



# Menopause



**Menopause, or 'change of life', is the last menstrual period in a women's life and marks the end of her fertility. The hormone changes leading to natural menopause develop gradually over several years and can cause significant physical, emotional and psychological symptoms and changes.**

When a woman has not had a period for 12 consecutive months, and there is no other cause, menopause is confirmed. Most women reach natural menopause somewhere between the ages of 45 and 55 years – the average for Australian women is 51 years.

The changes leading to natural menopause begin as a woman's ovaries start to produce less of the female hormones oestrogen and progesterone. This may cause changes in the menstrual cycle and also menopause symptoms. Over time hormone levels continue to decrease until eventually menstruation stops.

Oestrogen and progesterone influence mood, weight, body shape, appetite, skin, sex drive, bladder and sexual functions, blood vessels and bones, so menopause symptoms involve these things.

## Signs and symptoms

The signs and symptoms of menopause can start several years before a woman's last period and last an average of four years. They include:

- Unpredictable periods
- Hot flushes, night sweats
- Vaginal dryness, which may make sex uncomfortable
- Crawling or itching sensations under the skin
- Headaches
- Aches and pains
- Reduced sex drive
- Emotional changes (e.g., mood swings, anxiety, irritability, crying a lot)
- Depression
- Tiredness
- Difficulty sleeping



- Forgetfulness
- Urinary problems (e.g., frequency, leakage)
- Changes in appearance and body shape.

## Risks

After menopause, permanently lower amounts of female hormones in the body may lead to:

- Thinning of the bones (osteoporosis) and bone fractures
- Sagging of the uterus and/or vagina (prolapse)
- Urine leaks when sneezing, coughing or on sudden exertion
- Increased risk of heart disease.

## Self care

- Dress in layers and wear cotton clothes to help deal with hot flushes. Try to identify and avoid triggers.
- Continue to use contraception until you have had one year without a natural period.
- Try a vaginal lubricant to increase comfort during intercourse – ask a pharmacist.

- Don't smoke. Smoking is associated with early onset of menopause.
- Examine your breasts regularly and have regular mammograms.
- Have regular pap tests (usually every two years).
- Ask a doctor about unusual symptoms (e.g., breast lumps, heavy bleeding, painful intercourse).
- Have blood pressure and cholesterol level checked regularly.
- Ask a doctor about checks for osteoporosis.
- Learn and practice relaxation techniques.
- Get enough rest and sleep.
- Seek support from friends and family.

## Healthy eating

- After menopause women are advised to have at least 1000-1500mg of calcium per day for bone health. To increase calcium intake eat high calcium, low fat dairy foods every day. Calcium supplements are also available – ask a pharmacist.
- Eat regular, healthy meals, including plenty of fruit, vegetables and wholegrain foods. Try including foods containing phytoestrogens/isoflavones (weak plant oestrogens) that may reduce menopause symptoms (e.g., soy beans, tofu, whole grains and legumes).
- Limit foods high in fat, sugar or salt.
- Drink at least two litres (eight glasses) of water a day (unless a doctor has advised not to).
- Limit alcohol and caffeine (tea, coffee, cola, chocolate) intake.

## Exercise

- Exercise at a moderate level for at least 30 minutes on all or most days of the week for heart health, weight control, relaxation and general well being (e.g., walking, swimming, cycling).
- Do weight-bearing exercise (e.g., walking, dancing) to strengthen bones and muscles.
- Do pelvic floor exercises every day to strengthen bladder muscles.

## Related fact cards

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| • <i>Exercise &amp; the Heart</i>    | • <i>Pelvic Floor Exercises</i> |
| • <i>Fat &amp; Cholesterol</i>       | • <i>Relaxation Techniques</i>  |
| • <i>High Blood Pressure</i>         | • <i>Smoking series</i>         |

Your **Self Care** Pharmacist

## Medicines

### Hormone replacement therapy

Hormone Replacement Therapy (HRT) replaces the female hormones previously produced by the ovaries and can relieve unpleasant menopause symptoms. HRT must be prescribed by a doctor.

HRT is available in several different forms including tablets; patches, creams or gels to apply to the skin; skin implants; injections; nasal sprays and vaginal creams and pessaries. HRT is also available in different hormone and dose combinations and some women need to try several different products to find the type of HRT that suits them best.

Recent evidence suggests that the adverse effects of some types of long-term HRT may outweigh the benefits. As most women only need HRT help for a short time, it is important to thoroughly discuss the advantages, disadvantages and risks of using HRT with a doctor.

### Other

Some complementary or 'natural' medicines claim to relieve symptoms of menopause, but the effectiveness of many of these products has not been scientifically proven. Some of these products have adverse effects, interact with other medicines and are not suitable for all women. Ask a doctor or pharmacist for advice when choosing a complementary medicine.

## For more information

**The Australasian Menopause Society** – website [www.menopause.org.au](http://www.menopause.org.au)

**The Jean Hailes Foundation** – website [www.jeanhailes.org.au](http://www.jeanhailes.org.au)

**Breastscreen** – phone 132 050.

**Consumer Medicine Information (CMI)** leaflets – your pharmacist can advise on availability.

**NPS Medicines Line** – phone 1300 888 763 Monday to Friday, 9am to 6pm EST.

**The Poisons Information Centre** – in case of poisoning phone 131 126 from anywhere in Australia.

**Pharmacy Self Care Support** – phone 1300 369 772 and ask for the Pharmacy Self Care Field Officer.

Pharmacists are medicines experts. Ask a pharmacist for advice when choosing a medicine.

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