Testing protocol relies on biopsies (they didn't even have blood tests for most things back then!).
- Sections on the role of women in society will sound gratingly patronizing to modern readers.
- Bottom line: It is an interesting read if you're an HRT wonk, but even though it's available as a free E-book now there are probably better uses of your time.

11. ***The Menopause Manifesto: Own Your Health with Facts and Feminism (4*)***

Great overview of the process and consequences of menopause but with weak protocol recommendations.

The good:

- Strong advocate of HRT including testosterone.
- Strong sections on relative risks of treatments (and non-treatments).
- Appropriately skeptical of the WHI "standard of care", herbal supplements, pellet-based therapies, and saliva testing.
- Highly critical of other books/authors, particularly Suzanne Somers (***I'm Too Young For This***) and Christiane Northrup (***The Wisdom of Menopause***), the latter having been exposed by Covid to be an antivaxer.
- Good set of references although there are no footnote markers so it's often hard to tie a claim to a particular reference.
- Lots of mnemonics and rules of thumb that will make it easier to remember and apply what you've read.
- A feminist perspective which while overbearing at times is a refreshing difference from other books in this field.

The bad:

- Blanket prohibition on transdermal P and makes claims about it that are not supported by the peer-reviewed literature.
- Definitely slanted toward medical organizations and their standards and so is overly critical of compounding pharmacies and of functional/integrative/anti-aging docs.

- Way too comfortable recommending exotic new drugs such as SERMs, although it does offset that with stories about how other new and shiny drugs ended up being disasters.
- Provides standard dosing recommendations, but no target levels.
- No coverage of thyroid, cortisol, or other hormones that may go off at this age.
- Doesn't mention injections.
- Needs better editing (typos, formatting errors, redundancy, etc.)

12. ***Screaming to be Heard: Hormone Connections Women Suspect...and Doctors Still Ignore (4*)***

Overly long and somewhat out of date, but among the best overviews of the field.

The good:

- Strong advocate for HRT, especially for the E2 (estradiol) component.
- Appropriately skeptical of doctors, herbal supplements, pellet-based therapies, and saliva testing.
- Specifies a good target levels for E2 (90pg/ml) and recognizes that both Free T and Total T should be considered when dosing T.
- Deep coverage of a wide range of health conditions and how HRT can be an essential part of the treatment for them.
- Roughly balanced coverage of synthetics and bioidenticals (i.e., appropriately prefers the latter, but points out many cases where the former can be the more appropriate treatment).

The bad:

- Other than a few in-line references there are no references or footnotes to provide support for most of the claims made, and some of them really needed this support since they're most likely wrong or at least out of date.
- Recommends oral testosterone which has been shown to put the liver at unnecessary risk.
- Overly (and repeatedly) critical of progesterone supplementation and recommends against supplementing it at all for women who've had a hysterectomy or ablation.
- Criticized injection-based protocols based on the deeply flawed assumption that only doctors can provide them. Which is ironic since a major theme in the book is women are treated as second-class citizens by the medical

profession and yet most men are allowed to do their own TRT injections...

- Weak coverage of thyroid issues, and recommends against NDT based on bogus claims that sensitivities will develop if they are used (we'd all be allergic to pork in general if those types of sensitivities were an actual thing).

13. ***Safe Hormone Smart Women (3*)***

Extensively researched, but will be too pedantic for most.

The good:

- Page per page, the most extensively researched book on this list.
- Extremely pro HRT with references to back up most of the claims.
- Appropriately skeptical of oral hormones, herbal supplements, and saliva testing.

The bad:

- Only recommends transdermal protocol and doses provide are unsafe (P dosing of 20-40mg/day, which is only 20 to 50% of the minimum safe doses).
- No target levels and weak coverage of thyroid.
- No index, severely impairing its utility as a reference.
- The lack of references for most of the controversial claims (those that don't appear in other books on this list) could prove dangerously misleading to readers who aren't paying close attention.

14. ***Happy Healthy Hormones: How to Thrive in Menopause (3*)***

Good overview of the issues and set of references but weak on the specific protocol recommended.

The good:

- Easy to read and relatively comprehensive.
- Unlike most of the other books on this list it has been kept up to date with regular revisions.
- Appropriately skeptical of the WHI study, doctors, synthetic hormones, high-dose cyclic protocols (like the Wiley Protocol), and herbal supplements.
- Good coverage of other hormones to consider (thyroid, cortisol, insulin, etc.)
- A client-centered protocol which allows you to tune your own dosage.
- Recognizes testosterone is a key component of an HRT protocol.
- Good analysis of testing protocols including requiring regular transvaginal ultrasounds.

- Includes an appendix with additional references with custom abstracts that explain their significance.

The bad:

- Primarily about symptom relief rather than optimization and recommends keeping doses as small as possible. Will cut doses if high lab levels are reported, even if symptoms return.
- Recommends only expensive 24-hour urine testing rather than using the peer-review standard of serum (blood) levels.
- Recommends only oral and transdermal modes, and at relatively low doses with no target levels provided (you have to be a medical professional and sign up for the online program (at \$50 a month) to gain access to this information). Doesn't mention injections or pellets at all.
- Significant number of anecdotes, although at least they're from the author's own practice.
- Treats the fact that 90% of oral micronized progesterone gets metabolized into non-bioidentical compounds by the liver as a "feature" (some of those compounds make you sleepy and a lot of women have trouble sleeping).

15. ***The new menopause (3*)***

So disappointing: So much effort spent producing a very polished product that adds essentially nothing to the conversation.

The good:

- Appropriately skeptical of poorly trained docs, the WHI study, pellets, oral estrogens, and saliva testing.
- Good overview of the physiology of menopause and the symptoms.
- Strong advocate for MHT/HRT.

The bad:

- No protocol recommendations or target levels, but the philosophy is clearly targeting symptom relief rather than antiaging or optimization.
- Recommends a full thyroid panel but says exactly zero about what any of the tests are or how to interpret them. No discussion of subclinical hypothyroidism.
- No discussion of PCOS even in the section on "insulin resistance" (PCOS being a common cause).

- No discussion of the importance of FSH and Free T for testing.
- Glaringly false information about DHEA, testosterone, transdermal progesterone, and injection-based protocols.
- Claims to be well versed in "social media", but has obviously never seen any of the groups that discuss menopause or its treatment.
- Goes on and on about how many bad docs there are out there, but provides exactly nothing about how to qualify a doc (and maybe for good reason because the author's ignorance and reluctance to share key information would cause her to fail any useful test!)

16. ***How to Achieve Healthy Aging (3*)***

State of the art on philosophy, but too few specific recommendations to be of much use.

The good:

- Strong advocate for HRT/TRT and to optimization levels including T for women.
- Appropriately skeptical of Big Pharma, the WHI study, doctors, and synthetic hormones.
- Good coverage of the need for thyroid supplementation in most people over age 50.

The bad:

- Superficial treatment of what hormones even are (e.g., generally uses the term "estrogen" and never even mentions the issue that there are many different estrogens).
- No discussion of the alternative modes, no dosing recommendations, no target levels.
- Little discussion of anti-aging or health maintenance in general: Doesn't cover vitamins or other supplements, the importance of diet and exercise, or required testing.
- No direct cites to references (though there are references in the back). No index.
- Considerably redundancy: could be trimmed by a third with proper editing.

17. ***The New Hormone Solution (3*)***

Good overview of the issues, but very weak on references and the specific protocol recommended.

The good:

- Easy to read and relatively comprehensive,

- Appropriately skeptical of the WHI study, doctors, synthetic hormones, and herbal supplements.
- Good overview of the types of drugs doctors may try to prescribe instead of hormones (especially antidepressants) and why you shouldn't accept them as substitutes for real hormone therapy.
- Includes a chapter on TRT for men.

The bad:

- No direct cites to references (though there are references in the back).
- Primarily about symptom relief rather than optimization.
- Abundant anecdotes, although at least they're from the author's own practice.
- Recommends oral and transdermal modes, and at relatively low doses with no target serum levels specified.
- Doesn't recommend testosterone for women.

18. ***The Estrogen Window (3*)***

Strong advocate for estrogen therapy, but recommends only a very weak protocol.

The good:

- Very critical of the WHI.
- Appropriately critical of doctors, although tries to shift the blame for their inadequate treatment to medical boards, professional organizations, and malpractice and health insurance companies.
- Appropriately skeptical of compounding pharmacies, but mistakenly blames them for the problems with transdermal progesterone (which are primarily caused by large inter-individual/inter-area/inter-day variability in permeability and metabolism).
- Strong proponent of regular assessments including of endometrial thickness, especially for cyclic (vs. continuous) progesterone protocols.
- Recommends starting therapy at the first sign of menopause (the opening of the "Estrogen Window"), and at least open-minded about duration (no "10 year" limit, which I guess means that in many cases the "Window" never closes).

The bad:

- All about the estrogen with inadequate coverage of progesterone and negligible coverage of testosterone, thyroid, and other hormones.

- Overly eager to accept FDA-approved therapies, including for SERMs which have negligible safety records compared with almost all progestins.
- Despite the deference to the FDA, hypocritically promotes herbal supplements which are specifically recommended against by the FDA (and pretty much every other evidence-based organization), albeit with appropriate caveats.
- Primarily about symptom relief rather than optimization.
- Considerable redundancy: The length could be cut by at least a third with aggressive editing.

19. ***I'm Too Young For This (3*)***

Well researched, but fanatic about bioidentical hormones and so overlooks their limitations.

The good:

- Convincingly argues the goal should be improved quality of life rather than mere symptom relief.
- Comprehensive and well researched with a decent set of references.
- Approachable, albeit at some cost in the scientific and protocol details.
- Appropriately skeptical of doctors, the WHI study, saliva testing, oral dosing, conventional hormones (Premarin and MPA), and herbal supplements.
- Good section on how to find and evaluate a new doctor.

The bad:

- Only recommends transdermal protocols, and doesn't specify dosages or target serum levels (it's a modified version of the unproven Wiley Protocol although unlike the original it does at least recommend testosterone supplementation).
- Overly critical of synthetic analogs, making the recommendation for bioidenticals more of a religious argument than a scientific one.
- Recommends cyclic over continuous dosing and doesn't (couldn't) address more recent studies that have shown the latter is safer: The one study she does cite isn't relevant since it only covered oral synthetic progestins and only NETA was assessed in continuous protocols, NETA overall being more risky than MPA, which in turn is significantly more risky than OHPC.

- Fails to recommend testing to monitor endometrial thickness which is a high risk area with both transdermal and cyclic protocols.

20. ***The Hormone Balance Bible (3*)***

Long-winded “archetype” model of hormone issues probably only useful for premenopausal women.

The good:

- Emphasizes that finding a good doc is the single most important part of the process.
- Relatively complete descriptions of the hormones, what they do, and the symptoms of deficiencies and excesses.
- Appropriately skeptical of pellet therapies.
- Recommends blood serum testing with urine testing as a backup where metabolism issues are suspected.

The bad:

- The “archetype” framework leads to massive redundancy making the book at least three times as long as it should be.
- Only recommends transdermal protocols, and doesn’t specify dosages or target serum levels. Emphasizes symptom relief rather than optimization.
- Does briefly discuss injections but only very tepidly recommends them.
- Wastes enormous verbiage on Energy Integrators (without even explaining what they are), Yoga poses, chakras, and herbal supplement recommendations with no references provided to support any of this.
- Weak set of references and index (then again, this is highly correlated with the very low information density of the book overall).
- Most of the case studies are pre or perimenopausal women making it of very limited use postmenopause (only 1 of the 12 archetypes applies in this case).

21. ***Discovering Your truebalance with Bioidentical Hormones (3*)***

Very approachable, but poorly researched and with a weak protocol.

The good:

- Appropriately skeptical of “standard of care” doctors, Big Pharma, the WHI, oral hormones, and PremPro.

- Strong advocate for HRT, including testosterone for women.
- Flexible on synthetics and concedes that there are things that bioidenticals are just too weak to handle.
- Provides specific doses and target levels, though unfortunately they're way low (40pg/ml for E2, bottom of the lab range for T).

The bad:

- Major fanboy of estriol but provides no references to any research that supports any of the claims for it.
- No index and references lack article titles, making them very difficult to verify or to use this book as a reference.
- Very confusing about P, including target levels, cyclic vs. continuous protocols, saliva testing, and is apparently the source of the completely unsupported recommendation to withhold P one day a week to refresh receptors (and even admits that this may trigger a period every week, which it does in some women!). Misrepresents one of the key findings in this area: Transdermal doses less than 80mg/day do **not** provide endometrial protection.
- No mention of the requirement to have ultrasounds.
- Recommends injections for men, but only transdermal for women with no justification provided for this obvious sexual bias.
- Poorly edited with typos, multiple figures appear more than once, and significant redundancy.

22. ***Stay Young & Sexy with Bio-Identical Hormone Replacement: The Science Explained (3*)***

Anti-Prempro screed with a weak protocol prescription.

The good:

- Well researched with a decent set of references albeit primarily about how bad Premarin and Provera are.
- Good coverage of the history of HRT.
- Appropriately skeptical Big Pharma, saliva testing, oral dosing, conventional hormones, pellets, hysterectomies, high dose cyclic protocols (e.g., those that cause periods like the Wiley Protocol), and incompetent doctors.
- Few anecdotes and only uses them to illustrate failures (the section on broken bones and bone healing failures with Fosamax are particularly effective).
- Allows for testosterone although claims that most women don't need it.
- Good section on how to find and evaluate a new doctor.

- Includes a section for men, albeit without any specific protocol recommendations.

The bad:

- Heavily estriol-oriented (80% estriol Biest/Triest) protocol and claims that other forms of estrogen cause cancer. Ignores reports that estriol doesn't provide any of the benefits of estradiol on bone, heart, hair, skin, etc.
- Despite pointing out all the potential advantages of HRT recommends what is primarily a symptom-relief oriented protocol.
- Only recommends transdermal/transvaginal protocols, and doesn't specify dosages or target serum levels. Doesn't even mention injection protocols.
- Only recommends expensive and burdensome 24-hour urine testing that is difficult or impossible to compare with the results from the peer-reviewed literature which all uses serum testing.
- Overly critical of synthetic hormones, making the recommendation for bioidenticals more of a religious argument than a scientific one (e.g., there are now peer-reviewed papers that show that MPA/Provera is actually *safer* than Oral Micronized Progesterone).
- Accepts the quality of the WHI blaming the results all on the Premarin and Provera rather than on any flaws in the study design or implementation.
- Recommends cyclic over continuous dosing and doesn't (couldn't) address more recent studies that have shown the latter is safer.
- Fails to recommend testing to monitor endometrial thickness which is a high risk area with both transdermal and cyclic protocols.

23. ***The Miracle of Bio-Identical Hormones (3*)***

Minimalist book with a minimalist progesterone-based protocol.

The good:

- Strong endorsement that T3+T4 thyroid supplementation is an essential component of HRT, though unfortunately with no target levels, dosing recommendations, or coverage of RT3 or Hashimoto's.
- Recommends T as a standard component of HRT, and at a reasonable dose (5mg/day transdermal).
- Appropriately skeptical of Big Pharma, AMA "standard of care", antidepressants, and OMP.

The bad:

- Makes Dr Lee (***What Your Doctor May Not Tell You About Menopause***) look like hesitant about progesterone!
- Progesterone dose for protocol is 200mg/day transdermal, a massive overdose (approximately equivalent to 500mg/day OMP).
- Recommends against any estrogen supplementation.
- Doesn't supply target levels for P or T.
- Repeatedly makes misleading and provably false statements (even for 2007) about "estrogen" (vs. specific forms of it), synthetic hormones, and even about progesterone (it does **not** prevent osteoporosis, only E and T can do that).
- Goes off on various rants about how progesterone alone can cure ADHD, metabolic syndrome, and a host of other maladies, claims for which there is no peer-reviewed support.
- No references, a real deal breaker considering the claims.

24. ***Estrogen Matters (3*)***

Comprehensive review of the evidence that HRT is safe and effective, but not much else...

The good:

- Absolutely eviscerates the WHI study, and the researchers associated with it, especially those who continue to support its conclusions.
- Relatively free of anecdotes, with the bonus of being the only book on this list that explains in great detail why using anecdotes or other broscience to make individual or public policy decisions is just a really bad idea unless it's backed up by data from peer-reviewed journals.
- Provides evidence against transdermal application of hormones.
- If you have even a tiny shred of open-mindedness about HRT there is no way you could read this book and come away with any doubt that it should be the standard of care for nearly all women.

The bad:

- The cliché "beating a dead horse" comes to mind when reading it and at various points it becomes positively tedious: The WHI study was botched, we get it already!
- The level of technical detail may be overwhelming for many readers.
- It's a "one trick pony": It's essentially a pro-HRT propagandea piece with very little in the way of background

information on what hormones are and what they do or practical advice as to what treatments to use, how to use them, or how to assess their effects on the body.

- Primarily endorses Premarin as the form of estrogen and synthetic oral progestins with no real discussion of alternatives. No mention of testosterone at all.
- Repeatedly criticizes doctors about their unsupported biases without specifically advising their clients to educate themselves to enable them to take control of their treatment, nor does it even provide even open-minded doctors any information about appropriate therapies and testing protocols.

25. ***The Estrogen Question: Know Before You Say "No" to HRT. (3*)***

Essentially a clone of "Estrogen Matters" with slightly more data but way milder criticism of the WHI and doctors and organizations that still follow its recommendations.

The good:

- Fully referenced with more studies some of which are newer than "Estrogen Matters" (because it was published a year later).
- Recommends transdermal bioidentical E2, P and T over oral forms.
- Relatively free of anecdotes.
- Recommends starting HRT early, and not ever discontinuing.

The bad:

- Zero information on dosing or target levels.
- Egregiously misinformed about HRT via injection protocols.
- Claims to be written for lay people, but is clearly aimed at trying to educate doctors without insulting them and their allegiance to "standard of care". Its main flaw in comparison with "Estrogen Matters" is in fact that its criticism of the WHI and "standard of care" is way too muted.

26. ***The Definitive Testosterone Replacement Therapy MANUAL: How to Optimize Your Testosterone For Lifelong Health And Happiness (3*)***

A good introduction to the "why" of TRT, with somewhat out of date coverage of the "how".

The good:

- Good section on diagnosis of low TRT.

- Lots of appropriate references and links to informative websites.

The bad:

- Limited coverage of the management of thyroid hormones and insulin, although at least they are mentioned as variables. As with the "TOT Bible", recommends T3/T4 compounds for weight loss.
- Very expensive for the amount of content, a significant portion of which is "filler" such as interviews and testimonials.
- Amazon reviews are not reliable because the author/publisher is gaming the system by offering compensation for 5-star reviews.

27. ***Hormones and Your Health: A Smart Woman's Guide to Hormonal and Alternative Therapies for Menopause (3*)***

Lots of facts but unfortunately draws many wrong conclusions from them.

The good:

- The most factually complete and best researched menopause book on this list.
- Strong advocate of HRT.
- Appropriately skeptical of the WHI (and other large-scale studies), doctors, saliva testing, Big Pharma, the media, oral hormones, and supplements, and backs these opinions up with lots of supporting references.
- Strong advocate of avoiding hysterectomy, again with many references.
- Well indexed, making it useful as a reference book.

The bad:

- The key elements of the recommended protocol aren't backed up with facts, or don't fit with the facts provided in the cited research (e.g., makes the ridiculous claims that testosterone supplements aren't needed because levels don't decrease in men or women as a result of aging, and that DHEA is an adequate substitute for testosterone).
- May be too dense for most readers (albeit it does say it's for "Smart Women").
- Mostly about symptom relief rather than optimization.
- Significantly out of date. For example more recent research has shown that the recommended cyclic/sequential protocols are significantly more risky than continuous protocols. Even the research she cites should have been sufficient for her to make this recommendation:

For example she has good coverage of endometriosis but fails to recognize that cyclic protocols are inappropriate for any women with a history of this condition.

- No coverage of other key hormones that need to be monitored in menopause (thyroid, cortisol, etc.)

28. ***Menopause: Your Management Your Way ... Now and for the Rest of Your Life (2*)***

Well researched with lots of good references, but doesn't supply a specific protocol or even make specific recommendations in general.

The good:

- At least touches on every relevant topic.
- Excellent long-form table of contents and index.

The bad:

- Big fan of herbal supplements.
- Very weak discussion of thyroid issues.
- Little discussion of testosterone (calls it the "male" hormone).
- Fairly shallow discussion of most topics, seems to go out of its way to avoid strongly recommending or condemning any specific proposal.
- Overly accepting of saliva testing, the WHI, oral hormones, and "making up your own protocol".

29. ***Sex, Lies, and Menopause: The Shocking Truth About Hormone Replacement Therapy (2*)***

Bold protocol with weak to non-existent scientific backing.

The good:

- The best review of the history of HRT.
- The original "Wiley Protocol".
- Good analysis of the connections between hormone levels and cancer.
- Very skeptical of doctors, insurance companies, and Big Pharma, with a good analysis of how the patent system is abused by the latter.
- Appropriately skeptical of oral hormones, saliva testing, and herbal supplements.
- Strong advocate for HRT and includes very specific protocol recommendations with both dose and target serum levels.

The bad:

- Appears to be well referenced, but actually isn't: Many of the references are to non-peer-reviewed sources and the references to many of the peer reviewed articles (actually,

all of the ones I checked!) misrepresent the conclusions of those articles. But the most egregious example is that the reference for the key claim of the entire book, that cyclic/sequential protocols are superior to continuous protocols, is a circular reference to this book itself! That's like saying "It's true because I said so!"

- Relatively free of anecdotes, but stuffed with "just so" stories about everything from pagan rituals to the frequency of homosexuality. There's also a fair amount of mysticism (such as recommending timing periods to the phases of the moon and support for homeopathy).
- A "bioidentical" zealot, she massively overgeneralizes the characteristics of synthetic progestins.
- A "sequential/cyclic" zealot, she says that women need to be menstruating into their 90s, a claim she doesn't back up with any peer-reviewed research or even any anecdotes.
- Opposes testosterone supplementation and even claims it causes breast cancer, which is false. Worse, she ignores the fact that testosterone levels in premenopausal women are at least double what they are in postmenopausal women, this exact same type of difference in levels being the only evidence she cites that estrogen levels should be kept high after menopause (i.e., because young women don't get breast cancer).
- The protocol itself is extremely burdensome: Twice a day side-effect-inducingly high doses of estradiol and progesterone creams, *plus* a monthly period. Who's going to put up with that?

30. ***A Practitioner's Guide to Physiological Bioidentical Hormone Balance. (2*)***

Great potential, but due to a willful ignorance or dismissal of the peer-reviewed literature it fails to deliver anything very useful.

The good:

- Short, because it omits all the history, background information, and proselytizing for HRT most other books contain.
- Relatively complete overview of thyroid and cortisol (adrenal) systems and treatments.

The bad:

- Claims, without evidence, that "Standard of Care" HRT dosing (1mg oral E2 or a 50 patch) is supraphysiological and instead recommends doses roughly half that

(doses/levels that won't even provide symptom relief, let alone full optimization).

- Exposes a profound ignorance of physiology in many areas but particularly WRT half lives (e.g., claims you need to inject esters of estradiol and testosterone daily to maintain stable levels).
- Overly fond of saliva testing and yet does not address the fact that the consensus in the peer-reviewed literature is that saliva testing just doesn't work.
- Strong advocate for herbal supplements without mention of the many shortcomings or even danger associated with them.
- No mention of using FSH and Free T to assess sex hormone levels, a fatal omission given the low dose recommendations.
- A self-published book by a non-professional (BS in pharmacy with no license) it contains many formatting and typographical errors, lacks an index, and has a pitifully small references section that omits any support for the most controversial claims made.

31. ***Next Level: Your Guide to Kicking Ass, Feeling Great, and Crushing Goals Through Menopause and Beyond (2*)***

The ultimate "diet and exercise" book, but really drops the ball when it comes to hormones.

The good:

- Great coverage of diet and exercise, useful for women of any age.
- Recommends against keto and fasting diets, with references to back up the reasoning.
- Strong advocate for MHT/HRT, although very vague on the details.
- Appropriately skeptical of most supplements.

The bad:

- Superficial coverage of hormones, and defers to docs on protocols (doses and target levels) without even mentioning that the vast majority of docs lack even basic competence in this area.
- Neglects to mention thyroid at all and only tangentially mentions testosterone both of which should be core elements of any fitness-oriented lifestyle.
- Factual errors in coverage of some supplements (e.g., recommends against using DIM with HRT, which is exactly backwards), antidepressants, and compounded hormones.

32. ***Age Healthier, Live Happier: Avoiding Over-Medication Through Natural Hormone Balance (2*)***

The founder of the BioTE pellet company promotes his products.

The good:

- Extremely skeptical of Big Pharma, synthetic hormones, and transdermal hormones.
- Big proponent of thyroid supplementation with NDT and correctly blames doctors for significantly underdiagnosing and undertreating hypothyroidism.
- Doesn't weigh in on the saliva/blood/urine testing debate, but in practice relies on blood testing.

The bad:

- Ginormously hypocritical: Goes on and on about the results of Big Pharma's withholding of information and misrepresentations of the benefits of their products and yet does exactly the same thing, promoting a system where doctors are trained to insert pellets without understanding the risks, the underlying physiology, or even how to do proper follow-up, leading to negative outcomes for a large fraction of their customers and turning doctors into "pellet pushers".
- Unfairly critical of injections because it assumes IM injections done by doctors. In fact SC injections done yourself have none of the listed disadvantages and offer far more stable levels than pellets with an order of magnitude (or perhaps more) lower risks of infection/rejection/overdose/underdose (the book discloses (p105) that just the first two of those happen 6-8% of the time which is just an insanely high failure rate)
- The only specific dose or serum level target specified in the entire book is that Total Testosterone of 500ng/ml in men is the criteria to get a new pellet. In fact, depending on SHBG levels, that is already significantly deficient.
- Promotes only OMP without even mentioning the inadequate serum progesterone levels most women achieve with that, leading to significant underprotection of endometrium. Claims the sleepiness OMP causes is a benefit.
- "Anecdotes" are clearly fabrications.
- No references and no index, and the former being especially significant because many of the claims in the

book are completely unsupported by the peer-reviewed literature.

33. ***Younger: A Breakthrough Program to Reset Your Genes, Reverse Aging, and Turn Back the Clock 10 Years (2*)***

Broad survey of the anti-aging field, but weak on medical intervention (i.e. the stuff that works).

The good:

- The best coverage of the “diet and exercise” portion of an anti-aging protocol.
- Well referenced and with lots of specific protocol recommendations, at least for non-medical interventions.

The bad:

- Very limited coverage of hormones and just passes the buck on them: Rather than educating the consumer, recommends you “ask your doctor about...” which only ensures undertreatment or perhaps failure to treat at all.
- Very limited coverage of lab testing, an essential component of any anti-aging protocol.
- Recommends genetic testing as part of the process of refining a protocol, something that the science probably won’t actually support for decades, if ever.

34. ***Younger Next Year for Women: Live Strong, Fit, and Sexy - Until You're 80 and Beyond (2*)***

Run-of-the-mill “diet and exercise” book that unfortunately has the hormone story completely wrong.

The good:

- Chatty, friendly, and optimistic about your prospects as an old person.
- Lots of lifestyle hacks to help you set goals and then keep up the motivation to achieve them.
- Good motivator for taking on the “diet and exercise” part of an anti-aging protocol.

The bad:

- Has the hormone story completely wrong: Wholeheartedly and uncritically accepts the deeply flawed WHI study report, and claims that HRT and TRT are simply inappropriate and unnecessary therapies.
- Repeats the (now widely discredited) claims that testosterone is simply the aggression hormone.
- No mention of thyroid, insulin, metformin or any other medical factor associated with aging. Only mentions cancer a couple of times with zero information about how to prevent or treat it.

- Way too many anecdotes, and no references.
- About 3 times as long as it needs to be, unless it's the anecdotes you're really into.

35. ***The Wisdom of Menopause (2*)***

A classic example of the Matthew Effect: A lousy book that sells well because it's popular.

The good:

- Fairly comprehensive survey of the field, with special emphasis on the most common protocol elements (diet, exercise, and stress reduction).
- Appropriately skeptical of the WHI, synthetic hormones, doctors, Big Pharma, and supplements.
- Good collection of quality references.
- By far the most popular book on menopause, meaning it's the one your doctor and your friends are most likely to be familiar with.

The bad:

- Endorses HRT, but only tepidly. Contains lots of evidence about the benefits of HRT, but then only recommends relatively weak transdermal doses that will generally only achieve symptom relief instead of full optimization. Doesn't even provide target levels.
- Relies on "private communication" of unpublished research for key components of the protocol, including the single most important aspect: HRT delivery via oral vs. transdermal vs. pellets/injections (discussion of the latter is omitted entirely!)
- Endorses saliva testing, and makes the common mistake of assuming saliva levels correspond to physiological effects, a claim unsupported by the peer-reviewed research.
- Makes specific recommendation about diet and supplements but then admits "I don't have any evidence any of this works".
- Way too many anecdotes, and explicitly admits that some of them are fabricated (she calls them "composites").
- Almost useless coverage of thyroid issues with no target levels provided, no mention of RT3, thyroid antibodies, or Hashimoto's despite acknowledging that this is one of the most likely problem areas in menopause.
- Randomly mixes spiritual "evidence" (the "Divine", chakras, etc.) in with the real science, leading the reader to doubt her grasp of what "evidence based decisionmaking" really is.

- Way too long: at almost 750 pages it's about 3 times as long as most of the other books on this list. Unfortunately about a third of that is simple redundancy (e.g., the same recommendation against some common treatments are repeated multiple times). Another third are anecdotes, about her own life or those "composite" case studies. Properly edited this book would be similar in length to the others because it contains about the same amount of information overall.
- The index is weak. Part of this is because of the redundancy, part because the book simply lacks information on many crucial subjects, but beyond those things it simply lacks entries even for important things it does cover. This makes the book very hard to use as a reference, supposedly one of its selling points. If you still want to have a copy I'd recommend buying the Kindle version where at least you can use full-text search.

36. ***Ageless: The naked truth about bioidentical hormones (2*)***

Expensive "concierge" doctors ramble on about their (now long out of date) unsupported theories.

The good:

- All in on the "most doctors don't know what they're doing" philosophy.
- Firm on the need for hormone therapy for both men and women.

The bad:

- Vastly inferior to her newer book (*I'm Too Young For This*), both in the quality of the writing and quality of the evidence.
- Accepts the findings of the WHI, but blames them on the fact that the hormones used were synthetics.
- Huge fan of transdermal cyclic protocols but supplies zero evidence for why they're better or even safe at all.
- No specific protocols or target serum levels.
- No references other than a bibliography of the books of the contributors.

37. ***What Your Doctor May Not Tell You About Menopause (2*)***

Significantly out of date, from a time when mere symptom relief was the standard.

The good:

- Extensive background information on what hormones are and what they do.

- Relatively free of anecdotes, appeals to nature, and reliance on the placebo effect.
- Good criticism of oral progesterone.

The bad:

- Overwhelming emphasis on symptom relief rather than hormone optimization.
- Endorses the WHI methods and conclusion.
- All about the transdermal progesterone, claiming that it's the appropriate treatment for nearly all women.
- Claims only 1/3 of women need estrogen, and even then only minimal (perhaps even negligible) doses. Which is kind of lucky because it's the only way the seriously underdosed progesterone regimen wouldn't be dangerous.
- Recommends saliva testing over serum testing, yet provides no theory explaining the discrepancies. Is particularly a fanboy of Zava/ZRT (the saliva-testing company behind the bogus claims that you can only accurately measure transdermal hormones by saliva).
- No recommendation to test for effects (endometrial thickness, bone density, etc.)
- Does recommend testosterone, but only for some women, only very low doses, and only as a cream.
- Recommends changing diet and avoiding environmental toxins instead of taking thyroid hormone, a ridiculous prescription.

38. ***The Hormone Cure (2*)***

The "Gottfried Protocol" mostly relies on the "placebo effect". Avoid it.

The good:

- Good general background information on the issues, terminology, and references.
- Especially good overview of cortisol and thyroid pathways and treatments.
- Addresses hormone imbalances in all stages of women's lives, including in premenopausal women.

The bad:

- Infuriatingly hypocritical: It makes many claims of deference to the FDA and peer-reviewed journals, but then repeatedly makes strong recommendations to use the kinds of supplements and dietary protocols that those organizations specifically recommend against. Worse, it makes little or no mention of the issues concerning the

quality, effectiveness, or side effects of most of those supplements.

- Relies heavily on anecdotes, although at least they are from the author's own professional experience ("The Gottfried Files").
- Mostly about symptom relief rather than optimization. The heavy reliance on herbal supplements also means that it's primarily a "placebo effect" protocol.
- Recommends only transdermal estrogen and oral micronized progesterone. Recommends against any sort of testosterone supplementation, and indeed is heavy on recommendations on reducing testosterone levels even further than their naturally-low postmenopausal levels.

39. ***Anticancer: A New Way of Life (2*)***

A "wishful thinking" prescription for anticancer/anti-aging.

The good:

- There undoubtedly is a connection between cancer and things like diet, exercise, and mental health, albeit at best a moderate one. This book could help one optimize these aspects of a health maintenance protocol (although there are many, many others do a better job of that).
- Very well researched, although most of the references are limited to the above topics.
- Optimistic tone could prove beneficial to those who are already fighting cancer.

The bad:

- How one could publish a book on cancer that doesn't even mention metformin is baffling.
- Extremely limited coverage of hormonal effects on cancer (and they're vastly larger than diet, exercise, and mental health combined). To the extent it mentions hormones at all it's about how to reduce them, which is exactly backwards: We need to manage them to achieve optimal levels, not fear them.
- Stuffed with personal anecdotes, appeals to nature, things that "work" due only to the placebo effect, and wishful thinking.

40. ***Mayo Clinic The Menopause Solution: A doctor's guide to relieving hot flashes, enjoying better sex, sleeping well, controlling your weight, and being happy! (2*)***

Mostly about accepting suffering or paying Big Pharma to alleviate it, the side effects be damned.

The good:

- A beautiful book, with top shelf layout and custom illustrations.
- Extensive survey of all the things that can go wrong with us as we age, which is especially useful if you happen to be from Mars.
- Appropriately skeptical of supplements and transdermal hormones.
- Good lists and descriptions of tests that older people should get with their physicals (bone density, colon health, etc.) albeit with very little information about how to evaluate the results.

The bad:

- More about working around or accepting suffering than about doing anything to address the underlying issues.
- Generally supports the WHI conclusions.
- Very little discussion of actual hormone protocols, and especially deficient in discussion of testosterone.
- No discussion of thyroid issues.
- Positively stuffed with recommendations for Big Pharma products including antidepressants, statins, and hypertension and osteoporosis drugs including a wide variety of cutting edge products most of which, if history is any guide, will eventually prove to be far more dangerous than hormones (not to mention being orders of magnitude more expensive).
- No references! At all!

41. *The Menopause Brain (1*)*

Among the worst menopause books out there, a damn shame given how much information has been published in the 20 years since some of the books higher on this list came out.

The good:

- Good overview of the process of menopause, especially on how it affects the brain.
- Appropriately critical of the WHI study.
- Reasonable (if redundant) coverage of the diet and exercise stuff.

The bad:

- Exclusively (obsessively) focuses on symptom relief rather optimization, even in the case of critical needs like osteoporosis prevention.
- Tepid endorsement of HRT, and recommends SERMs, antidepressants, and herbal remedies over bioidenticals.

No dosing or level recommendation at all. No mention of injections or pellets.

- Is oddly specific about herbal supplement, including dosing, after having grossly neglected E, P, and T protocols, but fails to even mention the problem of adulterants and dosing reliability in supplements.
- Only endorses T supplementation for confirmed sexual dysfunction.
- No discussion of hypothyroidism.
- No discussion of how to find a doc that knows what they're doing.
- A very pessimistic book that will leave you with a bad feeling about life as we age in general (lots of talk about cancer and dementia).

42. ***Menopause: 50 Things You Need To Know (1*)***

Should have been titled "50 symptoms of menopause that are addressed by HRT, but we're not going to tell you a damn thing about what HRT is".

The good:

- Does endorse HRT: Over and over, as a solution to every one of the 50 symptoms it describes.
- Mentions that testosterone may be included in HRT.
- Mercifully short.

The bad:

- Doesn't include even a superficial definition of what HRT is, which is the #1 thing women really need to know!
- No protocol recommendations, no target levels, and no help finding or qualifying a doc.
- No mention of thyroid as a possible cause or contributing factor to the symptoms it does discuss.
- Almost completely useless, but at least does not contain bad information as the (few) books below it on this list do.

43. ***Dr. John Lee's Hormone Balance Made Simple (1*)***

A lightweight digest of Lee's other books, probably not useful for anyone.

The good:

- Well, at least it's short. And cheap.
- It does specify a protocol, albeit a very weak one.

The bad:

- All of the flaws in his other book ("***What Your Doctor May Not Tell You About Menopause***") without any of the redeeming background information.

- Only targets symptom relief rather than health optimization.
- Primarily recommends progesterone, with many (bogus) warnings against supplementing estrogen or testosterone.
- Only recommends saliva testing and not serum levels nor for effects (bone density, endometrial thickness, etc.)
- No references.

44. ***Menopause Confidential (1*)***

Probably the worst of the books in this field, no references or protocol recommendations at all!

The good:

- Short, approachable overview of the issues.
- Appropriately critical of saliva testing.

The bad:

- Heavy emphasis on symptom relief rather than hormone optimization.
- Specifically avoids recommending particular protocols in an attempt to keep the book from becoming obsolete (which is not your problem), leading to vague and superficial coverage of this key issue.
- No references! "Approachable" is worthy goal, but not if it means leaving out crucial information and links to supporting data.

45. ***What You Must Know About Women's Hormones (1*)***

All of the worst features of other books on this list wrapped up in one bloated and hard to read book.

The good:

- Well, it does at least acknowledge that women may need T and T3 supplementation.

The bad:

- No references, which is particularly problematic because there is so much bad (provably false) information in this book.
- Positively stuffed with recommendations for herbal supplements, most of which have never been scientifically shown to have the claimed benefits.
- No mention of the serious problem that, because they are not regulated, most herbal supplements have serious quality control problems: They may contain zero of the listed ingredients but instead often contain adulterants (often stimulants) that give the illusion that they're "doing something".

- Excessive use of “fact dropping”: Quoting snippets of peer reviewed literature without bothering to provide any context or to explain any of the jargon. This is a hallmark of pseudoscientific books in all fields.
- Very poorly organized (no chapters or other breaks) leading to massive redundancy: The same herbal supplements are discussed over and over with only minor variations in the descriptions.
- Strong advocate for saliva testing.
- No protocol recommendations. No target levels, nor even a list of recommended tests.
- Only endorses transdermal hormones, does not even mention injections or pellets.
- Misrepresentation of progestins without mentioning that the science has shown that they’re actually safer than the bioidentical (usually because the bioidentical is underdosed in an attempt to reduce side effects).
- Index is about a quarter the size it needs to be, rendering it of negligible value.