



Menopause

What is menopause?

Menopause is the time in a woman's life when her periods stop and she can't have children anymore. This happens because as a woman ages, her ovaries stop making enough of the female hormones estrogen and progesterone.

When does menopause occur?

The average age for women to have their last period is about 50. But it's normal for menopause to occur any time from age 41 to 59. A woman often goes through menopause at about the same age as her mother. Women who have both ovaries removed will go through "surgical menopause" at the time of their surgery. If the uterus is taken out but the ovaries are left, a woman won't have periods but she will only go through menopause when her ovaries stop making estrogen. If you stop having periods early--before age 40--your health care provider can do a blood test to see if you're going through menopause. Menopause is a gradual process that can take several years. You're not really through menopause until you haven't had a period for 12 months. (During this time, keep using birth control if you don't want to become pregnant.)

Talk to your health care provider if you have:

- Heavy bleeding
- Bleeding that lasts longer than usual
- Bleeding more often than every 3 weeks
- Bleeding after sexual intercourse
- Any blood staining between periods

What are the common signs and symptoms of menopause?

Some women just stop having periods. Others experience symptoms such as the following:

A change in your menstrual cycle- This is one of the first signs of menopause. You may skip periods or they may occur closer together. Your flow may be lighter or heavier than usual.

Hot flashes- Hot flashes are the most common symptom of menopause. When you have a hot flash, you'll feel warm from your chest to your head, often in wave-like sensations. Your skin may turn red and you may sweat. You may feel sick to your stomach and dizzy. You may also have a headache and feel like your heart is beating very fast and hard.

Thinning of your vagina and vulva (the area around your vagina) - The skin of your vagina and vulva becomes thinner with menopause. Your vagina also loses its ability to produce as much lubrication (wetness) during sexual arousal. These changes can lead to pain during sex. You can use a topical estrogen cream (available by prescription) or a water-based lubricant (such as K-Y Jelly) to make sex less painful.

Urinary tract problems- You're more likely to have bladder and urinary tract infections during and after menopause. Talk to your doctor if you have to go to the bathroom often, feel an urgent need to urinate, feel a burning sensation when urinating or are not able to urinate.

Headaches, night sweats, trouble sleeping and tiredness are other symptoms. Trouble sleeping and feeling tired may be caused by hot flashes and night sweats.

Help for hot flashes

- Turn your thermostat down. Sleep in a cool room.
- Dress in layers, so you can remove clothing when you get too warm.
- Wear cotton and other natural fabrics that "breathe" so you don't get overheated. Use cotton sheets on your bed.
- Drink cool water or other beverages when a hot flash starts.
- Avoid alcohol.



Does menopause have emotional symptoms?

Many women experience emotional symptoms during menopause. These symptoms may include sadness, anxiety and loss of sleep. For some women, symptoms can be severe. If you find that you're having emotional problems, talk to your health care provider.

What is hormone therapy?

Hormone replacement therapy (HT) involves taking estrogen alone or estrogen combined with another hormone, progestin. Some women have found that HT can relieve symptoms such as hot flashes, vaginal dryness and some urinary problems. However, HT is not for everyone. New information from recent studies suggests that for many women, the risks of using HT may outweigh the benefits (see below). Talk to your provider about the risks and benefits of HT.

Are other treatments available?

Yes. Medicines such as estrogen cream, antidepressants, soy products and certain herbal supplements (black cohosh) may help ease some menopausal symptoms. Discuss these options with your health care provider.

The Women's Health Initiative Study

The WHI was a study sponsored by the National Institutes of Health designed to look at a number of age-related conditions in post-menopausal women given HT. Post-menopausal women were given estrogen and progesterone (Prempro) or placebo (sugar pills); the women who had had hysterectomy were given estrogen (Premarin) alone or placebo; progesterone is not needed for them. The expectation was that the women taking HT would have a lower risk of heart attacks, strokes, etc. This was not found; the Prempro half of the study was stopped early because a small but significant increase in heart attacks was found. In order to understand the findings, it helps to understand the numbers involved. In the Prempro group, there were more cases of the following: (the number in parentheses represents the difference in the number of women with the problem out of 10,000 women per year in the study): heart attack (+7), breast cancer (+8), stroke (+8), and blood clots (+18). However, there were fewer cases of colon cancer (-6) and hip fracture (-5). In the Premarin-only group, there was an increase in stroke (+12) and blood clots (+7) but decreased risk of heart attack (-5), breast cancer (-7) and hip fracture (-6).

What do these confusing numbers mean? We had been recommending HT for postmenopausal women purely for prevention of these serious health problems; now we no longer have evidence that HT is a good preventive and it may cause harm. We no longer recommend it for women without symptoms. For those with symptoms, HT can be very helpful, but the advantages, disadvantages, and alternatives should be discussed and it should be used at the lowest dose needed for the shortest possible duration.

For more information, talk to your health care provider, or go to

<http://www.mayoclinic.com/health/menopause/DS00119>

<http://www.womenshealth.gov/faq/menopaus.htm>

