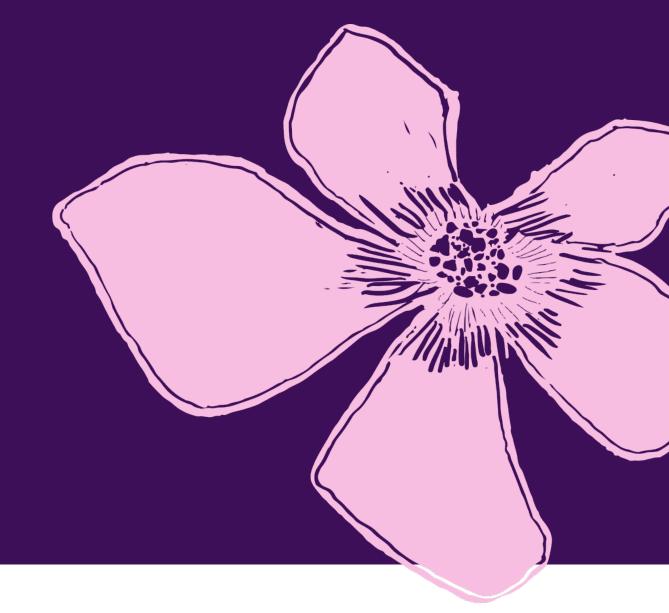
## Menopause





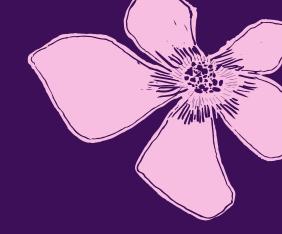
### Language

- We take a broad and inclusive approach to the topic of women's health.
- We write health information for people with diverse backgrounds, experiences and identities. We use the terms 'women' and 'girls, but we acknowledge that these terms are not inclusive of all people who may use our content.

#### Presentation aims

By the end of this presentation, we hope you will:

- understand what menopause is and why and when it occurs
- know the menopausal symptoms and how to manage them
- understand how to take care of your health during and after menopause
- be aware of the importance of maintaining good health during midlife.



## About menopause

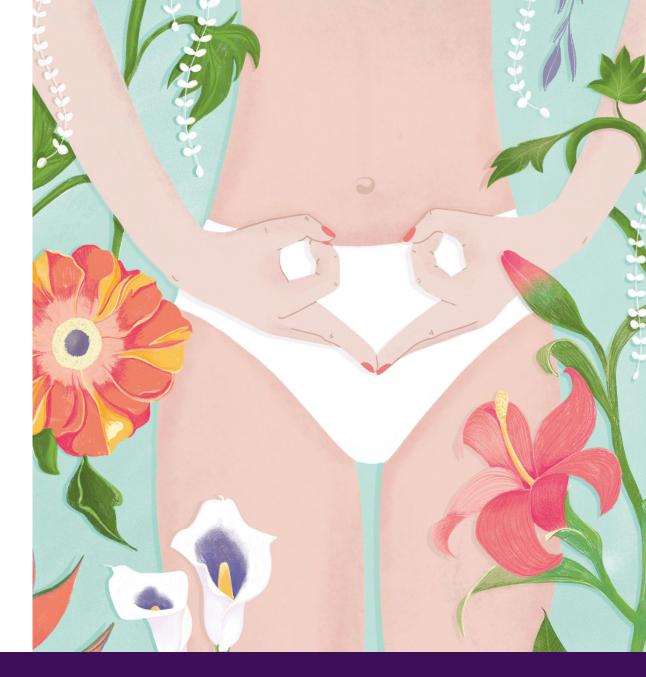
### What is menopause?

- The final menstrual period.
- A natural process ovaries have run out of eggs.
- Induced menopause a result of:
  - chemotherapy or radiotherapy
  - surgical removal of ovaries.

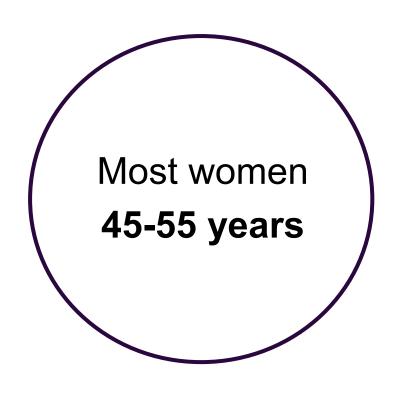


#### Hormones and menopause

- Hormones body's chemical messengers.
- Hormones most relevant to menopause: oestrogen, progesterone and testosterone.
- Changes in the hormone levels create menopausal symptoms.



### When does menopause occur?





### Premature and early menopause

- Premature menopause final period before 40.
- Early menopause final period at 40-45.
- Menopausal symptoms are often more severe.
- Treatment recommended to:
  - reduce risk of cardiovascular disease, osteoporosis, dementia
  - ease the symptoms.



# See a doctor if your periods stop naturally before you're 45.

You will need treatment due to the loss of oestrogen.

### Stages of menopause

#### Perimenopause

#### Menopause

#### **Postmenopause**

The lead-up to menopause (running out of eggs)

The final menstrual period (no more eggs)

Starts 12 months after the final menstrual period

### Diagnosis

- No definitive test.
- Blood or saliva tests not reliable.
- Use your symptoms as a guide.
- See your doctor if:
  - you're troubled by irregular periods, abnormal bleeding, or bleeding between periods or after sex
  - your symptoms worry you or interfere with your daily life.

### Perimenopause

Perimenopause – the lead-up to menopause:

- is a time of 'hormonal chaos'
- occurs in early-to mid-40s
- lasts 4–6 years on average.

During this time:

- periods 'wind down', becoming less regular
- ovulation may happen twice in a cycle
- menopausal symptoms begin.

### Menopause symptoms – physical

- Hot flushes and night sweats
- Dry vagina
- Migraines, aches and pains
- Sleep disturbance
- Bladder problems
- Central weight gain
- Crawling or itchy skin



### Menopause symptoms – emotional

- Feeling anxious
- Feeling irritable
- Lowered mood and mood swings
- Trouble concentrating
- Less interest in sex



### **Symptoms**

20%

of women have **no symptoms** 

60%

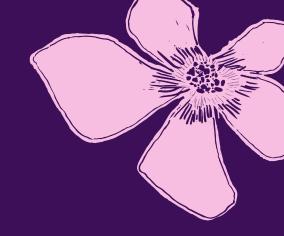
of women have mild to moderate symptoms



20%

of women have severe symptoms





## Menopause management

### Management options

- Lifestyle
- Menopausal hormone therapy (MHT)
- Non-hormonal treatment
- Treatment for vaginal dryness
- Complementary therapies
- Pharmacy-compounded (bioidentical) hormones are NOT recommended.



### Management – lifestyle

- Avoid spicy foods.
- Reduce alcohol and caffeine.
- Don't smoke.
- Eat a balanced, nutritious diet.
- Include foods with phytoestrogens.
- Exercise regularly.
- Get enough sleep and try relaxation and mindfulness.
- Keep cool.



## Management – menopausal hormone therapy (MHT)

- Medication containing hormones.
- Used to relieve menopausal symptoms.
- The most effective treatment for many healthy women.
- Can be taken as pills or applied as gels, patches, vaginal creams, tablets or pessaries.
- Can be taken in the lowest effective dose for as long as needed.

# Management – menopausal hormone therapy (MHT)

MHT is the most effective treatment for menopausal symptoms but is not suitable for all women.

- Rare risks of taking MHT:
  - blood clots
  - breast cancer
  - gallstones.
- Vaginal oestrogen is safe to use long term.



# Management – menopausal hormone therapy (MHT)

MHT is not recommended for women with past or current breast or endometrial cancers, severe liver disease, untreated high blood pressure, or those with a high risk of clotting.



### Management – non-hormonal options

- Certain low-dose antidepressants
- Blood pressure medication clonidine
- Epilepsy medication gabapentin and pregabalin



# Management – treatment for vaginal dryness

- Vaginal lubricants, oil and moisturisers
- Vaginal oestrogen
- Menopausal hormone therapy



#### Management – complementary therapies

- Cognitive behaviour therapy (CBT)
- Acupuncture
- Hypnotherapy
- Traditional Chinese medicine
- Herbal remedies, such as black cohosh
- Phytoestrogens plant oestrogen in diet



#### Management – pharmacy-compounded hormones

Pharmacy-compounded (bioidentical) hormones are mixtures of hormones handmade by pharmacists.

They are not recommended, as there is:

- no evidence that they are safe or effective
- no control over their production, prescribing or dosing.

Jean Hailes for Women's Health and the Australasian Menopause Society do not recommend pharmacy-compounded (bioidentical) hormones as a management option.

### Menopause and sex

Menopause can cause less desire for sex due to:

- decreased hormone levels
- bothersome menopausal symptoms, like dry vagina, tiredness or irritability.

See a doctor for treatment options.

### Management of painful sex

- Vaginal lubricants, moisturisers, and vaginal oestrogen
- Menopausal hormone therapy
- Relaxation techniques
- Pelvic floor physiotherapy
- Seeing a psychologist or sex therapist

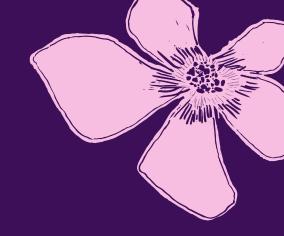
See a doctor to find a solution that works for you.



### Contraception

- If you don't want to become pregnant, use contraception for:
  - 1 year after your last period if you're older than 50
  - 2 years after your last period if you're younger than 50.
- Discuss with your doctor which contraception option is the most appropriate for you.
- Protect yourself against sexually transmissible infections (STIs).





## Health after menopause

# Postmenopause – maintaining good health

Postmenopause starts 12 months after your final period.

Maintain good health to help prevent:

- cardiovascular disease
- osteoporosis
- central weight gain
- type 2 diabetes.



A third or even half of your life will happen after menopause, so try to maintain good health.

### Postmenopause – weight and shape

- Menopause doesn't cause weight gain.
- Change in your body shape more weight around the middle.
- Increased risk of some chronic conditions.



# Postmenopause – healthy living

- Have a healthy diet.
- Exercise regularly.
- Keep a healthy weight.
- · Don't smoke.
- Reduce alcohol.



### Postmenopause – health checks

- Regular blood pressure, cholesterol, and blood sugar tests
- Bone health check
- Skin check
- Breast screen
- Cervical screening test
- Bowel screening test



#### When to see a doctor

- Bleeding after menopause
- Urinary incontinence



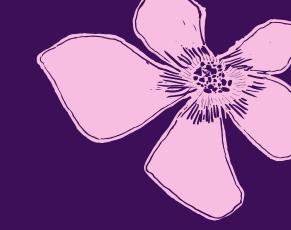
# Jean Hailes menopause resources

- Fact sheets
- Symptom checklist
- Podcasts
- Videos
- Articles



### More information on menopause

- Jean Hailes for Women's Health jeanhailes.org.au/health-a-z/menopause
- Australasian Menopause Society menopause.org.au
- Health Direct <u>healthdirect.gov.au/menopause</u>
- Better Health Channel betterhealth.vic.gov.au/health/conditionsandtreatments/menopause



### Thank you

Go to **jeanhailes.org.au/subscribe** for updates on the latest in women's health











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**Disclaimer.** This information does not replace medical advice. If a person is worried about their health, they should talk to their doctor or healthcare team.

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**Updated January 2024** 



Jean Hailes for Women's Health gratefully acknowledges the support of the Australian Government.



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