

Role of Hormones in Human Mental Disease: A Brief Review

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Date of Submission: 15-12-2025

Date of Acceptance: 25-12-2025

ABSTRACT

Hormones are peptide exist in our body as a number of chemical. hormones are two type endocrine and exocrine , endocrine are ductless chemical and there discharge direct reach to blood. They function as synthetic carriers and cells in different segments of our body to speak with each other. Unmistakable chemicals carry out various roles and pass on various messages. Every one fills a particular need and has a one of a kind structure. They control digestion, temperament, regenerative capability, and sexual wellbeing. The nerve center creates a few delivering and hindering chemicals that follow up on the pituitary organ, stimulating the arrival of pituitary hormones. and control it by negative and positive criticism component the pituitary chemicals, a few follow up on different organs situated in different locales of the body, while other pituitary chemicals straightforwardly influence their objective organs. Other chemical creating organs all through the body incorporate the adrenal organs, which fundamentally produce cortisol; the balls (i.e., ovaries and testicles), which produce sex chemicals; the thyroid, which produces thyroid chemical. Psychological well-being is characterized as a condition of wellbeing in which an individual understands their volumes, can deal with the ordinary tensions of life, can act productively and successfully, and participate as a sound individual in the connections of their local area. Psychological wellness implies profound and mental wellbeing, such that an individual can utilize his reasoning and capacities, capability in the public eye, and meet the ordinary necessities of day to day survival. Prevention the approaching out of psychological instability and working on the psychological climate of fundamental emotional well-being requirements are thought of. An individual who can defeat the standard tensions of day to day existence and have a self-overseeing life can be presented as an individual with emotional well-being. Wellbeing, disposition, and appearance that we

frequently don't ponder except if we have a physical or psychological sickness. Chemicals influence feelings and variables connected with the human way of life, and paying attention to them can assist with having a sound way of life in people. Psychological wellness is about individuals' thought process, feel, and act. Psychological wellness experts can assist individuals with despondency, tension, Schizophrenia (Thought issue) bipolar turmoil (lunacy), habit, and different circumstances that influence their considerations, sentiments, and ways of behaving. Social and monetary conditions, unfavorable youth encounters, organic elements, and basic ailments can all shape an individual's emotional well-being.

key words: AVP (vasopression) , ACTH (Adrenocorticotrophic hormone), CRH (corticotropin-releasing hormone), HPA (Hpothalamic Pituitary adrenal), CBG (cortisol-binding globulin) PD (Parkinsonism disease) ventral tegmental area (VTA), precursor protein proopiomelanocortin (POMC) Aromatic amino acid decarboxylase (AADC), Leg Standing Balance Test (OLSBT). Star Excursion Balance Test (SEBT).dopamine transporter(DAT)

I. INTRODUCTION

Hormones (extended range secreted into blood by endocrine gland) are chemicals synthesized and produced by the specialized glands to control and regulate the activity of certain cells and organs. These specialized glands are known as endocrine glands. Distinct hormones perform different functions and convey different messages. Each one serves a specific purpose and has a unique composition. They control metabolism, mood, reproductive function, and sexual health⁸. Norepinephrine, dopamine, and serotonin (released into blood by neurons) are well known in the psychiatric field to be significant biochemical regulators of our mood and psychological well-being. These three neurohormones form the foundation of current biochemical mental health

pharmaceutical treatments in conjunction with psychotherapy and lifestyle modification.^{8,11} Dopamine and catecholamine that is used as a neurotransmitter both in the periphery and in the central nervous system. Dysfunction in various dopaminergic systems is known to be associated with various disorders, including schizophrenia, Parkinson's disease, and Tourette's syndrome. Furthermore, microdialysis studies have shown that addictive drugs increase extracellular dopamine and brain imaging has shown a correlation between euphoria and psycho-stimulant-induced increases in extracellular dopamine.⁷ These consequences of dopamine dysfunction indicate the importance of maintaining dopamine functionality through homeostatic mechanisms that have been attributed to the delicate balance between synthesis, storage, release, metabolism, and reuptake.³ The hormone impedes chemicals like dopamine and serotonin, which help regulate sound mood, sleep, and digestion. Those with endocrine disorders do not just have to deal with physical symptoms; they are also susceptible to psychiatric ill-health symptoms such as anxiety, depression, lethargy, brain fog, mania and confusion. The thyroid gland is responsible for producing hormones called T3 and T4. There is an abundance of T3 receptors in the brain and so this hormone is the one that is the more important for our mental health. While the hormone cortisol can be helpful (small amounts of stress can be good at times), too much of it can lead to health complications. Namely anxiety disorders can manifest as a result of too much cortisol, but physical conditions may arise as well. Cushing's disease is one health disorder that results in weight issues, physical deformation, and anxiety.²⁰ Estrogen (E1, E2 and E3) is a group of hormones that play a major role in our body's physiology, ranging from bone health, female characteristic developments, to our emotional well-being. Apart from the reproductive shifts associated with progesterone, high levels of the hormone is associated with increased amygdala sensitivity (the part of the brain associated with the fight or flight panic response) leading to a greater probability of anxiety, depression, insomnia, and a general down. Low levels of progesterone can contribute to estrogen dominance and mood changes such as anxiety, depression, mental smog, irritability, and more.^{8,25} Estrogen integration and coordination of metabolism enables the development of peripheral biomarkers which can serve as reporters of brain bioenergetics, thereby providing early detection of populations at risk for neurodegenerative diseases associated with metabolic dysfunction, such as

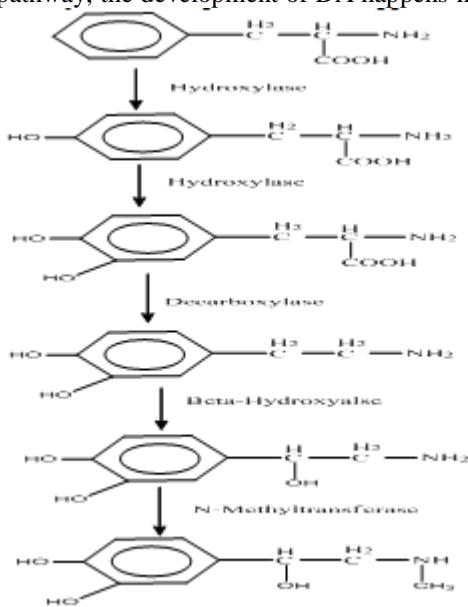
Alzheimer's disease.¹⁴ Major depression⁸ is nearly twice as prevalent in women compared to men. In bipolar disorder, depressive episodes have been reported to be more common amongst female patients. Furthermore, periods of depression often correlate with periods of hormonal fluctuations.¹⁰

THE CONNECTION BETWEEN HORMONES AND MENTAL HEALTH OF HUMEN

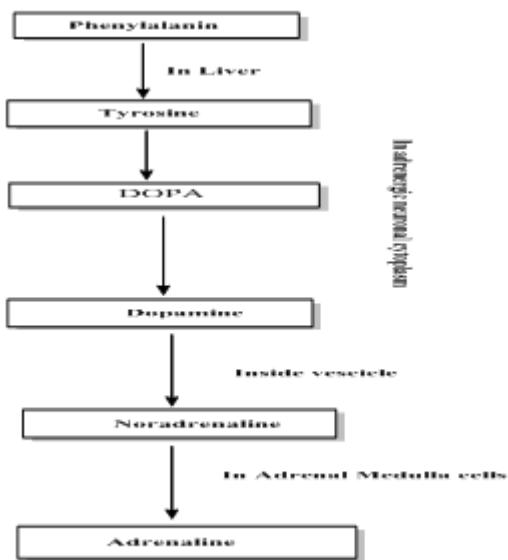
The association between emotional wellness and chemicals is that they straight forwardly correspond. Chemicals like cortisol, delivered by the adrenal organs, can cause us to feel worried. At the point when individuals are worried, they will probably have more elevated levels of cortisol. This chemical hinders synthetic compounds like dopamine and serotonin,² which assist with managing sound temperament, rest, and adjustment. While the chemical cortisol can be useful (limited quantities of pressure can be great now and again), a lot of it can prompt unexpected problems. In particular tension problems can appear because of a lot of cortisol, however states of being may emerge too. Cushing's illness is one wellbeing problem that outcomes in weight issues, actual deformity, and tension. Stress is a condition brings about by different factors and described by irregularity in body working, hinder in sensory system, and strain. The reason for this study was to analyze the impacts of cortisol level, which expansions in solid youthful people because of stress, on powerful and static equilibrium scores as well as to introduce the outcomes brought about by elevated degrees of stress. In this review, 107 sound medication workforce understudies in their subsequent year (who will take a similar panel test) matured somewhere in the range of 19 and 23 years were incorporated. The principal balance estimations and spit tests were required 40 days before the panel test, and this period was recognized as the casual period. Similar under studies were considered for balance estimations again upon the arrival of panel test; spit tests were gathered, and cortisol not entirely set in stone. This period was recognized as the unpleasant period. The State-Quality Uneasiness Stock (STAI) was given to the members in their loose and upsetting periods. Dynamic offset scores were estimated with Star Outing Equilibrium Test (SEBT). Static offset scores were estimated with One Leg Standing Equilibrium Test (OLSBT). Impact of expansion in cortisol level because of stress in solid youthful people on powerful and static equilibrium scores.⁶ Dopamine is a synapse both in the extreme and in the main sensory system. Brokenness in different

dopaminergic frameworks is known to be associated with different problems, including schizophrenia dopamine level high then typical, Parkinson's illness (low dopamine level), and Tourette's disorder (developments, or sounds that individuals do over and again). Moreover, microdialysis studies have shown that habit-forming drugs increase extracellular dopamine and cerebrum imaging has shown a relationship among's rapture and psycho-energizer prompted expansions in extracellular dopamine.⁷ These results of dopamine brokenness demonstrate the significance of keeping up with dopamine usefulness through homeostatic systems that have been credited to the sensitive harmony between blend, capacity, delivery, digestion, and reuptake.³ The two fundamental side effects are daydreams and mental trips. On account of hallucination, an individual firmly puts stock in the reality of things that others around them don't. One normal fancy an individual with psychosis might have is accepting that individuals are wanting to hurt them. In the instance of mental trip, the individual hears, sees and at times even scents, feels or tastes things that are not there. One normal illustration of visualization is hearing voices. When an individual encounters fancies as well as fantasy, they can end up being exceptionally troubled and may begin to change their way of behaving.

The event of crazy side effects is much of the time called a maniacal episode. Dopamine (DA) assumes an imperative part in remuneration and development guideline in the cerebrum. In the award pathway, the development of DA happens in



the ventral tegmental region (VTA), in nerve cell bodies. From that point, it is delivered into the core accumbens and prefrontal cortex. *In vivo*, the centralization of DA in the VTA is 4.8 ± 1.5 nM, while in red core, it is 0.5 ± 1.5 nM. The pathway for engine capabilities is unique. In this pathway, the substantia nigra cell bodies are liable for the creation and release of DA into the striatum. DA plays numerous capabilities in the mind.⁷ announced the job of DA in the balance of conduct and comprehension; willful development; inspiration; discipline and prize; hindrance of prolactin creation; rest; dreaming; temperament; consideration; working memory; and learning^{14,9} the illness correlates with schizophrenia. Parkinson's infection (PD) was first portrayed by Dr. James Parkinson in 1817 as a "shaking paralysis." It is a constant, moderate neurodegenerative sickness portrayed by both engine and nonmotor highlights. The infection clinically affects patients, families, and parental figures through its ever-evolving degenerative consequences for portability and muscle control. The engine side effects of PD are credited to the deficiency of striatal dopaminergic neurons, albeit the presence of nonmotor side effects upholds neuronal misfortune in nondopaminergic regions too. The term parkinsonism is a side effect complex used to portray the engine highlights of PD, which incorporate resting quake, bradykinesia, and solid unbending nature. PD is the most well-known reason for parkinsonism, albeit various auxiliary causes likewise exist, including sicknesses that mirror PD and medication incited causes^{13,9}



Tyrosine is normally viewed as the beginning mark in the biosynthesis of dopamine and this amino acid is plentiful in dietary proteins. Furthermore, dietary phenylalanine is switched over completely to tyrosine both in the liver by phenylalanine hydroxylase and furthermore in the dopamine neuron by tyrosine hydroxylase. Blood-borne tyrosine is taken up into the mind by a low-proclivity amino corrosive vehicle structure and thusly from cerebrum extracellular liquid into dopaminergic neurons by high-and low-fondness amino corrosive carriers. Whenever tyrosine has entered the neuron, its transformation to dihydroxyphenylalanine (L-DOPA), driven by the cytosolic catalyst tyrosine hydroxylase, is regularly the rate-restricting move toward dopamine biosynthesis. Tyrosine accessibility doesn't impact the pace of tyrosine hydroxylation *in vivo* under typical circumstances in most dopaminergic neurons, however when the protein is enacted, or in dopamine neuronal frameworks that have a moderately high basal terminating rate (e.g., dopamine neurons projecting to the average prefrontal cortex), tyrosine levels can influence the pace of change to L-DOPA. Transient enactment of tyrosine hydroxylase includes phosphorylation of the administrative space by protein kinases and perhaps at the same time by elective grafting. The initiated type of tyrosine hydroxylase is remembered to have a lower *Km* for its pterin cofactor, and a higher *Ki* for dopamine, which really lessens finished result restraint. In primates, however not rodents, numerous tyrosine hydroxylase mRNAs are created through elective mRNA joining from a solitary essential record, and it has been guessed that different isoforms of tyrosine hydroxylase may happen in various mind districts or be communicated differentially during improvement or illness. The action of the chemical dihydropteridine reductase is in a approximately way connected to dopamine biosynthesis, as this protein catalyzes the reusing of the quinonoid dihydrobiopterine to tetrahydrobiopterine, which is a fundamental cofactor of tyrosine hydroxylase. Moreover, it ought to be noticed that the amalgamation of tetrahydrobiopterine is itself reliant upon the action of another catalyst, GTP-cyclohydrolase-1. Sweet-smelling amino corrosive decarboxylase (AADC, dopa decarboxylase) is the protein answerable for the cytosolic change of L-DOPA to dopamine. This compound so enthusiastically decarboxylates L-DOPA that the levels of this amino corrosive in mind are exceptionally low under ordinary circumstances.

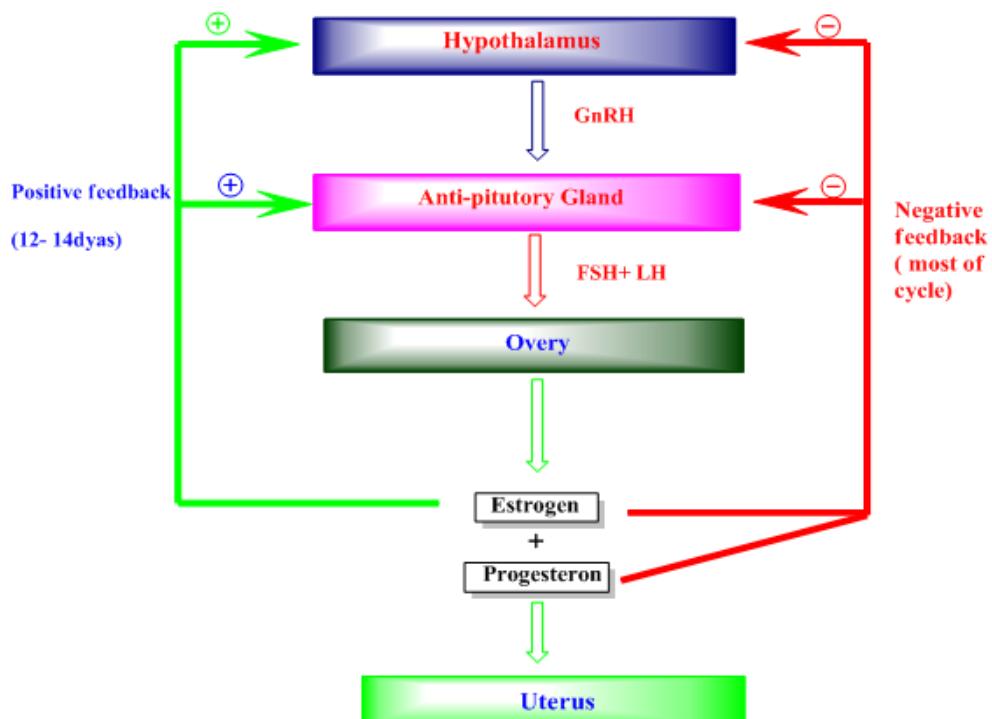
D-fragrant amino acids are not substrates for AADC; be that as it may, during the 1960s D-DOPA was regulated to some Parkinson's sickness patients as racemic DOPA. In the fringe D-DOPA can be switched over completely to 3,4-dihydroxyphenylpyruvic corrosive by D-amino oxidase. Thus 3,4-dihydroxyphenylpyruvic corrosive is a substrate for transaminase and the result of this response is L-DOPA (40). Treatment with racemic DOPA was stopped, be that as it may, as the utilization of L-DOPA was related with less secondary effects. While dopamine is the principal final result of the enzymatic responses portrayed above, other purported follow amines (e.g., phenylethylamine) can be created by these chemicals, even though the capabilities they have stay doubtful. What's more, it has been placed as of late that L-DOPA may capability as a synapse or neuromodulator by its own doing. More subtleties on dopamine union are contained in different articles and surveys DA can be a precursor in the biosynthesis of other related catecholamines like norepinephrine and epinephrine. Norepinephrine is orchestrated from DA by the synergist activity of DA β -hydroxylase within the sight of L-ascorbic corrosive and sub-atomic oxygen (O_2). Norepinephrine then, at that point, followed up on by the chemical phenylethanolamine N-methyltransferase with S-adenosyl-L-methionine (same) as a cofactor to create epinephrine^{15, 91}. In the synapse, DA binds to either postsynaptic or presynaptic DA receptors or both. This bond, regardless of the receptor, generates an electric potential in the presynaptic cell. In the case of postsynaptic DA receptors, the signal is propagated to the postsynaptic neuron, while, in the case of presynaptic DA receptors, the signal can either excite the presynaptic cell or inhibit it. Presynaptic receptors with an inhibitory potential, also known as autoreceptors, inhibit the synthesis and release of neurotransmitters and thus function to maintain normal levels of DA. After carrying out its synaptic function, DA is taken up again into the cytosol by presynaptic cells through the actions of either high-affinity DA transporters (DAT) or low-affinity plasma membrane monoamine transporters. Once in the synaptic neuron, amphetamine exercises a reverse influence on the action of DA transporters (DAT) and forces DA molecules out of storage vesicles and into the synaptic gap. The DA transporter is a sodium-coupled symporter protein responsible for modulating the concentration of extraneuronal DA in the brain. The DA now in the cytosol is then repackaged into vesicles by the action of vesicular monoamine transport,

VMAT₂¹⁴. Noradrenaline (norepinephrine) is found in cell bodies in the pons and medulla. These bodies project neurons to the nerve center, thalamus, limbic framework and cerebral cortex. It comes as no extraordinary amazement, along these lines, to find that noradrenaline adds to control of temperament and excitement and can influence rest designs. Exhaustion of noradrenaline (norepinephrine) in the mind has been displayed to cause a lessening in drive and inspiration and may be connected to despondency. It is important for the 'instinctive' reaction, which increments pulse, etc⁴

NEGATIVE AND POSITIVE FEED BACK MECHANISM

To maintain the body's homeostasis and respond appropriately to changes in the

environment, hormone production and secretion must be tightly controlled. To achieve this control, many bodily functions are regulated not by a single hormone but by several hormones that regulate each other. For example, for many hormone systems, the hypothalamus secretes so-called releasing hormones, which are transported via the blood to the pituitary gland. There, the releasing hormones induce the production and secretion of pituitary hormones, which in turn are transported by the blood to their target glands (e.g., the adrenal glands, gonads, or thyroid). In those glands, the interaction of the pituitary hormones with their respective target cells results in the release of the hormones that ultimately influence the organs targeted by the hormone cascade^{20,22}



Endogenous morphine, coined by the transforming of the two distinct terms into endorphins, are narcotic neuropeptides that are normally created in the body that serve an essential capability as a specialist obstructing the impression of torment and, furthermore, present in instances of delight. By and large, morphine receptors were found in the sensory system before the revelation and comprehension of endorphins. This regular receptor addressed the chance of the presence and

impact of endorphins that was subsequently affirmed.

Endorphins were found to not just showcase capabilities as synapses in the focal sensory system yet also as peptide chemicals delivered into the circulatory framework by the pituitary organ. Endorphins have been connected clinically to instances of mental issues, including chemical imbalance, sadness, and depersonalization problem, as well as to exercises,

for example, chuckling and fiery high-impact practice Beta-endorphins are basically blended and put away in the front pituitary gland from their antecedent protein proopiomelanocortin (POMC). Nonetheless, late examinations recommend cells of the invulnerable framework are additionally equipped for beta-endorphin union since insusceptible cells have mRNA records for POMC3 and T-lymphocytes, B-lymphocytes, monocytes and macrophages have been displayed to contain endorphins during aggravation¹⁹. POMC is a huge protein that is separated into more modest proteins, for example, beta-endorphin, alpha-melanocyte invigorating chemical (MSH), adrenocorticotropin (ACTH), and others. The pituitary organ blends POMC in light of a sign from the nerve center; that sign being corticotropin-delivering chemical (CRH). The nerve center deliveries CRH in light of physiologic stressors like agony, as in the postoperative period. At the point when the protein results of POMC cleavage gather in overabundance, they switch hypothalamic CRH creation off - that is, criticism restraint happen⁵. Estrogens, or the prompt downstream items that they initiate, have for quite some time been known to change conceptional ways of behaving. Perfect representations are sexual receptivity and maternal way of behaving. Notwithstanding, estrogens can likewise adjust nonreproductive ways of behaving and cell reactions including mind-set, effect, tension, dread, locomotor action, growth susceptibility, and weakness to habit-forming drugs. In a few cases these estrogenic impacts on conduct have been confined to explicit cerebrum regions. For instance, estrogens adjust locomotor action through activities in the average preoptic region, while tension and adapted dread seem, by all accounts, to be constrained by the amygdala, and formative and cancer development impacts have been archived in the cerebellum. Every one of these cerebrum locales communicates both α and β subtypes of estrogen receptors (emergency rooms), in spite of the fact that their equilibrium changes between areas. Other, more clever trama center applicants found in various cerebrum areas are likewise starting to be analyzed.²⁵ Epidemiologic perceptions of sex contrasts in the beginning and course of schizophrenia provoked investigation of estrogen's post in schizophrenia. Ladies with schizophrenia present with their most memorable episode on normal around 5 years after the fact than their male counterparts.⁴⁻⁷ Life cycle studies have shown that ladies are more vulnerable for either a first episode or a backslide of existing

sickness at 2 significant times of hormonal change: during the post pregnancy time frame (related with a reduction in estrogen levels)⁸ and during menopause (when estrogen creation decreases).⁹⁻¹¹ On the other hand, constant psychoses and backslide rates improve during pregnancy, when estrogen plasma levels are high.^{8,12} Levels of psychopathological side effects have likewise been seen to vary with period stages¹⁶. While reads up consider a job for the variances of sex gonadal chemicals in the phenomenology of schizophrenia in ladies and men, there is little examination on the profiles of testicle chemicals and neurosteroids in this turmoil progesterone as a disregarded chemical in schizophrenia, pronouncing a job for this chemical in patients' side effects, overwhelmingly bad side effects, and its relationship with estradiol levels (16), opening spaces for additional investigations. Low estrogen levels increment the pace of problems, for example, unpredictable feminine cycle in ladies with schizophrenia, which has been credited to antipsychotic-prompted hyperprolactinemia. Nonetheless, there is proof nullifying the event of "hypoestrogenism" in schizophrenic ladies just treated with antipsychotics causing hyperprolactinemia. Albeit the specific component hidden the low degrees of estrogen in schizophrenic ladies is yet to be uncovered, "hypoestrogenism" is of clinical significance since estrogen appears to apply an antipsychotic impact and decidedly influence the sickness cycle in schizophrenic ladies. Contrasted with sound people, the serum levels of estradiol decrease in ladies with schizophrenia before menopausal and monthly cycle. Likewise, the diminished plasma progesterone levels in the luteal stage demonstrate ovulatory cycles and lacking follicle development. Higher normal estrogen levels have been related with better neuropsychological execution in different mental areas, including leader execution, verbal memory, spatial memory, center/speed, and worldwide mental capability. In sound individuals, estrogen appears to have a more unambiguous relationship with verbal memory and familiarity. There are irregularities between the investigations evaluating the impacts of sex chemicals on schizophrenia^{23,20,21}.

II. CONCLUSION:

Hormones are chemical messenger that release from endocrine system allowing cells various secretion of our body to communicate with one another their secretion are cut out there are manifest other symptoms balanced by negative and

positive feedback mechanism by pituitary gland and hypothalamus releasing and inhibitory hormone envolbment of these harmones are cortisol (Stress Hormone) , estrogen progesterone and testosterone , mental illness like stress anxiety depression schizophrenia Other neurotransmitters are norepinephrine , serotonin (5HT2 blocker) and dopapmine (D2 receptor blocker) (happiness hormone) can treat if imbalance occurs the process reuptake started these small changes these hormones can have have big harmone circulate our body they transmitted fom cellsandgland in one part of the of the body to cell in another they have distinct receptors , allowing to receive more then one type of hormone. The amount of recetors on a cells surface can alter through time The endocrine system composed of gland throughout our bodies hormone that produce into our blood sream the one of the hormone imbalance mental disease called mania or bipolar disease the person think overpowering .thus connection between hormones and mental disease directly correlets. Chemical like dopamine and serotonin, which help regulate sound sleep , and digestion .

low testosterone also known as andropouse when decline for example can cause weight gain tiredness and irritabilhytity these can also the symptoms of depression , hypothyroidism and post vial fatigue the psychological sign of low testosterone .drop in estrogen and progesterone can manke irritability and anxious. The thyroid hormone is one of the hormones that affect mood due to its potential to cause depression. It is responsible for controlling the body's metabolism, and too much or too little of the thyroid hormone can lead to weight gain (hypothyroidism) or weight loss (hyperthyroidism), mood changes, hormonal depression, too fast or too slow heart rate, irregular menstrual cycles, and more

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