WOMEN'S HEALTH SPECIALISTS

MENOPAUSE OVERVIEW

WHAT IS MENOPAUSE?

Menopause is a normal part of life. It is one step in a long, slow process of reproductive aging. For most women this process begins silently somewhere around age 40 when periods may start to be less regular. Declining levels of the hormones estrogen and progesterone cause changes in your periods. These hormones are important for keeping the vagina and uterus healthy as well as for normal menstrual cycles and for successful pregnancy. Estrogen also helps to keep bones healthy. It helps women keep good cholesterol levels in their blood.

Some types of surgery can bring on menopause. For instance, removal of your uterus (hysterectomy) will make your periods stop. When both ovaries are removed (oophorectomy), menopause symptoms may start right away, no matter what your age.

HORMONES AND CHANGE

A woman's body changes throughout her lifetime. Many of those changes are due to varying hormone levels that happen at different stages in life.

Puberty often starts when a girl is about 12 years old. Her body changes—breasts and pubic hair develop, monthly periods begin.

Menopausal transition, commonly called perimenopause, is the time when a woman's body is closer to menopause. At this time, a woman's periods may become less regular,
and she may start to feel menopause symptoms, such as hot flashes and night sweats. Perimenopause usually begins about 2 to 4 years before the last menstrual period. It lasts for about 1 year after your last period.

Menopause is marked by a woman's last menstrual period. You cannot know for sure what is your last period until you have been period free for 1 full year.

Postmenopause follows menopause and lasts the rest of your life. Pregnancy is no longer possible. There may be some symptoms, such as vaginal dryness, which may continue long after you have passed through menopause.

WHAT ARE THE SIGNS OF MENOPAUSE?

Changing hormone levels can cause a variety of symptoms that may last from a few months to a few years or longer. Some women have slight discomfort or worse. Others have little or no trouble. If any of these changes bother you, check with your doctor. The most common symptoms are:

Changes in periods. One of the first signs may be a change in a woman's periods. Many women become less regular; some have a lighter flow than normal; others have a heavier flow and may bleed a lot for many days. Periods may come less than 3 weeks apart or last more than a week. There may be spotting between periods. Women who have had problems with heavy menstrual periods and cramps will find relief from these symptoms when menopause starts.

Hot flashes. A hot flash is a sudden feeling of heat in the upper part or all of your body. Your face and neck become flushed. Red blotches may appear on your chest, back, and
arms. Heavy sweating and cold shivering can follow. Flashes can be as mild as a light blush or severe enough to wake you from a sound sleep (called night sweats). Most flashes last between 30 seconds and 5 minutes.

Problems with the vagina and bladder. The genital area can get drier and thinner as estrogen levels change. This dryness may make sexual intercourse painful. Vaginal infections can become more common. Some women have more urinary tract infections. Other problems can make it hard to hold urine long enough to get to the bathroom. Some women find that urine leaks during exercise, sneezing, coughing, laughing, or running.

Sex. Some women find that their feelings about sex change with menopause. Some have changes to the vagina, such as dryness, that makes sexual intercourse painful. Others feel freer and sexier after menopause — relieved that pregnancy is no longer a worry. Until you have had 1 full year without a period, you should still use birth control if you do not want to become pregnant. After menopause a woman can still get sexually transmitted diseases (STDs), such as HIV/AIDS or gonorrhea. If you are worried about STDs, make sure your partner uses a condom each time you have sex.

Sleep problems. Some women find they have a hard time getting a good night's sleep – they may not fall asleep easily or may wake too early. They may need to go to the bathroom in the middle of the night and then find

they aren't able to fall back to sleep. Hot flashes also may cause some women to wake up.

Mood changes. There may be a relationship between changes in estrogen levels and a woman's mood. Shifts in mood may also be caused by stress, family changes such as children leaving home, or feeling tired. Depression is NOT a symptom of menopause.

Changes in your body. Some women find that their bodies change around the time of menopause. With age, waists thicken, muscle mass is lost, fat tissue may increase, skin may get thinner. Other women have memory problems, or joint and muscle stiffness
and pain. With regular exercise and attention to diet, many of these changes may be eased or prevented.

WHAT ABOUT HEART AND BONES?

You may not even notice two important changes that happen with menopause.

- Loss of bone tissue can weaken your bones and cause osteoporosis.
- Heart disease risk may grow, due to age-related increases in weight, blood pressure, and cholesterol levels.

Osteoporosis. To maintain strong bones, the body is always breaking down old bone and replacing it with new healthy bone. For women, the loss of estrogen around the time of menopause causes more bone to be lost than is replaced. If too much bone is lost, bones become thin and weak and can break easily. Many people do not know they have weak bones until they break a wrist, hip, or spine bone (vertebrae). Doctors can test bone density (bone densitometry) to find out if you are at risk of osteoporosis. You can lower your risk of bone loss and osteoporosis by making changes to your lifestyle — regular weight-bearing exercise and getting plenty of calcium and vitamin D can help. There are also drugs available that prevent bone loss. Talk to your doctor to find out what is best for you.

Heart disease. Younger women have a lower risk of heart disease than do men of the same age. But after menopause, a woman's risk of heart disease is almost the same as
a man's. In fact, heart disease is the major cause of death in women, killing more women than lung or breast cancer. It's important to know your blood pressure, and levels of cholesterol, HDL, triglycerides, and fasting blood glucose. You can lower your chance of heart disease by eating a healthy diet, not smoking, losing weight, and exercising regularly. There are also drugs that can help. Talk to your doctor to be sure you are doing everything possible to protect your heart.

How Can I Stay Healthy Throughout Menopause?

To stay healthy you can make some changes in the way you live. For example:

- Don't smoke.
- Eat a healthy diet that is low in fat and cholesterol and moderate in total fat. Your diet should aim to be high in fiber and include fruits, vegetables, and whole-grain foods. It should also be well balanced in vitamins and minerals, including calcium.
- Lose weight if you are overweight.
- Take part in weight-bearing exercise, such as walking, jogging, running, or dancing, at least 3 days each week.
- Take medicine to lower your blood pressure if your doctor prescribes it for you.
- For vaginal discomfort, use a water-based vaginal lubricant (not petroleum jelly) or an estrogen cream.
- If you frequently feel an urgent need to urinate, ask your doctor about techniques such as pelvic muscle exercises, biofeedback, and bladder training that can help you improve muscle control.
- Be sure to get regular pelvic and breast exams, Pap tests, and mammograms. Contact
  your doctor right away if you notice a lump in your breast.
- If you are having hot flashes, keep a diary to track when they happen. You may be able to use this information to help find out what triggers them.
- Try these tips to help manage hot flashes:
- When a hot flash starts, go somewhere cool.
- If hot flashes wake you at night, try sleeping in a cool room.
- Dress in layers that you can take off if you get too warm.
- Use sheets and clothing that let your skin "breathe."
- Have a cold drink (water or juice) at the beginning of a flash.

What About Hormone Replacement?

In perimenopause, your doctor might suggest birth control pills especially if you are having problems with very heavy, frequent or unpredictable menstrual periods. This medication will make your periods more regular. It may also help with symptoms like hot flashes. However, birth control pills can hide the arrival of menopause. If you think you might have reached menopause, you can stop taking the pill for a while and see if you start having regular periods again. But if you were using birth control pills to prevent pregnancy, you should remember to use another type of contraceptive until you have gone 12 months without a period.

In menopause, your doctor might suggest taking estrogen and progesterone, known as hormone replacement therapy or HRT. HRT involves taking estrogen plus progestin. Estrogen alone, or ERT, is for women who have had

the uterus removed. Estrogen plus
progestin is for women with a uterus. Progestin, when used with estrogen, helps reduce the risk of uterine cancer. These hormones can be taken in a variety of forms such as pills, skin patches, creams, or vaginal inserts, depending on a woman's needs.

HRT or ERT may relieve menopause-related symptoms, such as hot flashes, and reduce loss of bone. However, HRT has risks. It should not be used for long-term prevention of heart disease. Taking HRT increases, rather than reduces, the risk for heart disease and stroke. It also increases the risk of breast cancer and blood clots. But it appears
to decrease the risk of colon cancer. Scientists are still studying the effects of HRT — the final answers are not yet available. Talk to your doctor about taking estrogen/progestin
or about other treatments (for example, biofeedback) that may ease menopausal symptoms.

WHAT ABOUT PHYTOESTROGENS?

Phytoestrogens are estrogen-like substances found in cereals, vegetables, legumes (beans), and some herbs. They may work in the body like a weak form of estrogen. Some may lower cholesterol levels. Soy, wild yams, and herbs such as black cohosh and dong quai, contain phytoestrogens and may relieve some symptoms of menopause. The government does not regulate phytoestrogens. Scientists are studying some of these plant
estrogens to find out if they really work and are safe.

Be sure to tell your doctor if you decide to eat more foods with phytoestrogens. Any food or over-the-counter product that you use for its drug-like effects could interact with other prescribed drugs or cause an overdose.

HOW DO I DECIDE WHAT TO DO?

Talk to your doctor to decide how to best manage your menopause. Think about your symptoms and how much they bother you. You also need to consider your medical history – your risk of heart disease, osteoporosis, and breast cancer. Remember that your decisions are never final. You can, and should, review them with your doctor every year during your checkup. You can see a gynecologist, geriatrician, general practitioner, or internist.

For your grandmother and great-grandmother, life expectancy was shorter. Reaching menopause often meant that their life was nearing an end. But this is no longer true. Today women are living longer — on average, until age 78. By making wise decisions about menopause and a healthy lifestyle, you can make the most of the 20, 30, or more years you have ahead!

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Key Recommendations from the Expert Panel on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults Professional Education Materials Patient and Public Education Materials National Heart, Lung and Blood Institute National Institutes of Health

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