

The Menopause

Information and advice for patients

Gynaecology

What is the menopause?

The medical definition of the menopause refers to the last ever monthly period a woman will have. Most people refer to the menopause as that time in their lives when they are experiencing menopausal symptoms.

You are described as being 'post-menopausal' when you have not had a bleed for 12 months in a row, without any hormonal treatment during this time.

You are described as being 'peri-menopausal' in the period of time leading up to the menopause where your periods start to vary in frequency and you experience early symptoms of the menopause, up until you have had 12 months without a period.

What causes the menopause?

The menopause occurs when the ovaries no longer have any eggs. The normal cycle of production of the female hormones of estrogen and progesterone declines. In the early stages of decline, the production of these hormones from the ovaries can be inconsistent.

Medical treatments such as chemotherapy can affect the function of the ovaries and cause the menopause.

If you have had an operation to remove your womb (a hysterectomy), this tends to lead to an earlier onset of the menopause. Surgical removal of the ovaries alone or removal of the womb and the ovaries together will cause immediate menopause known as a surgical menopause.

At what age can a woman expect the menopause?

The average age of the menopause is 51 years but it can occur at any age between 40 and 58. Younger women who experience the menopause before the age of 40 are said to have a premature menopause.

What are the symptoms of the menopause?

For some women, their periods stop without warning but most women will experience mild to moderate menopausal symptoms when approaching the menopause. These can start before the periods completely stop but are more pronounced after they stop.

In most cases, the first sign that you are approaching the menopause is when your periods become less regular. At first, your periods may come more often but as the levels of both hormones (estrogen and progesterone) fall, your periods will become less frequent until they stop altogether.

Symptoms include:

Physical

- Hot flushes

The Menopause

Information and advice for patients

Gynaecology

- Night sweats
- Tiredness
- Skin and vaginal dryness

Psychological

- Mood swings/depression
- Insomnia (problems falling asleep or staying asleep)
- Poor memory and concentration
- Loss of sex drive

The most common symptoms are hot flushes and night sweats. These are where there is an unpredictable and sudden loss of heat through the upper part of the body. Sweats can be extreme, drenching night clothes and causing disturbed sleep which leads to irritability and loss of short term memory and concentration. About 7 in 10 women will experience these ranging from mild to severe, and they gradually stop in less than 5 years, although some women may suffer for longer or even life-long.

The timing of the menopause can coincide with changes in the family, such as concerns with teenage children, aging parents and be a contributing factor in alterations or difficulties in interpersonal relationships. Painful sex due to dryness of the vagina contributes to the loss of interest in sex and can add further to relationship difficulties.

Some women will find the physical and emotional symptoms so distressing that they may feel overwhelmed and unable to cope.

What are the long term effects of menopause?

In recent years it has been recognised that low estrogen levels may be responsible for long term health problems in women who have been through the menopause.

Before the menopause estrogen maintains the elasticity or collagen in the body and the blood vessels and has a beneficial effect on blood cholesterol. This protective effect is lost after the menopause. Once the estrogen levels drop, the collagen content drops and this results in thinning of the skin and loss of elasticity of the blood vessels.

Heart disease:

The risk of developing heart disease is lower in women than in men before the menopause, but post- menopausal women are equally as at risk of heart disease as men once the protective estrogen has been lost. Women are 4 times more likely to die from heart disease than breast or gynaecological cancers. Women most at risk are those who:

- have a family history of heart disease
- have high blood pressure
- smoke

The Menopause

Information and advice for patients

Gynaecology

- have high cholesterol
- have diabetes
- are obese
- do little or no exercise

It is important that you discuss these issues with your GP so that it is possible to identify if you are at particular risk of heart disease.

Osteoporosis:

Osteoporosis is a disease where the bone structure deteriorates making the bones weaker and more susceptible to fractures. Estrogen prevents bone deterioration. After the menopause women can lose up to 5% of their bone mass each year. That means that a 70 year old woman may have lost half her bone mass, putting her at a greatly increased risk of fractures, especially of the wrist, spine or hip. Most women are unaware they have osteoporosis until they have a fracture. Women most at risk are those who:

- Have had early menopause or a total hysterectomy
- Have a history of irregular periods or anorexia
- Have a family history of osteoporosis
- Have a low body weight
- Do not have enough calcium in their diet
- Do little or no exercise
- Smoke
- Alcohol abuse
- Have used oral steroids for a long period of time
- Previous history of over active thyroid
- Problems with absorption through the gut e.g. Chron's or ulcerative colitis
- Have had a hip or wrist fracture before the age of 65

How is the menopause diagnosed?

The menopause is usually diagnosed by your symptoms and the pattern of your periods. Tests to diagnose the menopause are unreliable in the early stages and once they can be relied on, the symptoms and period pattern is usually all that is needed for you and your doctor to confirm it. Some blood tests to rule out anaemia or an under-active thyroid can be done if your doctor feels it is necessary.

The Menopause

Information and advice for patients

Gynaecology

What treatments are available?

The menopause itself is a period of biological change and adjustment; it should not be thought of as an illness. Symptom-relief is the main aim of treatment and is usually only needed for 3-5 years or less.

Lifestyle changes

There are a number of ways in which you can relieve the effects of your menopausal symptoms and reduce your risk of heart disease and osteoporosis by making simple changes to your lifestyle. Please see the leaflet 'Helping yourself through the menopause' for more information.

Hormone Replacement Therapy (HRT)

HRT is effective in treating the symptoms of menopause and works by replacing the estrogen that the ovaries no longer produce. It can give you short term relief from the symptoms of hot flushes, night sweats and vaginal dryness and can reduce your risk of heart disease and osteoporosis. Women who have undergone an early menopause are advised to take hormone replacement up to age 50 to prevent the earlier onset of these conditions of old age. For more information about the different types of HRT and its benefits, risks and alternatives please see the leaflet 'Hormone Replacement Therapy'.

Other medications

There are other medications that can be used to treat the symptoms of menopause. Please see the 'Hormone Replacement Therapy' leaflet for more information about these.

Further information

If you need more information or have any questions please speak to your GP. You may also find the following contacts useful.

Menopause Matters

www.menopausematters.co.uk

The Daisy Network

(support for women who have experienced a premature menopause)

www.daisynetwork.org.uk

Hysterectomy Association

www.hysterectomy-association.org.uk

National Osteoporosis Society

www.nos.org.uk

0845 450 0230

The Menopause

Information and advice for patients

Gynaecology

British Heart Foundation

www.bhf.org.uk

0300 330 3311

Women's Health Concern

www.womens-health-concern.org

NHS Choices

www.nhs.uk/conditions/menopause

For more information about our hospitals and services please see our website:

Sandwell and West Birmingham Hospitals NHS Trust

www.swbh.nhs.uk

You may find the following information leaflets useful; please ask your nurse or doctor for one:

- Helping yourself through the menopause
- Hormone replacement therapy (HRT)

Sources used for the information in this leaflet

- British Menopause Society, 'Management of the Menopause, 5th edition', May 2009
- Endocrine Society, 'Postmenopausal Hormone Therapy: An Endocrine Society Scientific Statement', July 2010

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5420 or email: swb-tr.swbh-gm-patient-information@nhs.net



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