



Let's talk about menopause

Information for you



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This information leaflet is for people who may be going through the menopause. It contains information on:

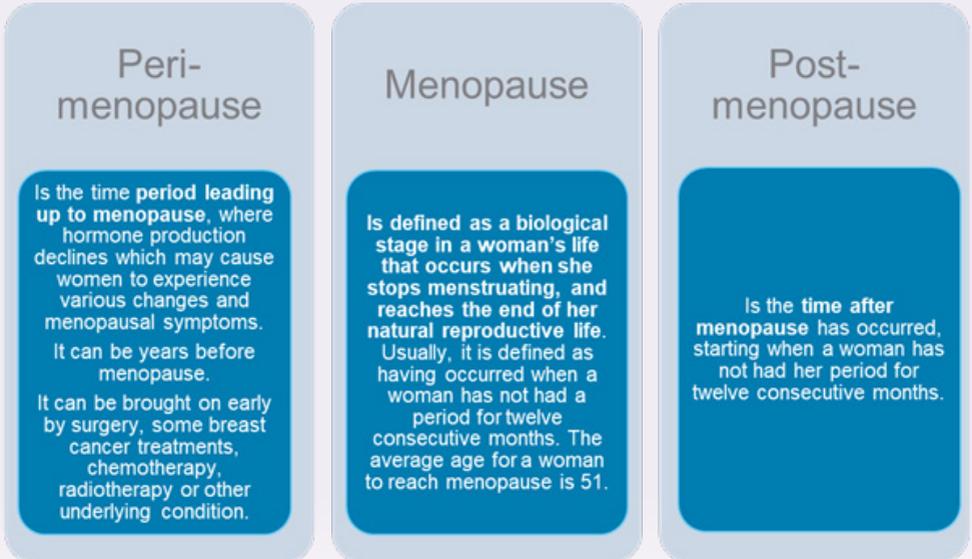
- What is the menopause?
- Symptoms of menopause
- How will I know if I am going through the menopause?
- Your health after the menopause
- What can I do to help myself?
- Seeing your health care professional
- Your primary care health team
- Help at work
- Useful resources

What is the menopause?

The menopause is the time in a woman's life when the ovaries stop making hormones, and her periods stop. Many women develop symptoms of the menopause for a few years before their periods stop. This is known as the perimenopause. Symptoms may also continue for some time after the periods have stopped. The severity of symptoms and the amount of distress they cause varies from woman to woman.

The average age in the UK for a woman to go through the menopause is 51 years. Some women develop an early menopause (under the age of 45 years) or

premature menopause (under the age of 40 years old). This can be caused by medical treatments, such as chemotherapy or surgery to remove the ovaries/womb.



Symptoms of menopause

Most women will experience some symptoms, but the severity and duration of symptoms varies from one woman to another. The troublesome symptoms of the menopause are caused by the fluctuating hormone levels. Here is a note of the more common symptoms:

- **Change in periods:** Sometimes periods will just stop. Many women notice that their periods become heavier and longer, and are not as regular as before. Some women can miss periods while others experience more frequent bleeding with no definite cycle. This can last for several years. You should speak

to your doctor if you are having problems with heavy periods or bleeding between periods.

- **Hot flushes and night sweats:** Four out of five women will experience these symptoms. They may be mild, but for some they can be distressing. The good news is that they can generally be helped by taking Hormone Replacement Therapy (HRT).
- **Sleep disturbance:** This can be made worse by night sweats or may be due to stress or anxiety.
- **Mood swings, emotional upset, anxiety, depression and memory issues:** These symptoms can happen for other reasons, but are commonly seen in women at the time of the menopause.
- **Bladder symptoms, vaginal dryness and loss of interest in sex:** These symptoms can sometimes happen around the menopause, or develop later due to lack of oestrogen hormone. Sexual difficulties may be due to physical symptoms, such as vaginal dryness or emotional issues, such as low mood. Often it is a combination of both physical and emotional factors and can be a side effect of commonly used medications.

- Joint and muscle aches





How will I know if I am going through the menopause?

Menopause is diagnosed by a pattern of symptoms, taking into account your age. The symptoms can vary widely between women and can come and go. It is important to be aware of the different symptoms. Consider keeping a symptom diary to monitor and reflect on your symptoms. Please see the useful resources section for links to helpful websites and tracking tools.

Blood tests to check your sex hormone levels (FSH/LH) are not required or recommended to diagnose menopause unless you are under 45 years (early or premature menopause). This is because these levels can fluctuate greatly from day to day – for example, levels may be elevated one day, then within the normal range

the next. However, sometimes other types of blood tests are needed to exclude other potential health problems that could cause similar symptoms. See section – Seeing your health care professional.

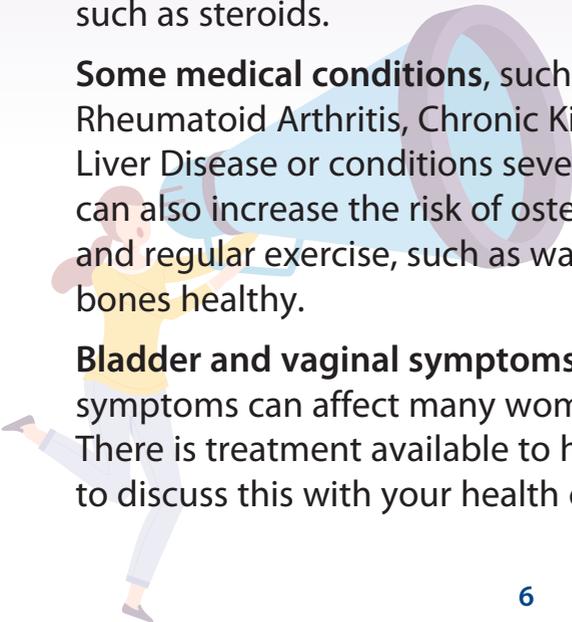
Your health after the menopause

The loss of oestrogen also has a longer term effect on a woman's health after the menopause. Making healthy lifestyle choices can help reduce these risks. So, it is important to review your lifestyle and to try to make positive changes.

Osteoporosis: Bone tissue reduces as we get older. As a result, bone strength is affected and the risk of a fracture goes up. In women after the menopause, the bone loss is greater than in men. The rate of bone loss varies, but the risk of osteoporosis is higher in women who have an early menopause, and those on certain medications, such as steroids.

Some medical conditions, such as Crohn's Disease, Rheumatoid Arthritis, Chronic Kidney Disease, Chronic Liver Disease or conditions severely affecting mobility, can also increase the risk of osteoporosis. A good diet and regular exercise, such as walking, can help to keep bones healthy.

Bladder and vaginal symptoms: These common symptoms can affect many women after the menopause. There is treatment available to help, so it is important to discuss this with your health care professional.



Treatment includes vaginal oestrogen (cream/pessaries/ring), lubricants, moisturisers and pelvic floor physiotherapy.

Cardiovascular disease: Heart disease is the biggest cause of death in women at all ages and the risk increases four times after the menopause. There are many simple lifestyle changes that you can make to reduce your risk.

What can I do to help myself?

There are many things that you can do to help yourself through this period. Making healthy lifestyle changes can reduce and help you cope with the symptoms of menopause, as well as improving your future health. Here are some areas to focus on:

Diet: Maintain a healthy balanced diet. Try to ensure you have a varied diet, sufficient in nutrition and vitamins. Try to ensure you get a sufficient intake of protein, calcium and vitamin D. These are important to maintain your muscles and bone strength. Reducing alcohol and caffeine can help with hot flushes, sleep and mood problems.

Sleep: Try to optimise your sleep opportunity. Reducing/stopping alcohol and caffeine; optimising your sleeping space (for example, ensure your bed is comfortable, room is dark and temperature is cool); and building an unwinding routine one to two hours before bed (for example, darken lights, avoid eating meals, take a warm

bath) can all help. There is good evidence also that cognitive behavioural therapy (CBT) can help with sleep problems.

Exercise: Exercise has many benefits. It helps keep your bones and muscles strong, helps keep your heart healthy and can help with your mental health. Government advice is to try to have at least 150 minutes of physical activity a week. This can be broken down into smaller portions throughout the week. Choose an activity you enjoy.

Managing stress: Stress is a normal physiological response in our bodies, and at times stress can be useful. However, prolonged and ongoing stress can have a negative effect on our mental and physical health. It is important to be aware of this. Reflect on what your stressors are. Can you reduce any stressors? Can you build into your routine ways to de-stress? For example, mindfulness, yoga, writing a journal, meeting family and friends or exercise.

Supplements: If you have a healthy varied diet, then the only supplement you may want to think about is Vitamin D in the winter months - we get Vitamin D from diet and also exposure to sunlight.

There are also some herbal remedies that may help with some symptoms during the menopause. The evidence for their benefit is variable and they are not suitable for everyone, depending on your past medical history and if you are taking other medication.

Black cohosh can help with hot flushes. St John's Wort can help with mood issues. Red clover/isoflavones are plant based phytoestrogens (mimic oestrogen). However, evidence is limited and they are not recommended for people with a past history of breast cancer. If you are considering using herbal supplements, make sure you look for the THR logo and discuss with your pharmacists about any potential interactions.

Screening programmes: It is important to attend for cervical and breast screening when invited. Sometimes women can find that smear tests become uncomfortable due to changes in the vaginal tissues/lubrication during the menopause. This useful information fact sheet from Rock My Menopause has got some useful tips and advice to help: [June20_RMM_Smear-tests.pdf \(rockmymenopause.com\)](https://rockmymenopause.com/June20_RMM_Smear-tests.pdf)

Seeing your health care professional

There are many members of your primary care health team (PCHT) that can provide you with further support and information. You may wish to seek advice if you are struggling with or are worried about any of your symptoms.

There are medications which can be prescribed to help, such as Hormone Replacement Therapy (HRT) or non-hormonal alternatives. They can also signpost you to other alternative treatments, such as cognitive behavioural therapy (CBT).

Hormone Replacement Therapy (HRT): HRT can be very helpful in alleviating symptoms of the menopause, as well as reducing future health risks, such as thinning of bones and heart disease. It can be associated with some side effects and potential risks. However, in most circumstances the benefits of HRT outweigh any risks.

In most cases it is recommended that women who undergo an early menopause (under 45 years) or premature menopause (under 40 years) take HRT at least until they reach the average age of natural menopause (51 years).

Have a look at the useful resources section for further links on HRT and alternatives. You might find it useful to read more about the different types; the benefits and risks of HRT; and available alternatives before making an appointment with your health care professional. This can help you make the most of your appointment time.

Non-hormonal alternatives: Some people cannot take HRT due to health issues, and some may decide after further reading that it is simply not for them. There are non-HRT alternatives available. These include medications, such as clonidine, antidepressants and GABA receptor analogues. These have their own benefits and risks, and you should discuss these options further with your primary care health team.

Contraception: You can still become pregnant until your periods have stopped. So it is important to use contraception, as an unplanned pregnancy could be distressing.

There are various choices available including the progestogen pill, the contraceptive implant (Nexplanon), the Mirena coil (IUS) and copper coil (IUD). Some women may prefer barrier methods, including condoms. You should continue using contraception until two years after the last natural period if you are aged under 50 years, and one year after the last natural period if aged over 50 years.

Most women will be menopausal by age 55 and contraception can be stopped at this age. For further information on contraception have a look at <https://shayr.com/> . Your practice nurse or GP can discuss your options further with you.

Your primary care health team

- **Pharmacist:** Your community pharmacist can discuss your medications and any potential interactions. They would not normally start you on HRT, but may do the annual review.
- **Advanced Nurse Practitioner or Practice Nurse:** They can discuss options to manage any menopausal symptoms you may have. They can also discuss options such as contraception, HRT and non-hormonal alternatives. Many practice nurses can also prescribe these treatments and can refer you to other health care professionals if required.
- **Community Link Worker:** Community link workers can help you find support or local groups to help with

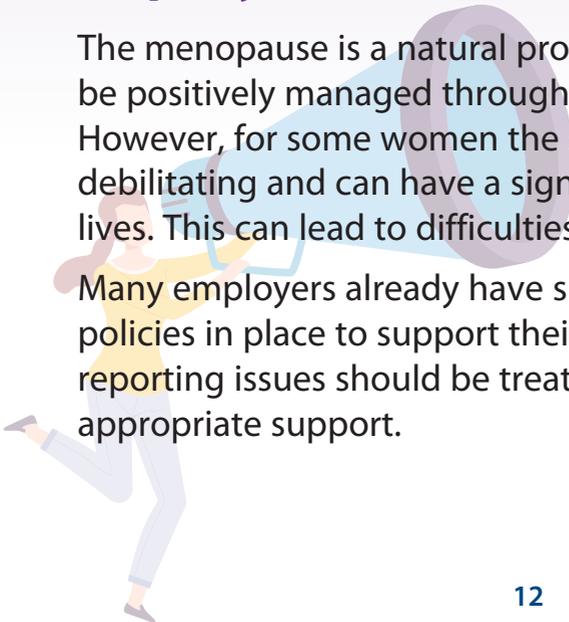
issues, such as mental health, healthy eating, exercise and financial worries. You can make an appointment directly with them by contacting your practice. You do not need your GP to refer you.

- **Mental Health Practitioner (MHP):** Most GP surgeries have MHPs within their teams. They can discuss and support you with your mental health. You can book directly with them without needing a GP referral.
- **Family doctor (GP):** Your GP can discuss your symptoms and can rule out other health problems. They will advise if you need any investigations and can advise you on what options would be suitable for treating your symptoms. Your GP can also refer you to other health care professional such as women's health physiotherapy or a menopause specialist if required.

Help at your work

The menopause is a natural process and for many can be positively managed through lifestyle adjustments. However, for some women the symptoms can be debilitating and can have a significant impact on their lives. This can lead to difficulties at work.

Many employers already have specific menopause policies in place to support their employees. Employees reporting issues should be treated fairly and given appropriate support.



If you are having symptoms that you feel are impacting on you or causing you to need to be absent from work then take the opportunity to approach your line manager or supervisor for a confidential discussion to explore what can be done to support you. Adjustments could be made to your working environment or shift patterns to help. If you don't feel comfortable speaking to your line manager, then you can contact and speak to your Human Resources Department.

Useful resources

In Ayrshire and Arran, the Better Health Hub offers friendly, confidential support and information about your health. The Better Health Hub can provide support and information on a wide range of issues that can impact health and wellbeing including menopause, healthy eating/ weight management, managing stress, anxiety and wellbeing, money worries, stop smoking, caring for relatives or friends. You can email AA.UHB.BetterHealthHub@aapct.scot.nhs.uk or telephone 01563 825611 to find out more and discuss further support.

Menopause

Further information on the symptoms, long term health implications and all the pros and cons to all the different management options can be found at the following weblinks.

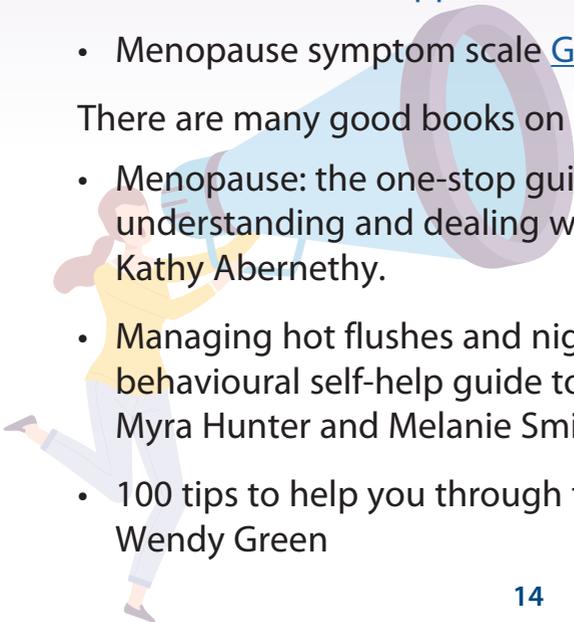
- [Women's Health Concern | Confidential Advice, Reassurance and Education \(womens-health-concern.org\)](https://www.womens-health-concern.org/)
- [The menopause | NHS inform](https://www.nhs.uk/health/a-z/the-menopause/)
- [Rock My Menopause - Menopause Information](https://www.rockmymenopause.com/)
- [Home - Sexual Health Ayrshire \(shayr.com\)](https://www.shayr.com/) - for further information on contraception and sexual health
- For women undergoing premature menopause [Daisy Network](https://www.daisy-network.org/)

The following are useful tracking resources to monitor your symptoms and aide your consultation with your health care professional

- Symptoms Tracker - [Rock My Menopause](https://www.rockmymenopause.com/)
- Balance - [Balance app \(balance-menopause.com\)](https://www.balance-menopause.com/)
- Menopause symptom scale [Greene Climacteric](https://www.greeneclimacteric.com/)

There are many good books on menopause available .

- Menopause: the one-stop guide: a practical guide to understanding and dealing with the menopause, by Kathy Abernethy.
- Managing hot flushes and night sweats: a cognitive behavioural self-help guide to the menopause, by Myra Hunter and Melanie Smith
- 100 tips to help you through the menopause, by Wendy Green



- Menopocalypse: how I learned to thrive during menopause and how you can too, by Amanda Thebe.
- The menopause restart: get rid of your symptoms and feel like your younger self again, by Dr Mindy Pelz
- What fresh hell is this: Perimenopause , menopause and other indignities and you, by Heather Corinna
- Living well through the menopause: an evidence based cognitive behavioural guide, by Myra Hunter and Melanie Smith
- Managing the menopause: 21st century solutions, edited by Nick Panay, Paula Briggs, Gab Kovacs.
- Healthy menopause: how to best manage your symptoms and feel better than ever, by Liz Earle.
- Management of the menopause, by Margaret Rees

Mental health

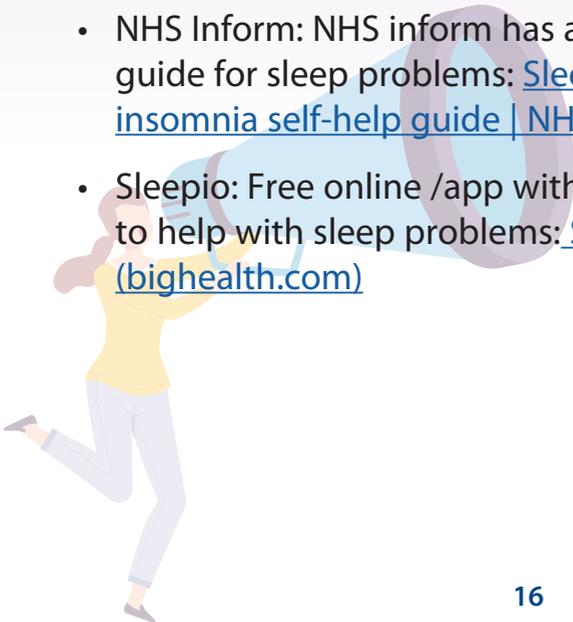
- [NHS Ayrshire & Arran](https://www.nhs.uk/health-and-wellbeing/) - Mental Health and Wellbeing (nhsaaa.net): NHS Ayrshire & Arran has a health and wellbeing section within the main website, which has links to additional resources.
- [Breathing space](https://www.breathingspace.org/): Breathing Space is a free confidential service for people in Scotland. Open up when you're feeling down. Call 0800 83 85 87.
- [Daylight](https://www.daylightapp.com/): Daylight is an effective digital therapeutic that helps people gain control over their anxiety. After

a two-minute quiz to discover their Anxiety Type, individuals receive personalized techniques to help manage it.

- [Living life to the full](#): Free online courses covering low mood, stress and resilience. Work out why you feel as you do, how to tackle problems, build confidence, get going again, feel happier, stay calm and tackle upsetting thinking and more.
- [SilverCloud](#): This is an online Cognitive Behavioural Therapy (CBT) programme for individuals with mild to moderate depression and anxiety. This online CBT course enables users to work through modules to learn about and apply the principles of CBT at a time and place to suit each individual. You can access this for free by requesting a referral from your GP or MHP.

Sleep

- NHS Inform: NHS inform has a very good self help guide for sleep problems: [Sleep problems and insomnia self-help guide | NHS inform](#)
- Sleepio: Free online /app with information on CBT to help with sleep problems: [Sleepio | Can't sleep? \(bighealth.com\)](#)



Healthy diet and weight

- Fact sheet from British Dietetic Association: <https://www.bda.uk.com/uploads/assets/da7a32fc-4ab3-42e1-b2573359e81471d0/Menopause-food-fact-sheet.pdf>
- [NHS Better Health](#) loss weight, get active, stop smoking, drink less, healthier food swap information available on Apps available for smartphones.
- [MyFitness Pal](#), track calories, log fitness activities

Genitourinary and sexual problems

- <https://www.squeezyapp.com/>
- [Vaginal dryness](#) - Women's Health Concern (womens-health-concern.org)
- [RMM Sex-drive.pdf](#) (rockmymenopause.com)
- [Sexual Advice Association](#)
- <https://www.pleasurepossibility.com/>

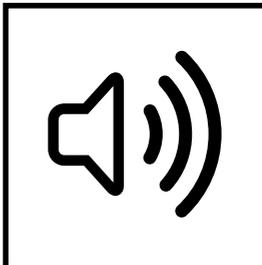
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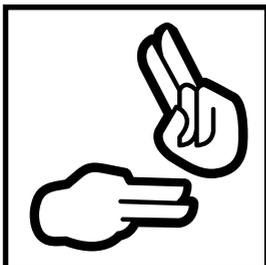
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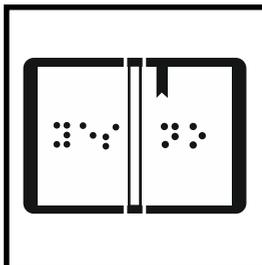
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