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MENOPAUSE



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MENOPAUSE



What is Menopause?

- Menopause is when your periods stop due to lower hormone levels. It usually affects women between the ages of 45 and 55, but it can happen earlier.
- It affects anyone who has periods.
- Menopause can happen naturally, or for reasons such as surgery to remove the ovaries (oophorectomy) or the uterus (hysterectomy), cancer treatments like chemotherapy, or a genetic reason. Sometimes the reason is unknown.
- Perimenopause is when you have symptoms of menopause but your periods have not stopped. Perimenopause ends and you reach menopause when you have not had a period for 12 months.
- Menopause and perimenopause can cause symptoms like anxiety, mood swings, brain fog, hot flashes and irregular periods. These symptoms can start years before your periods stop and carry on afterwards.
- Menopause and perimenopause symptoms can have a big impact on your life, including relationships and work.
- There are things you can do to help with symptoms. There are also medicines that can replace the missing hormones and help relieve your symptoms.



MENOPAUSE SYMPTOMS



headaches



dry eye



weight increase



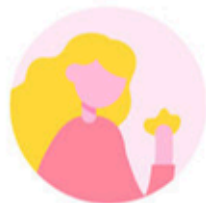
loss of libido



sleep disorders



hot flashes



hair loss



skin dryness



irregular period

Menopause Symptoms

Common symptoms of menopause and perimenopause:

Menopause and perimenopause symptoms can have a big impact on your daily life, including relationships, social life, family life and work.

It can feel different for everyone. You may have a number of symptoms or none. Symptoms usually start months or years before your periods stop. This is called the perimenopause.

Changes to your periods

The first sign of the perimenopause is usually, but not always, a change in the normal pattern of your periods, for example they become irregular.

Eventually you'll stop having periods altogether.

Mental health symptoms

Common mental health symptoms of menopause and perimenopause include:

- changes to your mood, like low mood, anxiety, mood swings and low self-esteem
- problems with memory or concentration (brain fog)



Physical symptoms

- Common physical symptoms of menopause and perimenopause include:
- hot flushes, when you have sudden feelings of hot or cold in your face, neck and chest which can make you dizzy
- difficulty sleeping, which may be a result of night sweats and make you feel tired and irritable during the day
- palpitations, when your heartbeats suddenly become more noticeable
- headaches and migraines that are worse than usual
- muscle aches and joint pains
- changed body shape and weight gain
- skin changes including dry and itchy skin
- reduced sex drive
- vaginal dryness and pain, itching or discomfort during sex
- recurrent urinary tract infections (UTIs)
- sensitive teeth, painful gums or other mouth problems

Menopause cont.



How long symptoms last

Symptoms can last for months or years, and can change with time.

For example, hot flushes and night sweats may improve, and then you may develop low mood and anxiety. Some symptoms, such as joint pain and vaginal dryness, can carry on after your periods stop.

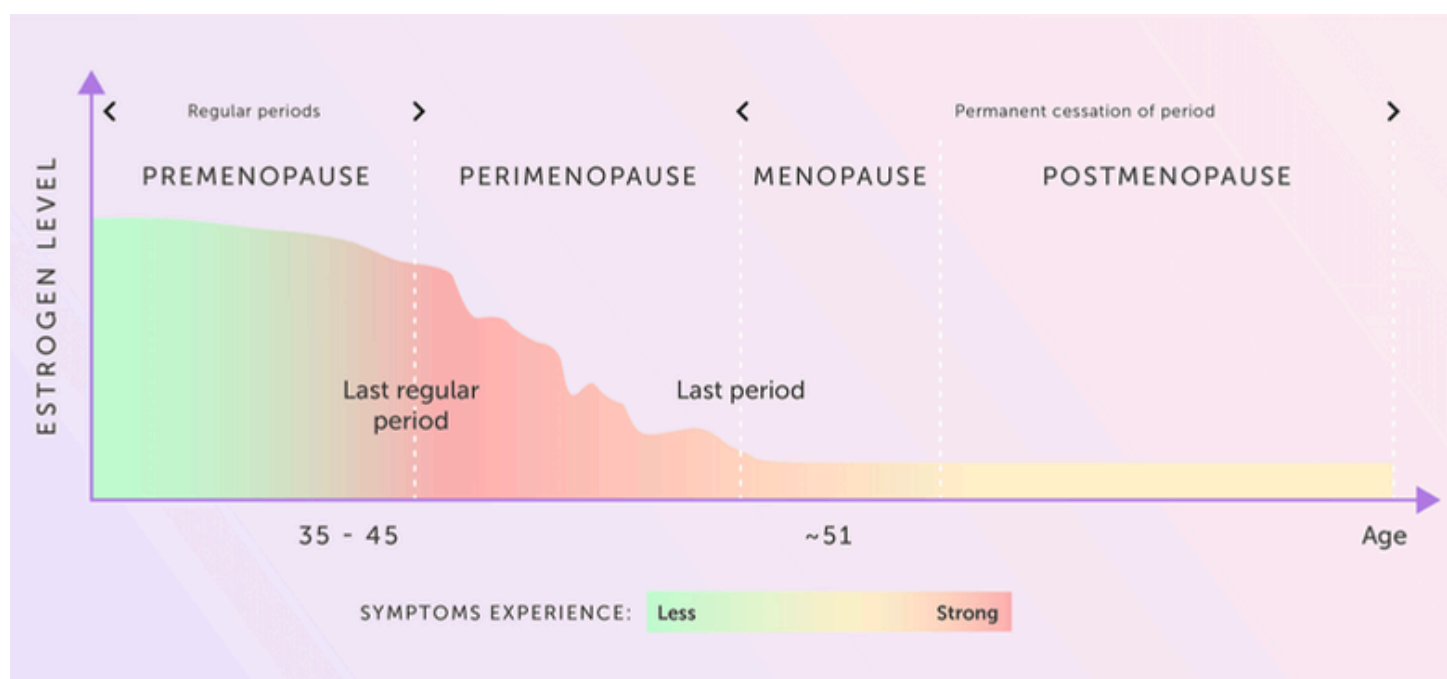
Menopause and perimenopause if you're using hormonal contraception

You cannot know for sure you've reached menopause if you're using hormonal contraception like the pill, IUS (hormonal coil), contraceptive implant or contraceptive injection. This is because hormonal contraception can affect your periods. If you're taking the combined pill, you'll have monthly period-type bleeds for as long as you keep taking the pill.

The combined pill may also mask or control menopausal symptoms, such as hot flushes and night sweats. If you use the progestogen-only pill, IUS, contraceptive implant or contraceptive injection, your bleeds may be irregular or stop completely for as long as you use this contraception. This can make it hard to know when you're no longer ovulating and therefore no longer fertile.

Stopping contraception

You can stop using contraception at the age of 55, as getting pregnant naturally after this is very rare. You'll be advised not to take the combined pill from the age of 50. You can change to a progestogen-only pill or other method of contraception instead. It's possible to get sexually transmitted infections (STIs), so use condoms after the menopause to protect you against STIs.



Lifestyle changes to help menopause and perimenopause

Eating well, exercising and looking after your mental well-being can help with symptoms during perimenopause and menopause. It can also help you keep as well as possible in the future.

Do:

- get plenty of rest, including keeping to regular sleep routines
- eat a healthy diet
- have calcium-rich food like milk, yoghurt and kale to keep bones healthy
- exercise regularly, try including weight-bearing activities where your feet and legs support your weight like walking, running or dancing
- do relaxing things like yoga, tai chi or meditation
- talk to other people going through the same thing, like family, friends or colleagues
- talk to a doctor before taking herbal supplements or complementary medicines

Don't

- do not smoke
- do not drink more than the recommended alcohol limit

How to ease mood changes

It's common to have mood swings, low mood and anxiety around the time of the menopause and perimenopause.

You can try to:

- get plenty of rest
- exercise regularly
- do relaxing activities

Cognitive behavioural therapy (CBT) is a type of talking therapy that can help with a low mood and feelings of anxiety. It can also help with sleep problems.



Lifestyle changes cont.

How to ease hot flushes and night sweats

You can:

- wear light clothing
- keep your bedroom cool at night
- take a cool shower, use a fan or have a cold drink
- try to reduce your stress level
- avoid or reduce potential triggers, such as spicy food, caffeine, hot drinks, smoking and alcohol
- exercise regularly
- lose weight if you're overweight

CBT can also help manage hot flushes.



How to ease vaginal dryness

There are vaginal moisturisers or lubricants you can get without a prescription at a pharmacy.

You can talk to a pharmacist in private if you'd like help to decide which moisturiser is right for you.

If you're having sex and using condoms, do not use oil-based lubricant as this can damage condoms. You can use a water-based lubricant.

There are other treatments for vaginal dryness that a doctor can prescribe, such as HRT (hormone replacement therapy) or hormonal treatment (creams, pessaries, gel or vaginal rings).

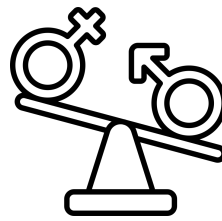
Protecting against weak bones

You can try to:

- exercise regularly, including weight-bearing exercises, where your feet and legs support your weight (like walking, running or dancing) and resistance exercises (for example, using weights)
- eat a healthy diet that includes plenty of fruit, vegetables and sources of calcium, such as milk, yoghurt and kale
- get some sunlight on your skin as this triggers the production of vitamin D, which can help keep your bones healthy
- take vitamin D supplements
- stop smoking and cut down on alcohol



Menopause Cont.



Treatment for menopause and perimenopause

The main medicine treatment for menopause and perimenopause symptoms is hormone replacement therapy (HRT), which replaces the hormones that are at low levels. There are other treatments if you cannot, or choose not to, have HRT.

Hormone replacement therapy (HRT)

HRT is a safe and effective treatment for most going through menopause and perimenopause. Your GP will discuss any risks with you.

HRT involves using oestrogen to replace your body's own levels around the time of the menopause. There are different types and doses of HRT. Using the right dose and type usually means your symptoms improve.

Oestrogen comes as:

- skin patches
- a gel or spray to put on the skin
- implants
- tablets

If you have a womb (uterus) you also need to take progesterone to protect your womb lining from the effects of oestrogen. Taking oestrogen and progesterone is called combined HRT.

Progesterone comes as:

- patches, as part of a combined patch with oestrogen
- IUS (intrauterine system, or coil)
- tablets

If you have low sex drive because of menopause and HRT does not improve it, you may be offered testosterone.

Benefits of HRT

The main benefit of HRT is that it can help relieve most menopause and perimenopause symptoms, including hot flushes, brain fog, joint pains, mood swings and vaginal dryness.

Hot flushes or night sweats often improve within a few weeks. Other symptoms like mood changes and vaginal dryness can take a few months to improve. Taking HRT can also reduce your risk of hormone-related health problems including osteoporosis and heart disease.

Risks of HRT

The risks of HRT are small and usually outweighed by the benefits.

If you're interested in HRT, a clinician can discuss the risks with you.

Menopause Cont.



Testosterone gel for reduced sex drive

If HRT does not help restore your sex drive, you might be offered a testosterone gel or cream. It can help improve sex drive, mood and energy levels.

Testosterone is produced by the ovaries and your levels usually get lower with age.

It's not currently licenced for use in women, although it can be prescribed after the menopause by a specialist doctor if they think it might help restore your sex drive.

You can safely use this at the same time as HRT.

Side effects of using testosterone are not common but include acne and unwanted hair growth.

Testosterone gel or cream can also cause side effects in others if they come into contact with it regularly. To avoid this, wash your hands after using it and cover the area with clothing.

Oestrogen for vaginal dryness and discomfort

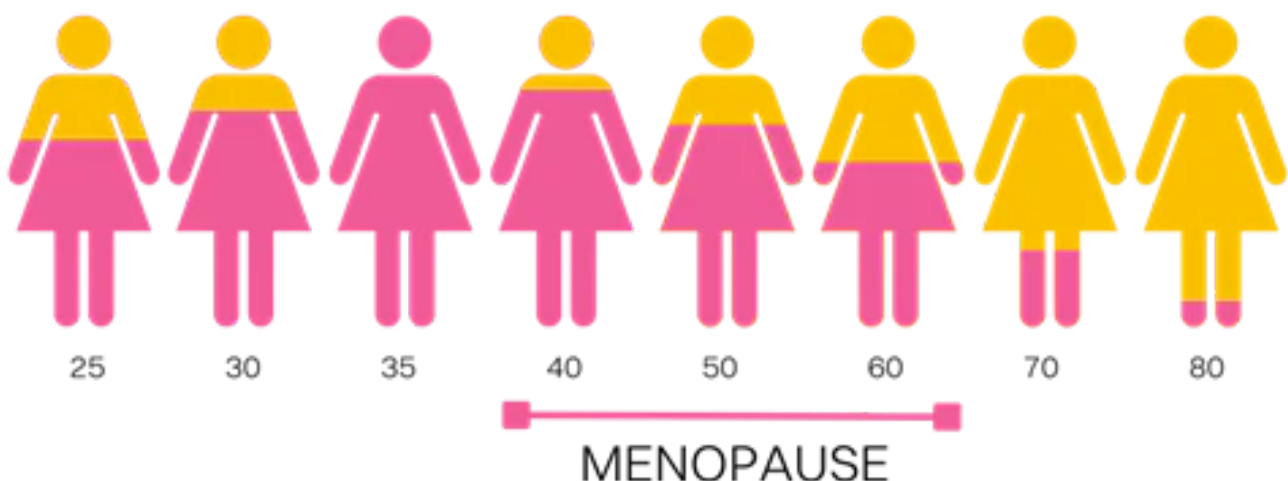
Your vagina may become dry, painful or itchy as a result of the menopause and perimenopause.

A GP can prescribe oestrogen treatments you can insert into your vagina, as a tablet, cream or ring. This can also improve any urinary symptoms caused by menopause and perimenopause, like discomfort when you pee.

These vaginal oestrogen treatments do not get into your bloodstream and only work on the bit of the body where you put them. You can use them for the rest of your life. Symptoms usually come back when you stop using them.

It's safe to use vaginal oestrogen with HRT.

Estrogen Level in women



Menopause Cont.



Non-hormone medicines

There are non-hormone treatments if your symptoms are having a big impact on your life and you cannot, or choose not to, have HRT.

Hot flushes and night sweats

There are some medicines that can help with hot flushes and night sweats.

These include:

- a blood pressure medicine called clonidine
- an epilepsy medicine called gabapentin

Talk with a GP about these medicines and their side effects, and if they might be suitable for you.

Mood symptoms

Antidepressants can help with mood symptoms if you've been diagnosed with depression or anxiety.

Cognitive behavioural therapy (CBT)

Cognitive behavioural therapy (CBT) is a talking therapy which can help with:

- low mood and anxiety caused by menopause and perimenopause
- some physical symptoms like hot flushes and joint pain

You can get NHS talking therapy without going to a GP first:

<https://www.nhs.uk/service-search/mental-health/find-an-nhs-talking-therapies-service>

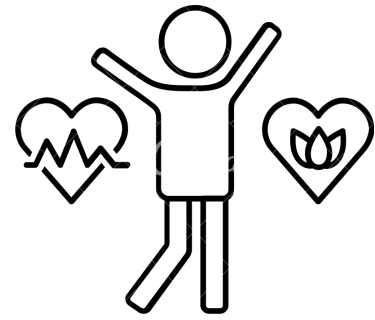
Follow-up appointments

If you're having treatment for your symptoms of menopause or perimenopause, you'll need to return to the doctor or nurse who is prescribing your HRT for a follow-up review after 3 months.

When you and your doctor or nurse agree your treatment is working well for you, you'll need to see them once a year.



Menopause Cont.



During your reviews, your doctor or nurse may:

- make sure your symptoms are under control
- ask about any side effects and vaginal bleeding
- check your weight and blood pressure
- review the type of HRT you're taking and make any necessary changes

You may need treatment for a few years, until most of your menopause and perimenopause symptoms have passed.

You can choose to continue taking HRT. The doctor or nurse prescribing your HRT can discuss with you the benefits and risks, so you can decide what's right for you.

You can take HRT for as long as you need it. You can discuss this with your doctor or nurse at your yearly review.

Complementary and alternative therapies

Complementary and alternative treatments, such as herbal remedies and compounded bioidentical ("natural") hormones, are not recommended for symptoms of the menopause or perimenopause.

This is because it's not clear how safe and effective they are.

Red clover and black cohosh are herbal remedies but there is no strong evidence that they work.

Some complementary and alternative therapies can also interact with other medicines and cause side effects.

Ask your GP or pharmacist for advice if you're thinking about using a complementary therapy.

Compounded bioidentical hormones

Compounded bioidentical hormones are sometimes offered in private clinics as HRT. They are not recommended because it's not known how well they work or how safe they are. They are not available on the NHS.

They are different from regulated bioidentical hormones, also called body identical hormones.

Bioidentical hormones are available on the NHS as HRT. They have been tested to see how well they work and how safe they are.

What next?



Below are a list of some of the services that may be able to support your progress. Some you are able to self-refer to, others require a GP referral.

Speak to a health care professional

A GP, nurse or pharmacist can give you advice and help with your menopause or perimenopause symptoms. There are also menopause specialists who have experience in supporting anyone going through perimenopause and menopause. Find your nearest NHS or private menopause specialist on the British Menopause Society website (this lists NHS and private specialists) here: <https://thebms.org.uk/find-a-menopause-specialist/>

Talking therapies like counselling or CBT (cognitive behavioural therapy) can help with symptoms of menopause and perimenopause. You can get NHS talking therapies without seeing a GP first.

<https://www.nhs.uk/service-search/mental-health/find-an-nhs-talking-therapies-service>

Charities offering information and support include:

- **Women's Health Concern**
- **Menopause Matters**
- **Daisy Network for premature menopause**
- **Menopause Café**
- **Queermenopause** for people who identify as LGBT+

Other services offering information and support include:

- **NHS Better Health** - Weight loss, quit smoking, alcohol, get active - website and apps
- **Digital Weight Management Service** - Diabetes (T1 &2) or Hypertension + BMI over 30 - app/online support for 12 weeks
- **Everyone Health (Fitter Futures)** - 12 weeks diet and activity support - virtual and face-to-face
- **Exercise on Referral (Fitter Futures)** - discounted gym membership
- **Quit 4 Good** - quit smoking service
- **NHS Stop Smoking Service** – your GP can refer you or you can ring the helpline on 0300 123 1044
- **Talking Therapies** - Mental health support - online, in-person, or phone
- **Mind** - Mental health support in your surgery

This list is not exhaustive. If there is something you need support with to improve your health, chat with the Wellbeing Team and we'll do our best to match you with suitable help.