

---

# Estrogen Metabolism

*Estrogen metabolism includes breaking down and eliminating unwanted estrogen through various pathways in your body. If estrogen is too high, out of balance with other hormones, or improperly broken down, that could interfere with reproductive health and increase the risk of certain cancers.*

---

## STRATEGIES TO SUPPORT ESTROGEN METABOLISM

- Follow a healthy food plan
- Get plenty of fiber
- Support gut microbiome balance, such as by eating fermented foods
- Eat cruciferous vegetables
- Enjoy antioxidant-rich foods
- Include omega-3 fats
- Get regular physical activity
- Maintain a healthy weight
- Manage stress
- Prioritize sleep
- Take targeted supplements (such as DIM), if advised by your practitioner
- Use natural body care and home products
- Limit alcohol intake

---

## Understanding Estrogen

Estrogen is an umbrella term for a family of hormones or signaling agents. The three main types of estrogen are estrone (E1), estradiol (E2), and estriol (E3). Estradiol is the most active form.<sup>1</sup> For simplicity, all forms of the hormone will be referred to as estrogen here.

Estrogen is well-known to play vital functions in women's health, but it also has important roles in men's health.<sup>2</sup> Though most often thought of as a reproductive hormone, estrogen is active throughout the body, including your bones, brain, and thyroid gland.<sup>3-5</sup>

## Why Does Estrogen Metabolism Matter?

When your body is done using estrogen, much of it is transported to your liver to be broken down (metabolized). As your liver processes the hormone, estrogen metabolites or by-products are created. These metabolites travel via bile through your gut. Some metabolites are excreted in your stools or urine, and some are reabsorbed.<sup>6</sup> These processes help maintain hormone balance.

Sometimes we don't eliminate enough estrogen. When estrogen is too high compared to other sex hormones, particularly progesterone, it's called "estrogen dominance."<sup>7</sup> This can worsen hormone-related conditions such as endometriosis (painful, abnormal growth of uterine tissue), premenstrual syndrome (PMS), premenstrual dysphoric disorder (a more severe form of PMS), and polycystic ovarian syndrome (PCOS; a top cause of infertility).<sup>7</sup>

Disruptions in estrogen metabolism pathways can also promote DNA damage. This damage increases the risk of hormone-related cancers. Elevated levels of some estrogen metabolites have been linked with a higher risk of breast, ovarian, and prostate cancer.<sup>1,8</sup>

## Maintaining Estrogen Balance

Many factors, including nutrition, stress, toxin exposure, and genetics, affect estrogen metabolism.<sup>1,9-11</sup> In addition, estrogen metabolism may impact or be

impacted by various health conditions, such as metabolic syndrome, anorexia nervosa, hypothyroidism, autoimmunity, and gut dysbiosis (an imbalance of gut microbes, such as bacteria).<sup>6,12-15</sup>

Several aspects of a healthy eating plan and lifestyle may support proper estrogen metabolism, including:

- **Fiber** can bind harmful estrogen metabolites and estrogen-mimicking toxins in your gut so they can be carried out in your stools.<sup>16</sup> Studies have shown a decreased risk of breast cancer with higher amounts of fiber in the diet.<sup>17,18</sup> Generally, women should aim for at least 25 grams, and men should aim for at least 38 grams of fiber per day.<sup>19</sup> Drink plenty of water to support healthy elimination, too.
- **Gut microbiome support**, such as eating a variety of fiber-rich plant foods and consuming fermented foods like yogurt, aims to maintain a healthy balance of gut bacteria. That's important because a subset of the gut microbiome (called the estrobolome) supplies enzymes that metabolize unwanted estrogen, sometimes putting it back into circulation rather than eliminating it as desired.<sup>20</sup> Studies suggest a balanced gut microbiome helps keep estrogen levels in check.<sup>21,22</sup> For tips on supporting gut microbiome balance, ask your functional medicine provider about IFM's [Eating for Your Microbiome](#) and [Probiotic and Prebiotic Foods](#) handouts.
- **Cruciferous (brassica) vegetables** are those in the broccoli family. These vegetables provide plant compounds that may support estrogen metabolism and reduce the risk of certain hormone-related cancers.<sup>23,24</sup> Ask your functional medicine provider about IFM's [Food Sources of Cruciferous Vegetables](#) handout for more information.
- **Antioxidant-rich foods** are linked with a lower risk of certain cancers, including breast cancer.<sup>25,26</sup> Antioxidants help neutralize free radicals (damaging molecules), such as those produced in the liver during estrogen detoxification.<sup>27</sup> IFM's [Phytonutrient Spectrum](#) handouts contain antioxidant-rich, brightly colored fruits and vegetables, green tea, herbs, and spices. Eating a "rainbow of colors" is an easy way to remember to get your daily antioxidants.
- **Omega-3 fats**, which are abundant in fish oil and certain fish, may help reduce inflammation and support healthy estrogen metabolism.<sup>28,29</sup> Wild-caught salmon, sardines, herring, and anchovies are all excellent omega-3 sources and low in mercury.<sup>30</sup> Farm-raised fish tend to be higher in PCBs (polychlorinated bisphenols) and other pollutants that should be avoided because they can disrupt estrogen metabolism.<sup>31,32</sup> Flaxseed is a plant source of omega-3 fat but is less potent than the omega-3s in fish oil. However, flaxseed also contains lignans, which are plant compounds that may support healthy estrogen metabolism.<sup>33</sup>
- **Healthy lifestyle factors**, such as being physically active, maintaining a healthy weight, getting enough sleep, and managing stress, are sometimes overlooked. However, such factors may support healthy estrogen levels and help reduce the risk of some cancers, such as breast cancer.<sup>1,34-37</sup>

- **Certain dietary supplements** may support healthy estrogen metabolism, sex hormone balance, and reproductive health. Following are a few supplements to consider. Talk to your functional medicine provider for tailored supplement advice, including the type, brand, and dosing.
  - **Diindolylmethane (DIM) and indole-3-carbinol (I3C)** are related compounds that support healthy estrogen metabolism and may help reduce the risk of certain cancers.<sup>38,39</sup> I3C is a phytonutrient from cruciferous vegetables and can be converted to DIM (and other beneficial compounds) in your gut.<sup>40,41</sup> Supplements supplying I3C or DIM individually, as well as in combination, are available.
  - **N-acetyl cysteine (NAC)** is an antioxidant and anti-inflammatory compound. It also supports your body's production of glutathione, a top antioxidant that protects your body's cells and DNA.<sup>42</sup> In addition, taking NAC has been linked with improvement in some painful inflammatory conditions related to estrogen dominance, such as endometriosis.<sup>43-45</sup>
  - **Melatonin** is a hormone best known for helping with sleep. However, studies suggest it has many other roles in the body, including acting as an antioxidant and supporting healthy sex hormone levels.<sup>46,47</sup> Scientists are exploring how melatonin supplements might help with PCOS, among other conditions related to sex hormone imbalance.<sup>48,49</sup> Preliminary human studies are encouraging, but more are needed.

### *Minimizing Disruptions in Estrogen Metabolism*

Following are several factors that can interfere with estrogen metabolism. Though you can't control all of them, you can manage or minimize them.

- **Xenoestrogens** are compounds that can mimic estrogen in the body and may disrupt healthy estrogen metabolism.<sup>50,51</sup> Many personal care and home products contain manufactured xenoestrogens, such as bisphenol A (BPA) and phthalates.<sup>52</sup> You may also be exposed to xenoestrogens from nature, such as zearalenone, a toxin produced by *Fusarium* mold.<sup>53,54</sup> *Fusarium* can contaminate water-damaged buildings and some crops, such as corn. Ask your functional medicine provider about IFM's handouts to limit exposure to toxins and mold. For more information on choosing safer body and home-care products, visit the [Environmental Working Group website](#).
- **Variants in certain genes** related to detoxification (such as COMT, MTHFR, CYP1A1, CYP1B1, and GST) can impact estrogen metabolism.<sup>55,56</sup> Dietary modifications or certain supplements, such as methylated B vitamins, may be supportive if you have certain genetic variants.<sup>27,57</sup> Talk to your functional medicine provider or a genetic counselor if you'd like to find out how genetics may impact your hormonal and overall health.
- **Alcohol** is metabolized in the liver, as is estrogen. Higher intakes of alcohol can disrupt estrogen metabolism and increase breast and overall cancer risk.<sup>1,58</sup> In general, women should limit alcohol to 1 drink or less per day (and avoid it entirely if pregnant or trying to become pregnant). Men should

limit alcohol to 2 drinks or less per day.<sup>19</sup> That said, even light to moderate drinking is linked with increased cancer risk, especially breast cancer.<sup>59</sup> Ask your functional medicine provider to individualize alcohol recommendations for you based on your personal risk factors.

- **Insulin resistance and obesity** can disrupt estrogen balance.<sup>60</sup> On the other hand, healthy estrogen levels support weight control and insulin sensitivity.<sup>61-63</sup> Adopting sustainable healthy habits that promote insulin sensitivity and weight control supports healthy estrogen metabolism and may reduce estrogen-related cancer risk.<sup>64,65</sup> Some healthy habits include getting regular physical activity, choosing low-glycemic foods that are gentler on blood sugar, eating mindfully, seeking community support, and managing stress.
- **Certain medications**, including birth control pills and some forms of hormone replacement therapy (HRT) used for menopause, influence estrogen metabolism and may increase your risk of hormone-related cancers.<sup>66-68</sup> Discuss the benefits and risks of birth control pills and different forms of HRT with your functional medicine provider.

### *Taking the Next Steps*

Your functional medicine provider may recommend hormone testing to evaluate hormonal status and estrogen metabolism. Hormones can be tested in the blood, urine, or saliva. Each method has advantages and limitations. Talk to your provider to determine if hormone testing is right for you.

**The recommendations in this document should be followed under the supervision and guidance of a qualified healthcare practitioner.**

### REFERENCES

1. Wiggs AG, Chandler JK, Aktas A, Sumner SJ, Stewart DA. The effects of diet and exercise on endogenous estrogens and subsequent breast cancer risk in postmenopausal women. *Front Endocrinol.* 2021;12:732255. doi:10.3389/fendo.2021.732255
2. Alemany M. Estrogens and the regulation of glucose metabolism. *World J Diabetes.* 2021;12(10):1622-1654. doi:10.4239/wjcd.v12.i10.1622

3. Lu L, Tian L. Postmenopausal osteoporosis coexisting with sarcopenia: the role and mechanisms of estrogen. *J Endocrinol.* 2023;259(1):e230116. doi:10.1530/JOE-23-0116
4. Sato K, Takayama KI, Inoue S. Expression and function of estrogen receptors and estrogen-related receptors in the brain and their association with Alzheimer's disease. *Front Endocrinol.* 2023;14:1220150. doi:10.3389/fendo.2023.1220150
5. Brown EDL, Obeng-Gyasi B, Hall JE, Shekhar S. The thyroid hormone axis and female reproduction. *Int J Mol Sci.* 2023;24(12):9815. doi:10.3390/ijms24129815
6. Hu S, Ding Q, Zhang W, Kang M, Ma J, Zhao L. Gut microbial beta-glucuronidase: a vital regulator in female estrogen metabolism. *Gut Microbes.* 2023;15(1):2236749. doi:10.1080/19490976.2023.2236749
7. MacLean JA 2nd, Hayashi K. Progesterone actions and resistance in gynecological disorders. *Cells.* 2022;11(4):647. doi:10.3390/cells11040647
8. Cavalieri E, Rogan E. The 3,4-quinones of estrone and estradiol are the initiators of cancer whereas resveratrol and N-acetylcysteine are the preventers. *Int J Mol Sci.* 2021;22(15):8238. doi:10.3390/ijms22158238
9. Tsigos C, Kyrou I, Kassi E, Chrousos GP. Stress: Endocrine Physiology and Pathophysiology. In: Feingold KR, Anawalt B, Blackman MR, et al., eds. *Endotext.* South Dartmouth (MA): MDText.com, Inc.; October 17, 2020.
10. Sasikala S, Minu Jennifer M, Velavan K, Sakthivel M, Sivasamy R, Fenwick Antony ER. Predicting the relationship between pesticide genotoxicity and breast cancer risk in South Indian women in in vitro and in vivo experiments. *Sci Rep.* 2023;13(1):9712. doi:10.1038/s41598-023-35552-3
11. Zhao F, Hao Z, Zhong Y, et al. Discovery of breast cancer risk genes and establishment of a prediction model based on estrogen metabolism regulation. *BMC Cancer.* 2021;21(1):194. doi:10.1186/s12885-021-07896-4
12. Kuryłowicz A. Estrogens in adipose tissue physiology and obesity-related dysfunction. *Biomedicines.* 2023 Feb 24;11(3):690. doi:10.3390/biomedicines11030690
13. Fricke C, Voderholzer U. Endocrinology of underweight and anorexia nervosa. *Nutrients.* 2023;15(16):3509. doi:10.3390/nu15163509
14. Usha SMR, Bindu CM, Chandrika N. Thyroid dysfunction: an alternate plausibility in perimenopausal women. *J Midlife Health.* 2022;13(4):300-303. doi:10.4103/jmh.jmh\_67\_22
15. Angum F, Khan T, Kaler J, Siddiqui L, Hussain A. The prevalence of autoimmune disorders in women: a narrative review. *Cureus.* 2020;12(5):e8094. doi:10.7759/cureus.8094
16. Zengul AG, Demark-Wahnefried W, Barnes S, et al. Associations between dietary fiber, the fecal microbiota and estrogen metabolism in postmenopausal women with breast cancer. *Nutr Cancer.* 2021;73(7):1108-1117. doi:10.1080/01635581.2020.1784444
17. Farvid MS, Spence ND, Holmes MD, Barnett JB. Fiber consumption and breast cancer incidence: a systematic review and meta-analysis of prospective studies. *Cancer.* 2020;126(13):3061-3075. doi:10.1002/cncr.32816
18. Hu J, Wang J, Li Y, Xue K, Kan J. Use of dietary fibers in reducing the risk of several cancer types: an umbrella review. *Nutrients.* 2023;15(11):2545. doi:10.3390/nu15112545
19. U.S. Department of Agriculture and U.S. Department of Health and Human Services. *Dietary Guidelines for Americans, 2020-2025.* 9th ed. December 2020. <https://www.dietaryguidelines.gov/resources/2020-2025-dietary-guidelines-online-materials>. Accessed October 17, 2023.
20. Peters BA, Lin J, Qi Q, et al. Menopause is associated with an altered gut microbiome and estrobolome, with implications for adverse cardiometabolic risk in the Hispanic Community Health Study/Study of Latinos. *mSystems.* 2022;7(3):e0027322. doi:10.1128/mSystems.00273-22
21. Le N, Cregger M, Brown V, et al. Association of microbial dynamics with urinary estrogens and estrogen metabolites in patients with endometriosis. *PLoS One.* 2021;16(12):e0261362. doi:10.1371/journal.pone.0261362
22. Pai AH, Wang YW, Lu PC, Wu HM, Xu JL, Huang HY. Gut microbiome-estrobolome profile in reproductive-age women with endometriosis. *Int J Mol Sci.* 2023;24(22):16301. doi:10.3390/ijms242216301
23. Pathak DR, Stein AD, He JP, et al. Cabbage and sauerkraut consumption in adolescence and adulthood and breast cancer risk among US-resident Polish migrant women. *Int J Environ Res Public Health.* 2021 Oct 14;18(20):10795. doi:10.3390/ijerph182010795
24. Lu YT, Gunathilake M, Kim J. The influence of dietary vegetables and fruits on endometrial cancer risk: a meta-analysis of observational studies. *Eur J Clin Nutr.* 2023;77(5):561-573. doi:10.1038/s41430-022-01213-3
25. Park YM, Shivappa N, Petimar J, et al. Dietary inflammatory potential, oxidative balance score, and risk of breast cancer: findings from the Sister Study. *Int J Cancer.* 2021;149(3):615-626. doi:10.1002/ijc.33581
26. Sasanfar B, Toorang F, Maleki F, Esmailzadeh A, Zendejdel K. Association between dietary total antioxidant capacity and breast cancer: a case-control study in a Middle Eastern country. *Public Health Nutr.* 2021;24(5):965-972. doi:10.1017/S1368980019004397
27. Panda C, Komarnytsky S, Fleming MN, et al. Guided metabolic detoxification program supports phase II detoxification enzymes and antioxidant balance in healthy participants. *Nutrients.* 2023;15(9):2209. doi:10.3390/nu15092209
28. Marcinkowska A, Górnicka M. The role of dietary fats in the development and treatment of endometriosis. *Life.* 2023 Feb 27;13(3):654. doi:10.3390/life13030654
29. Onyegbule OA, Meludu SC, Dioka CE, et al. Effect of omega-3 supplementation on serum adiponectin and fertility hormones in women with polycystic ovarian syndrome. *JASCP.* 2022 May-Aug;3(2):43-48. doi:10.4103/jascp.jascp\_8\_22
30. National Institutes of Health: Office of Dietary Supplements. Omega-3 fatty acids: fact sheet for health professionals. <https://ods.od.nih.gov/factsheets/Omega3FattyAcids-HealthProfessional/#h3>. Updated February 15, 2023. Accessed November 13, 2023.
31. Butler AE, Brennan E, Drage DS, Sathyapalan T, Atkin SL. Exploration of the correlation of serum polychlorinated biphenyl levels with luteal phase hormonal parameters and infertility in women with or without polycystic ovary syndrome. *Front Endocrinol.* 2023 Oct 2;14:1270949. doi:10.3389/fendo.2023.1270949
32. Saktrakulka P, Lan T, Hua J, Marek RF, Thorne PS, Hornbuckle KC. Polychlorinated biphenyls in food. *Environ Sci Technol.* 2020 Sep 15;54(18):11443-11452. doi:10.1021/acs.est.0c03632
33. Bjørklund G, Shanaida M, Lysiuk R, et al. Natural compounds and products from an anti-aging perspective. *Molecules.* 2022 Oct 20;27(20):7084. doi:10.3390/molecules27207084
34. Ravichandran H, Janakiraman B. Effect of aerobic exercises in improving premenstrual symptoms among healthy women: a systematic review of randomized controlled trials. *Int J Womens Health.* 2022 Aug 16;14:1105-1114. doi:10.2147/IJWH.S371193
35. Lawrence WR, McDonald JA, Williams F, et al. Stressful life events, social support, and incident breast cancer by estrogen receptor status. *Cancer Prev Res.* 2023;16(5):259-267. doi:10.1158/1940-6207.CAPR-22-0472

36. Gosain R, Gage-Bouchard E, Ambrosone C, Repasky E, Gandhi S. Stress reduction strategies in breast cancer: review of pharmacologic and non-pharmacologic based strategies. *Semin Immunopathol.* 2020 Dec;42(6):719-734. doi:10.1007/s00281-020-00815-y
37. Beroukhim G, Esencan E, Seifer DB. Impact of sleep patterns upon female neuroendocrinology and reproductive outcomes: a comprehensive review. *Reprod Biol Endocrinol.* 2022 Jan 18;20(1):16. doi:10.1186/s12958-022-00889-3
38. Yerushalmi R, Bargil S, Ber Y, et al. 3,3-diindolylmethane (DIM): a nutritional intervention and its impact on breast density in healthy BRCA carriers. A prospective clinical trial. *Carcinogenesis.* 2020;41(10):1395-1401. doi:10.1093/carcin/bgaa050
39. Green T, See J, Schauch M, et al. A randomized, double-blind, placebo-controlled, cross-over trial to evaluate the effect of EstroSense® on 2-hydroxyestrone:16-alpha-hydroxyestrone ratio in premenopausal women. *J Complement Integr Med.* 2022;20(1):199-206. doi:10.1515/jcim-2022-0301
40. Vermillion Maier ML, Siddens LK, Uesugi SL, et al. 3,3'-diindolylmethane exhibits significant metabolism after oral dosing in humans. *Drug Metab Dispos.* 2021 Aug;49(8):694-705. doi:10.1124/dmd.120.000346
41. Reyes-Hernández OD, Figueroa-González G, Quintas-Granados LI, et al. 3,3'-Diindolylmethane and indole-3-carbinol: potential therapeutic molecules for cancer chemoprevention and treatment via regulating cellular signaling pathways. *Cancer Cell Int.* 2023;23(1):180. doi:10.1186/s12935-023-03031-4
42. Sekhar RV. GlyNAC supplementation improves glutathione deficiency, oxidative stress, mitochondrial dysfunction, inflammation, aging hallmarks, metabolic defects, muscle strength, cognitive decline, and body composition: implications for healthy aging. *J Nutr.* 2021;151(12):3606-3616. doi:10.1093/jn/nxab309
43. Eberle A, Nguyen DB, Smith JP, Mansour FW, Krishnamurthy S, Zakhari A. Medical management of ovarian endometriomas: a systematic review and meta-analysis. *Obstet Gynecol.* 2024;143(1):53-66. doi:10.1097/AOG.0000000000005444
44. Anastasi E, Scaramuzzino S, Viscardi MF, et al. Efficacy of N-acetylcysteine on endometriosis-related pain, size reduction of ovarian endometriomas, and fertility outcomes. *Int J Environ Res Public Health.* 2023;20(6):4686. doi:10.3390/ijerph20064686
45. Kashi EA, Salmani AA, Shafagh S, et al. Effects of oral N-acetyl cysteine on pain and plasma biochemical parameters in fibrocystic breast disorder: a randomized controlled trial. *Surg Open Sci.* 2022;10:69-73. doi:10.1016/j.sopen.2022.06.006
46. Patel A, Dewani D, Jaiswal A, Yadav P, Reddy LS. Exploring melatonin's multifaceted role in polycystic ovary syndrome management: a comprehensive review. *Cureus.* 2023;15(1):e48929. doi:10.7759/cureus.48929
47. Chen P, Zhang Q, Zhang T. Melatonin alleviates perimenopausal sleep disorders by regulating the expression of MTNR1A and hormone level: a retrospective study. *Clin Exp Obstet Gynecol.* 2023;50(2):27. doi.org/10.31083/j.ceog5002027
48. Jamilian M, Foroozanfard F, Mirhosseini N, et al. Effects of melatonin supplementation on hormonal, inflammatory, genetic, and oxidative stress parameters in women with polycystic ovary syndrome. *Front Endocrinol (Lausanne).* 2019;10:273. doi:10.3389/fendo.2019.00273
49. Pilehvari S, Yavangui M, Paknahad E, Cheraghi Z, Ghorbani M. The boosting effects of melatonin on the in vitro fertilization (IVF) of women with polycystic ovary syndrome. *Chonnam Med J.* 2023 Sep;59(3):188-193. doi: 10.4068/cmj.2023.59.3.188
50. Wang LH, Chen LR, Chen KH. In vitro and vivo identification, metabolism and action of xenoestrogens: an overview. *Int J Mol Sci.* 2021;22(8):4013. doi:10.3390/ijms22084013
51. Márton É, Varga A, Penyige A, et al. Comparative analysis of transcriptomic changes including mRNA and microRNA expression induced by the xenoestrogens zearalenone and bisphenol A in human ovarian cells. *Toxins.* 2023;15(2):140. doi:10.3390/toxins15020140
52. Wang X, Ha D, Yoshitake R, Chan YS, Sadava D, Chen S. Exploring the biological activity and mechanism of xenoestrogens and phytoestrogens in cancers: emerging methods and concepts. *Int J Mol Sci.* 2021 Aug 16;22(16):8798. doi:10.3390/ijms22168798
53. Malekinejad F, Fink-Gremmels J, Malekinejad H. Zearalenone and its metabolite exposure directs oestrogen metabolism towards potentially carcinogenic metabolites in human breast cancer MCF-7 cells. *Mycotoxin Res.* 2023;39(1):45-56. doi:10.1007/s12550-022-00472-0
54. Balló A, Busznyákné Székvári K, Czétány P, et al. Estrogenic and non-estrogenic disruptor effect of zearalenone on male reproduction: a review. *Int J Mol Sci.* 2023;24(2):1578. doi:10.3390/ijms24021578
55. Aronica L, Ordovas JM, Volkov A, et al. Genetic biomarkers of metabolic detoxification for personalized lifestyle medicine. *Nutrients.* 2022 Feb 11;14(4):768. doi:10.3390/nu14040768
56. Almeida M, Soares M, Fonseca-Moutinho J, Ramalhinho AC, Breitenfeld L. Influence of estrogenic metabolic pathway genes polymorphisms on postmenopausal breast cancer risk. *Pharmaceuticals.* 2021;14(2):94. doi:10.3390/ph14020094
57. Kiss E, Hajdu A, Forika G, Dank M, Krenacs T, Nemeth Z. The effect of dietary methyl-donor intake and other lifestyle factors on cancer patients in Hungary. *Cancers.* 2022;14(18):4432. doi:10.3390/cancers14184432
58. Starek-Świechowicz B, Budziszewska B, Starek A. Alcohol and breast cancer. *Pharmacol Rep.* 2023 Feb;75(1):69-84. doi:10.1007/s43440-022-00426-4
59. Rovira P, Rehm J. Estimation of cancers caused by light to moderate alcohol consumption in the European Union. *Eur J Public Health.* 2021;31(3):591-596. doi:10.1093/eurpub/ckaa236
60. Glassman I, Le N, Asif A, et al. The role of obesity in breast cancer pathogenesis. *Cells.* 2023;12(16):2061. doi:10.3390/cells12162061
61. Weidlinger S, Winterberger K, Pape J, et al. Impact of estrogens on resting energy expenditure: a systematic review. *Obes Rev.* 2023;24(10):e13605. doi:10.1111/obr.13605
62. Zhu J, Zhou Y, Jin B, Shu J. Role of estrogen in the regulation of central and peripheral energy homeostasis: from a menopausal perspective. *Ther Adv Endocrinol Metab.* 2023;14:20420188231199359. doi:10.1177/20420188231199359
63. De Paoli M, Zakharia A, Werstuck GH. The role of estrogen in insulin resistance: a review of clinical and preclinical data. *Am J Pathol.* 2021;191(9):1490-1498. doi:10.1016/j.ajpath.2021.05.011
64. Romanos-Nanclares A, Tabung FK, Sinnott JA, et al. Inflammatory and insulinemic dietary patterns and risk of endometrial cancer among US women. *J Natl Cancer Inst.* 2023;115(3):311-321. doi:10.1093/jnci/djac229
65. Pang Y, Wei Y, Kartsonaki C. Associations of adiposity and weight change with recurrence and survival in breast cancer patients: a systematic review and meta-analysis. *Breast Cancer.* 2022 Jul;29(4):575-588. doi:10.1007/s12282-022-01355-z
66. Barańska A, Błaszczyk A, Kanady W, Malm M, Drop K, Polz-Dacewicz M. Oral contraceptive use and breast cancer risk assessment: a systematic review and meta-analysis of case-control studies, 2009-2020. *Cancers.* 2021;13(22):5654. doi:10.3390/cancers13225654
67. Yoo TK, Han KD, Kim D, Ahn J, Park WC, Chae BJ. Hormone replacement therapy, breast cancer risk factors, and breast cancer risk: a nationwide population-based cohort. *Cancer Epidemiol Biomarkers Prev.* 2020;29(7):1341-1347. doi:10.1158/1055-9965.EPI-20-0038
68. Abenhaim HA, Suissa S, Azoulay L, Spence AR, Czuzoj-Shulman N, Tulandi T. Menopausal hormone therapy formulation and breast cancer risk. *Obstet Gynecol.* 2022;139(6):1103-1110. doi:10.1097/AOG.0000000000004723