



Patient Information

The Facts About Menopause

A woman's reproductive cycle usually begins around age 12, when she starts to menstruate (men-stroo-eyt), or have monthly "periods." For the next 30 years or so, this cycle continues. Around age 40, this cycle may begin to change or slow down. Around age 50, most women will experience menopause (men-uh-pawz)—that is, a final period. Menopause is considered complete when a woman has gone a full year without a period (in the United States this occurs, on average, at age 51). When people say that someone is "going through menopause," they're referring to perimenopause (pehr-ee-men-o-pawz), the stage leading up to a woman's last period. During this transition, which usually lasts 2 to 4 years, the ovaries gradually stop producing the hormone estrogen (es-truh-juhn).

How do I know if I am at risk?

Menopause is considered a normal part of aging and carries no risks. However, the changes it initiates, particularly the lowered levels of estrogen, make you more susceptible to certain health problems. Since most women today will live at least a third of their lives after menopause, it's more important than ever to be aware of how menopausal changes may affect your health.

Some complications that may arise as a result of menopause include:

- **Heart disease.** During menopause, estrogen levels decline and risk of heart disease increases.
- **Osteoporosis** (os-tee-oh-puh-roh-sis). Bone density loss during the first few years after menopause may occur at a rapid rate.

- **Urinary incontinence** (in-kon-tn-uhns). Incontinence leads to elasticity loss in your vagina and urethra and may result in a frequent, sudden, and strong urge to urinate, followed by an involuntary loss of urine (urge incontinence) or loss of urine with coughing, laughing, or lifting (stress incontinence).
- **Weight gain.** Weight gain means you may need to reduce your caloric intake by as much as 200 to 400 calories per day, as well as exercise more.

What are the warning signs?

The most common symptoms of perimenopause include:

- Irregular periods
- Decreased fertility
- Vaginal dryness
- Hot flashes
- Sleep disturbances
- Mood swings
- Increased abdominal fat
- Thinning hair
- Loss of breast fullness

The severity and frequency of these symptoms vary for each woman, but most disappear shortly after menopause. Other symptoms may reflect more permanent changes in your body. However, don't worry—there are ways to adjust to these changes and enjoy a happy and healthy postmenopausal life.

What tests do I need?

Overall, it's recommended to schedule regular visits for preventive health care with your doctor during the years leading up to menopause (perimenopause) and the



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years after menopause (postmenopause).

Before you see your doctor, it's a good idea to write down the frequency and severity of your symptoms, any medications and vitamin supplements you take, and a list of questions to ask. Some questions may include:

- What kind of tests might I need?
- What treatments are available to minimize my symptoms?
- Is there anything I can do to relieve my symptoms?
- Are there any alternative therapies I might try?
- Do you have any printed material I can take with me or any Web sites you recommend for more information?

How can I avoid the problem?

Since menopause is considered a normal part of aging, there's really no way to avoid it. However, it's important to know that each woman's experience with menopause is different—it can occur later in life or earlier (especially if you smoke). It's important to remember that many women who go through menopause enjoy a happy and healthy postmenopausal life.

How is it treated?

Even though menopause is a natural biological process and not an illness, you should seek treatment for severe symptoms. Treatments may include:

- **Hormone therapy.** Your doctor will review your personal and family history and, if appropriate, will prescribe estrogen in the lowest effective dose needed to provide symptom relief of hot flashes.
- **Low-dose antidepressants.** Some antidepressants have been found to be helpful to menopausal women. Speak with your doctor to find out if this treatment option is right for you.

- **Bisphosphonates** (bis-foss-fuh-nate). These medications may help in the prevention or treatment of osteoporosis. Some hormonal therapies also prevent osteoporosis.

- **Vaginal estrogen.** To help relieve vaginal dryness and related symptoms, your doctor may prescribe a vaginal tablet, ring, or cream, which releases just a small amount of estrogen.

Other lifestyle remedies include:

- **Identifying triggers for hot flashes.** Avoiding certain foods, such as hot beverages, spicy foods, and alcohol, and other triggers, such as hot weather or a warm room, may reduce the occurrence of hot flashes. Dressing in layers and getting regular exercise may also help with hot flashes.

- **Medications for vaginal discomfort.** There are over-the-counter water-based vaginal lubricants (Astroglide, K-Y) and moisturizers (Replens, Vagisil), which will help vaginal discomfort.

- **Getting a good night's sleep.** It's crucial to try to get a good night's sleep. Some ways to do that are to avoid caffeine and exercise during the day, but not right before bedtime.

- **Counseling.** Counseling helps some women deal with the psychological symptoms of menopause.

For more information on menopause, visit the North American Menopause Society Web site at <http://www.menopause.org>.

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