

## Health and wellness initiatives - Lunch and Learn

### *Managing Menopause*

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Having to wear all this bloody plastic for work every day is hard enough, then Mother Nature gives you a little hot flush to go with it and I'm feeling like I'm in a sauna - get yourselves vaccinated people! I'm done!



## Why the 'silence' on menopause?

- Western celebration of youth, ageism, and the 'shame' of growing old.
- Cultural taboos and/or feelings of embarrassment, helplessness, or other, in the woman.
- 'Invisibility' of older women
- Tendency for medical practitioners to minimise the symptoms and/or refer to it as 'pathophysiological' and medicate.
- **RESULT: Older women often 'suffer in silence'.**

## What is Menopause?

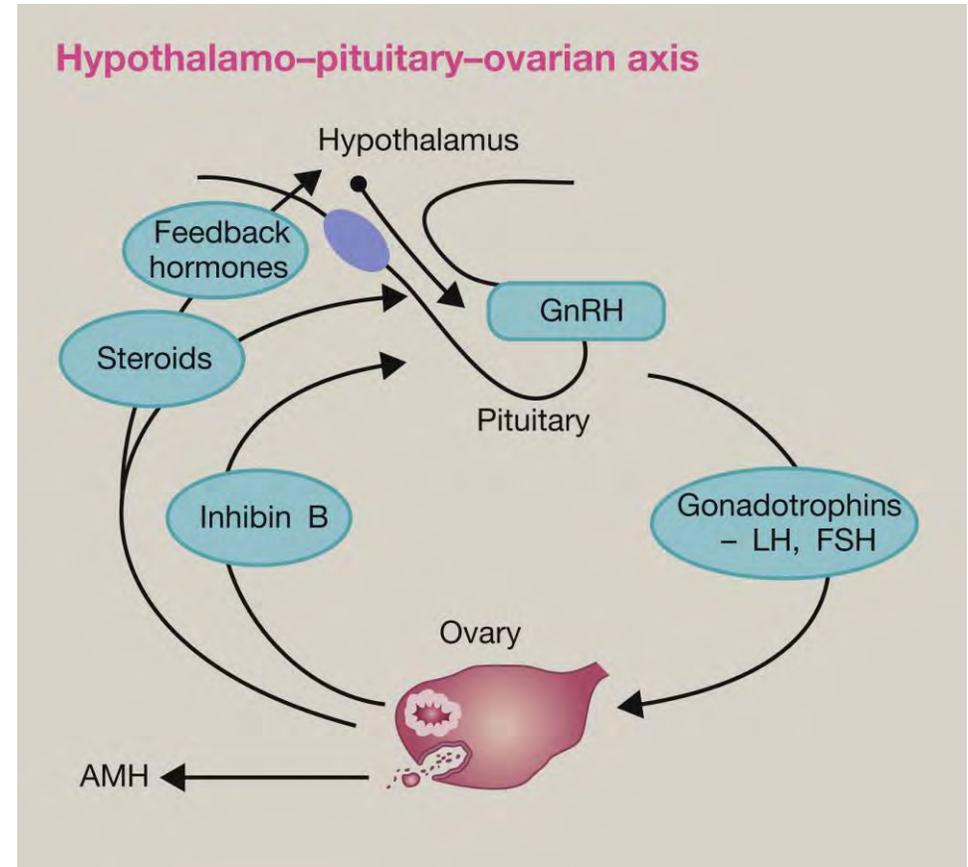
- Defined by the World Health Organization (WHO) (2007) as the absence of menses ('periods') for 12 consecutive months, resulting from a decline in oestrogen levels due to the normal ageing process.
- Usually occurs between the ages of 44-55 years of age, although 1 in 100 women may experience menopause prior to 40 years of age
- Can also be induced in women at an earlier age as a result of surgery, serious illness or medication

## More definitions

- In Western countries, one-third of a woman's life can be spent in the **peri-menopausal**, **menopausal** or post-menopause phases of life.
- **Peri-menopausal phases** occurs immediately prior to menopause and includes lower frequency of the menses and some of the symptoms of menopause
- **Post-menopausal phase** occurs after the symptoms of menopause have ceased

## Why menopause?

- Normal ageing process
- During reproductive years, gonadotrophins regulate the secretion of ovarian steroids (oestradiol [E2], progesterone and testosterone) and peptide hormones (inhibins A and B). Levels of inhibin B parallel the number of developing ovarian follicles. Anti-Mullerian hormone (AMH) is produced by ovarian granulosa cells independently of the gonadotrophins.
- Simply, menopause involves a decline in the number of ovarian follicles, which alters the feedback between the ovary and hypothalamic-pituitary axis, described above.
- **RESULT: A decline in the production of ovarian steroids.**
- The process is complex and still not well understood
- The process varies from woman to woman



## Symptoms of Menopause

- All women, regardless of **ethnic origin, cultural heritage, and socio-demographic background**, experience similar symptoms of menopause.
- There are individual and also geographical variations in terms of the levels of discomfort caused.
- These symptoms are broadly categorised as:
  - **vasomotor**,
  - **psychosocial** (including mental health),
  - **physical**,
  - **Sexual**.

## Common Symptoms of Menopause

- Hot flushes
- Night sweats
- Vaginal dryness and discomfort during sex
- Difficulty sleeping
- Low mood or/and anxiety
- Reduced sex drive (libido)
- Problems with memory and concentration
- Headaches
- Palpitations
- Joint stiffness, aches and pains
- Reduced muscle mass
- Recurrent urinary tract infections
- Increased risk of developing osteoporosis

## Interesting facts

- United States women are more likely to report pain associated with muscles and joints;
- Australian women are more likely to report vasomotor symptoms (e.g. hot flushes) and sexual dysfunction
- Asian women are more likely to report an increase in depressive disorders
- European women are more likely to report higher incidence of sleep and depressive disorders.
- Reasons for these variations remain unknown.
- Regardless of culture, many woman report a sense of the loss of their reproductive facilities and diminished femininity

(Hardy et al., 2017).

## Managing the symptoms of menopause

- **Hormone Replacement Therapy (HRT)** is the most effective treatment, particular for the vasomotor symptoms (hot flushes) (Tsiligiannis et al., 2020).
- HRT involves the use of synthetic oestrogen and/or progesterone (oral, transdermal, local) with the dose and route dependent upon the woman's individual symptoms and circumstances.
- HRT is prescribed by a medical practitioner or other health professional with prescribing rights.
- While positive effects have also been identified through the use of exercise, food supplements, herbs, and acupuncture, the relief produced from HRT is demonstrably superior (Abernethy, 2015).

## HRT

Some women (e.g. me) choose not to use HRT. **Why?**

- Personal preference, 'unfriendly' general practitioners, 'self-empowerment'
- Type of symptoms experienced
- Degree to which the symptoms affect the individual,
- Concern about possible side-effects, including increased risk in the development cardiovascular disease, cognitive dysfunction, and depression (Takahashi & Johnson, 2015). **NOTE:** Researchers argue that these side-effects are **not** significant (Abernethy, 2018).

## Non-pharmacological management

- Treating the symptoms (e.g. tracking triggers for hot flushes and avoiding those activities, use of lubricate during sex)
- Exercise,
- Food supplements,
- Herbs, and
- Acupuncture.

**Discussion? Questions?**

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Thank you