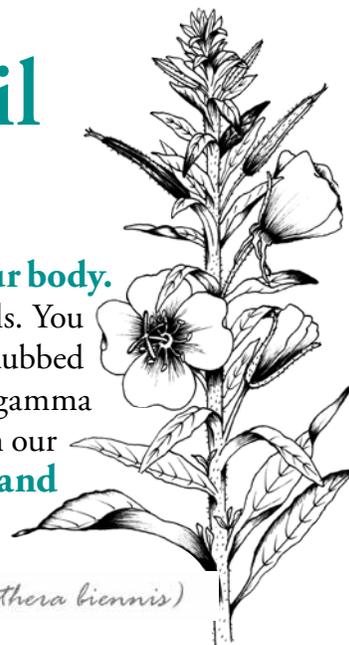


# The Missing Omega Evening Primrose Oil

by Ivy Wood

**It's a fact. Omega-3 oils are heart, joint and everything else healthy for your body.**

And by now you know you can get those healthy omega-3s from fish, flax or krill oils. You may also know that the typical American diet is overloaded with too much omega-6, dubbed the “bad boys” of the omega family and found in oils like corn and soybean. However, gamma linolenic acid (GLA) is the exception to the omega-6 rule and actually not abundant in our diets. **Research indicates that GLA also reduces inflammatory activity and notably menopausal symptoms.** So where will you get this important omega?



*Evening primrose (Oenothera biennis)*

**Oenothera biennis**, better known as evening primrose. This yellow flowering plant is recognized for its rich abundance of GLA. It was used by Native Americans to treat swelling in the body, and once European settlers were introduced to the curious plant's medicinal properties, it became a popular treatment in Europe in the 1800s. Over a hundred years later, GLA was finally discovered to be the reason for evening primrose's medicinal benefits.



One of the most common uses for evening primrose oil (EPO) is for menopausal symptoms. In one 2013 study evaluating the efficacy of EPO in treating hot flashes, researchers assigned participants to take either 500 mg of EPO twice a day or placebo for six weeks. They found that frequency, duration, and – most prominently – severity of hot flashes were reduced in the group of participants taking EPO. The researchers also made note that the women taking EPO also significantly improved “in social activities, relations with others, and sexuality.” Side *benefits*, not side *effects*!

 EPO being an effective option is great news! The National Heart, Lung, and Blood Institute (NHLBI) explained in a press release that they would no longer recommend hormone replacement therapy (HRT) in order to prevent heart disease, reduce hip fractures and relieve menopausal symptoms. The NHLBI explained it had found through a massive clinical trial that HRT lead to a “26 percent increase in breast cancer risk” as well as significant “increases in coronary heart disease, stroke, and pulmonary embolism” in the participants on HRT versus placebo. As such, the NHLBI determined that the risks of HRT far outweighed the benefits – leaving postmenopausal women to find alternative forms of relief.

In addition to menopausal symptoms, EPO may be useful in rheumatoid arthritis (RA), due to its antioxidant potential and anti-inflammatory properties. Multiple studies comparing the use of GLA to placebo in treatment of RA found GLA to be effective, such as one 24-week randomized, double-blind trial utilizing 1400 mg a day against placebo. The study's conclusion stated that GLA was “well-tolerated and effective treatment for active rheumatoid arthritis,” where it “reduced the number of tender joints by 36%, the tender joint score by 45%, swollen joint count by 28%, and the swollen joint score by 41%.”

More good news. Unlike HRT for menopausal symptoms and NSAIDs for inflammation, EPO is well tolerated without the side effects and long-term health risks. But if you want the benefits found in studies, look for EPO quality and in a standardized form.

## Summary

The two studies above illustrate the classic role of EPO for menopause and arthritis. Additionally, EPO has been studied in Sjogren's, multiple sclerosis, eczema, diabetic peripheral neuropathy and of course, premenstrual syndrome. Notably, one citation suggests EPO and magnesium successfully treat SEID (ME/Chronic Fatigue Syndrome). So whether you try EPO to help cut the inflammatory response or its other benefits, make sure to get the standardized amount (minimum 8% GLA) used in the research studies.



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References are included on the second page of this article.

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*The Missing Omega*  
Evening Primrose Oil

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