

Menopause information

The purpose of this guide is to give you an overview of the menopause in which we highlight the links between the menopause and mental health conditions such as depression and anxiety.

We will also talk about how to manage the symptoms including the use of hormones and the use of other medication. We also discuss interventions that don't use any medication at all.

What is the menopause?

The menopause is when a woman who has menstrual periods stops having them for at least 12 months as a result of changes in the levels of a range of reproductive hormones.

- Hormonal levels change over the course of a few years before the last menstrual period, but the key change linked to the symptoms of the menopause is the acute drop in estradiol levels. Estradiol is an oestrogen.
- During the transition, periods may become more irregular and some of the symptoms characteristic of the menopause may surface.
- In some cases this transition lasts for a long time, in others it is abrupt.
- Tends to happen between age 45 to 55. In the UK the average is 51.

What are the symptoms?

- Most women will experience symptoms (75%) - some don't experience any symptoms at all (25%) and others will experience severe symptoms that can significantly disrupt their lives (25%).
- In the average case it's worth considering consulting with your GP and discuss whether hormone replacement therapy is right for you.

Symptoms can be so strong that they may feel like a medical emergency, however the symptoms of menopause in themselves are not dangerous.

Common symptoms

VASOMOTOR SYMPTOMS

- The most frequent symptoms are hot flushes and night sweats.
- They are likely caused by the decreasing level of oestrogens during the menopause and their effect on the temperature-regulation system we have in our brains.

- Women who experience night sweats describe waking up in the middle of the night covered in sweat even though their bedroom is cool and they are wearing appropriate nightclothes.

POOR SLEEP

- Perhaps related to the above symptoms, many women have difficulty sleeping.
- All aspects of sleep can be affected including getting to sleep, waking up many times in the middle of the night and waking up too early without being able to go back to sleep.
- Might be linked to the sleep and/or mood problems we have already discussed.

VAGINAL DRYNESS

- Vaginal dryness and discomfort during intimacy is also an important symptom frequently experienced during the menopause.
- Oestrogen levels directly regulate normal vaginal secretions and help maintain the appropriate environment.
- This can lead to an increased risk of having water infections.

Managing the symptoms of the menopause

Women experiencing these symptoms should not assume that they have to endure them. They can be extremely distressing and disruptive and can affect other aspects of health. The sleep problems themselves increase the risk of various health conditions. If the symptoms are troubling or these symptoms start before age 45 it is a good idea to consult with your GP.

HORMONAL TREATMENTS HORMONAL TREATMENTS

- The number one treatment for these symptoms is hormone replacement therapy. This can be an oestrogen or an oestrogen plus progesterone depending on your individual case and it can be given as tablets, gels, patches applied to the skin and implants
- Specifically for vaginal dryness oestrogen creams, water-based lubricants and moisturisers can be used successfully.
- It's important to avoid perfumed soaps, washes or douches. Also creams and lotions that are not appropriate should be avoided as they can cause infection. If moisturisers are used they should be specific for vaginal use

NON-PHARMACOLOGICAL TREATMENTS

- Weight loss can be effective for some women as there's a higher risk of having vasomotor symptoms in women with a high body mass index. Also improves sleep, joint pain and stiffness.
- Exercise is advisable as it reduces the severity of hot flushes. It also has demonstrable benefits in pain, depression and sleep.

HERBAL & ALTERNATIVE REMEDIES

- Some evidence that Isoflavones and purified pollen extract may show some benefits - isoflavones are too similar to oestrogens so they cannot be used if you cannot have HRT
- There is also some evidence for black cohosh.
- The important thing to remember about these remedies is that currently there is not enough evidence to recommend them. This is because the research is patchy and the products are not regulated. They can interfere with some medicines and they all have side effects.
- Acupuncture has not shown to be any better than an equivalent placebo and also has risks.

PSYCHOLOGICAL INTERVENTIONS

- A comprehensive review that explores a range of mind-body interventions to deal with the vasomotor symptoms of the menopause found that yoga did not offer any specific benefits over any other form of exercise.
- Similarly, reflexology appeared not to improve symptoms over similar placebos.

RELAXATION

- Mindfulness and mindfulness-based stress reduction are effective to control the severity of episodes but not their frequency.
- Hypnosis, visualisation and related techniques seem to also be beneficial both during training and after follow up.

All these are also helpful in anxiety and sleep problems.



COGNITIVE BEHAVIOURAL THERAPY (CBT)

CBT has shown a good reduction in the symptoms during the training, at 12 weeks and at 6 months after. It can be applied to depression, as well as anxiety and sleeping problems.

Where to get support

[British Menopause Society](#)

[Queer / LGBTQIA+ menopause](#) Supportive website for LGBTQIA+ people, but a really useful website open for everyone to use.

[Daisy Network - Early menopause support](#) Support for women experiencing early menopause.

[How gardening can support through menopause](#)

Books

- Liz Earle – **The Good Menopause Guide**
- Davina McCall – **Menopausal**
- Dr Louise Newson – **Preparing for the Perimenopause and Menopause**
- Haynes – **Menopause**
- Jane Lewis – **My Menopausal Vagina**
- Jackie Lynch – **The Happy Menopause**