Menopause

What is the menopause?

The *menopause* is the end of menstruation, which in most women occurs between the ages of 45 and 55, with an average age in Australia of 51 years. It comes from the Greek word *men* (month) and *pausis* (halt). However, the term is used in a broader sense to describe the months or years before and after the last period, during which the periods become irregular and the body adjusts to reduced levels of female hormones. This may last 2 to 5 years or sometimes longer.

What causes the menopause?

The female hormones, *oestrogen* and *progestogen*, are no longer produced by the ovary because of a decline and finally a complete absence of maturing eggs (ova).

What are the symptoms?

In some women symptoms (other than the cessation of periods) may be mild or absent. Common symptoms include the following.

Period changes

Periods may stop abruptly or after a prolonged irregular pattern such as lighter periods occurring further apart or heavier frequent periods. Fertility is greatly reduced, far more unpredictable and finally absent.

Hot flushes

These symptoms are a sensation of heat, usually in the face and neck, but can be experienced from head to toe and last from seconds to minutes. They may be accompanied by sweating, palpitations, headache, faintness and disturbed sleep, and can be aggravated by alcohol, hot foods and drinks, and stress.

In themselves they are harmless, but they can cause embarrassment, sleep disruption, tiredness and anxiety. They may continue from a few months to many years after the periods cease.

Vagina and bladder symptoms

The normally moist tissue of the vagina and base of the bladder can become dry and inelastic. This can result in uncomfortable intercourse and an increased chance of infection of the bladder or vagina.

Emotional problems

A woman may experience fluctuating levels of energy and concentration with tiredness, irritability, lack of confidence and loss of interest in sexual activity. Occasionally anxiety and depression can be a problem.

Is osteoporosis (thinning of bone) a problem?

It has been shown that reduced levels of oestrogen cause increased loss of calcium from bone tissue, which causes osteoporosis of varying degrees. Certain drugs and medical conditions and smoking can aggravate it. If you are slightly built or have a family history of osteoporosis, speak to your doctor about this potential problem.

What should be done?

While it is important to accept that the menopause is a natural fact of life and nothing to be embarrassed or worried about, you should discuss any unpleasant problems with an understanding friend or your doctor.

It is important to lead a healthy life: follow a correct diet, avoid obesity, get adequate relaxation and exercise, and reduce the use of cigarettes, caffeine and alcohol.

It is normal and healthy to continue sexual relations, but a vaginal lubricant such as KY jelly may be necessary if your vagina is too dry. Contraception is advisable for 12 months after the last period.

What about hormone replacement therapy (HRT)?

If you have troublesome symptoms, hormones (both oestrogen and progestogen) can be given. Usually special skin patches or tablets are prescribed.

A vaginal cream or tablet containing oestrogen is available for a dry vagina.

However, there are concerns about long-term use of HRT, especially in women with previous breast cancer and those with a strong family history of it. HRT can still be used in the short term for 1 to 2 years to relieve the unpleasant symptoms of hot flushes. It should be reviewed with a view to continuing HRT safely for up to 5 years in total.

Are there alternatives to HRT?

There are natural preparations such as those containing black cohosh extract (especially) and chaste tree extract (*vitex agnus castus*) which have been shown to help some women. But be cautious of over-the-counter remedies as many are ineffective. Ask your doctor about alternatives.

Remember

- Menopause is a normal change representing the end of reproductive life. Be informed and unafraid.
- Report to your doctor if you have a return of unusual bleeding.
- Continuing medical checks for breast examination, Pap tests and general health assessment are important.