

7 Hormone Health Questions to Ask Mom This Mother's Day



Moms and daughters can be important allies when it comes to hormone health.

Unfortunately, helpful health patterns in many families will remain undiscovered because we simply don't think to ask the questions. Or perhaps we're worried about bringing up potentially sensitive or embarrassing topics.

Your mom is the person who chances are has changed more than a few of your diapers, dealt with childhood illnesses, and comforted you through teenage challenges. I guarantee—she is more resilient than you think.

I'm not suggesting you bring up mom's hormone history during brunch for all to hear, but maybe over

coffee when you both have some downtime. Or, if there's a pause in the conversation when you call to wish her Happy Mother's Day.

There's a very good chance you'll learn something you didn't know, that may be helpful to you or your children, and you'll both probably feel closer for having learned more about each other's lives.

So, what should you ask? Here are a few suggestions:

1. At what age did your mother get first get her period? While the onset of menstruation has a lot to do with nutrition and body fat levels, and can be affected by hormones in food—mothers and daughters often experience first menses at about the same age. This can help prepare you if you have daughters around this age too. You'll also want to ask about your mother's experience of her cycles. Were they regular? Did she have difficulties? Has she any embarrassing stories she can now laugh about?
2. Did your mother have any difficulty becoming pregnant, or was it "easy breezy"? I'll never forget hearing my grandmother share that all my grandfather had to do was walk by her clothes on the clothesline and she would be pregnant! If super-fertility runs in your family, you probably want to know about it too!
3. Did your mother have any miscarriages, particularly in the first trimester? This often signals low progesterone, a hormone that partners with estrogen to give you regular cycles, but that be low from high cortisol or stress. [\[i\]](#) Your mom may not have talked about this with many others, so here's a chance to be here for her.
4. Does your mom recall specific food aversions or cravings during pregnancy? As well as being the source for some great stories about late-night trips for ice cream and pickles, this can tell you about nutritional or micro-nutrient deficiencies your mom may have passed on to you, and you to your children. For example, if your mom craved celery or olives, she may have had a chloride deficiency. If she wanted to crunch on ice, she may have been iron-deficient. Asking about post-partum depression can also shed light on mineral deficiencies such as zinc or copper. [\[ii\]](#)
5. At what age did your mom first notice signs of peri-menopause, and when did her cycling cease completely? Did she have any particular challenges? If so, has she any advice or wisdom to offer?
6. Did your mom experience any hormone-related concerns such as endometriosis, estrogen-dominance, PCOS, or chronic low libido? How did she deal with these? Would she do anything differently?

7. Were there any other hormone-related health concerns that your Mom dealt with or is dealing with, such as thyroid or adrenal/cortisol imbalances for which you may be predisposed?

These may seem like simple questions—so simple that you may not have thought to ask. Your mom may not want to burden you with her health challenges, or may have kept things private for other reasons, but she may be willing to share now because you asked.

It's not only important to know more about family hormonal health patterns because of inherited genes, but because other factors that impact hormones, such as eating habits, food preferences, how we cope with stressors, and habits around sleep and exercise can also be passed down through family.

The earlier you know, the more you can prepare for inherited imbalances for which you may be predisposed.

And, when the time comes, you can confidently pass this wisdom along to your own children!

[i] Shah D, Nagarajan N. Luteal insufficiency in first trimester. Indian Journal of Endocrinology and Metabolism. 2013;17(1):44–49. doi:10.4103/2230–8210.107834.

[ii] Operative delivery and postnatal depression: a cohort study. BMJ 2005; 330 doi: <https://doi.org/10.1136/bmj.38376.603426.D3> (Published 14 April 2005)



Dr. Kimberly Higney helps women restore hormone health and metabolism through lifestyle and functional nutrition. She practices on the New Hampshire Seacoast. For more information visit www.cardeaseacoast.com

CARDEA