



Your Pharmacy  
...your neighbour

# Health Really Matters™

## MENOPAUSE (1)

Baby boomers are reaching age 50 in dramatic numbers and with it a great demand for menopause information.

*Menopause usually occurs between the ages of 45 and 55 (the average age is 51.4) but because women are living longer than ever, there could be a life of 30 years or more after menopause. Menopause, often called “the change of life”, is part of normal aging. It is a time when a woman’s body makes fewer of the hormones that regulate the monthly menstrual cycle including menstruation.*

*The term perimenopause describes the time of transition before actual menopause. Menstrual periods may still be erratic, ovulation can still occur so pregnancy is still a possibility. Perimenopause may begin several years before menopause with symptoms like hot flashes. Menopause literally means “last menstrual period” but since menstrual periods stop and start somewhat erratically at this time, menopause is confirmed when there is no period for twelve consecutive months.*

*Menopause can also start as a result of surgery. The removal of the uterus (called a hysterectomy) spells the end of menstrual periods after which menopause will begin naturally.*

### Signs of Menopause

The symptoms of menopause occur because of an imbalance existing among the hormones estrogen, progesterone and testosterone. The symptoms can be mild or severe. Some women, approximately 10%, will go through menopause with no problems at all. Others will experience some of the symptoms listed here:

**Mood changes** are characterized by irritability, forgetfulness, anxiety, panic and depression. Reduced hormones are partially responsible for these feelings but they can also be due to a sense of loss and emptiness because menopause is a sign of aging. Menopause sometimes coincides with the “empty nest” syndrome which can compound the problems.

**Hot flashes** are one of the most common symptoms of menopause. About 75% of menopausal women have them. These flashes of heat can last for a couple of minutes to as long as an hour. They involve the face, neck, chest or even the whole body. They are sometimes accompanied by nausea. When these flashes occur at night they are called night sweats. Hot flashes generally become less severe with time.

**Drying and wrinkling** is due to a thinning and loss of elasticity of the skin. There is also a thinning of the vaginal lining causing vaginal dryness and discomfort during intercourse.

**Sleep disturbances or insomnia** can occur often due to night sweats.

**More joint pain and a reduction in the sex drive** are two other symptoms of menopause that can occur.

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# Hot flashes . . . what can you do about it?

- Lifestyle modification is a good place to begin. Regular exercise, weight reduction, smoking cessation and avoiding any known triggers like alcohol or hot drinks.
- Sometimes an ice cold drink at the first sign of a flush can help.
- Carry a fan. Those battery-powered small fans do quite a good job of cooling.
- A cool shower at bedtime can help allay night sweats.
- Sleep in cotton night-clothes and on cotton sheets. Cotton breathes and allows perspiration to escape.
- Dress in layers so you can remove clothing when needed.
- Avoid triggers like stress-inducing situations, vigorous exercise, sun tanning and spicy foods.
- Hormone replacement therapy (HT) is very effective (This topic is discussed in the Health Really Matters topic: Menopause II.)

## Notes on calcium and vitamin D intake for osteoporosis prevention:

- Adequate supplementation with calcium and vitamin D is important to ensuring prevention of progressive bone loss.
- For post-menopausal women, a total intake of 1500mg of calcium with a supplement of 800-1000 units of vitamin D daily are recommended. Young women should ensure they receive at least 1200mg daily with 1000 units of vitamin D to keep their bones strong. Weight-bearing exercises are also important.
- Calcium and vitamin D are only two important facets of osteoporosis prevention. Doctors may prescribe a certain class of drugs, the biphosphates to slow bone loss while increasing bone mass.
- The subject of osteoporosis is discussed more fully in the Health Really Matters topic: Osteoporosis.

## COMPLICATIONS OF MENOPAUSE:

**Osteoporosis:** Changes in the levels of hormones during menopause have a thinning effect on the bones causing an increased risk of osteoporosis. It is important to ensure that calcium and vitamin D intake is adequate from diet and supplements. Vitamin D is necessary for optimum absorption of calcium. Weight-bearing exercise (walking, running, stair-climbing, etc) is an important way to slow down the loss of calcium from the bone and keep them strong.

**Cardiac disease:** Before menopause, these same hormones offered positive benefits to cholesterol levels. They help increase the HDL, to so-called “good” cholesterol and reduce the levels of LDL, the “bad” cholesterol. In this way, these hormones are heart protective. After menopause, due to a drop in these hormone levels, this heart protection lessens resulting in an increased risk of heart attack and stroke.

**Urinary tract infections** also occur more often due to a thinning of the urethra, the tube that runs from the bladder to the outside of the body. The muscles in the pelvic area become weaker and there may be some urine leakage especially on exertion. There also may be pain and frequent urination with an urge to urinate even though the bladder is empty.

**Weight gain** can occur due to a slowing of the metabolism and perhaps a more sedentary lifestyle. Some reduction in daily caloric intake may be necessary.

## TREATMENTS FOR MENOPAUSAL SYMPTOMS

**Lifestyle changes:** Since hot flashes appear to be more common in women who are overweight, are smokers and those who don't exercise, it is important to look at these factors as a way of improving menopausal symptoms.

**Diet:** Some people feel that adding more soy products to the diet may also help menstrual symptoms. Evidently, Japanese women, whose diets are high in soy-containing foods, have less problems with menopause than women in the West. However some studies done in this area showed no significant improvement in the hot flashes symptom of menopause.

**Vaginal moisturizers** can be helpful in restoring moisture and loss of elasticity within the vagina. Estrogen vaginal creams can also be useful here.

**Urinary problems** can be helped by pelvic floor exercises designed to strengthen the muscles in that area and help reduce stress incontinence. A physiotherapist can help advise about these exercises. Also wiping the genital area from front to back can reduce the incidence of urinary tract infections.

**If hot flashes occur at night**, chilling your pillow and keeping your bedroom temperature cool may help. (see side bar on page 2) Also, going through a series of deep breathing exercises morning and evening for 15 minutes is a good routine. It helps to reduce stress as well.

**Hormone Therapy (HT)** involves supplementing the hormones estrogen and progesterone that have declined due to aging. This topic will be discussed in detail in the Health Really Matters topic: Menopause II.