

Menopause is not a Disease

By Dr Arthur Tseng
It is a normal part of life and there are ways to deal with the signs and symptoms.

Menopause is a normal part of life – it is a milestone, just like puberty, and it is not a disease or a condition. The hormones, estrogen and progesterone, regulate menstruation (estrogen regulates menstruation, while progesterone is more involved with preparing the body for pregnancy). When the ovaries start producing less of these two hormones, the term “peri-menopause” is used to describe symptoms that usually happens three to five years before menopause.

In fact, by the time a woman is in her late 30s, the ovaries start producing less progesterone and estrogen. By the time she is in her 40s, the post-ovulation spike in progesterone becomes less emphasised, signalling a decrease in fertility long time before she may notice any menopausal or peri-menopausal symptoms.

As time passes and the ovaries produce less and less estrogen and progesterone, the ovaries eventually shut down completely and the woman no longer has any more menstrual periods. The vast majority of females experience a gradual change in menstrual activity, while some abruptly stop producing hormones.

Premature menopause

A small group of women may experience what is called premature menopause. This is when their ovaries fail earlier than when they are supposed to before the age of 45.

Ovarian failure can occur at any age – but very rarely – and often the doctor and patient will not know the reason for this. Some who experience ovarian failure may still have periods

and some degree of fertility for a while.

Premature menopause may be caused by: Enzyme deficiencies, Down's syndrome, Turner's syndrome, Addison's disease, hypothyroidism, removal of the ovaries (bilateral oophorectomy surgery), radiotherapy to the pelvic area, chemotherapy and hysterectomy surgery (the uterus – womb – is surgically removed). Some infections like mumps and tuberculosis, malaria and varicella may also be a factor as well as genetics factors and being a twin.

Menopause marks the time in a woman's life when her menstruation stops for one year and she is no longer fertile (able to become pregnant). In the UK, according to the National Health Service, the average age for menopause is 52, while in the US, the National Institute of Aging indicates it is 51. However, in places like India, about one fifth of women experience menopause much earlier, before the age of 41.

Signs & symptoms

The signs and symptoms of peri-menopause and menopause are

Irregular periods

This is usually the first symptom where the menstrual pattern changes. Some women may experience a period every two to three weeks, while others will not have one for months at a time.



Approximately 30 percent of women experience vaginal atrophy symptoms early in their menopause, while 47 percent do so during the later post-menopausal period. There are cases of women who experience vaginal atrophy more than a decade after their final period. Unfortunately, the majority of post-menopausal women are uncomfortable talking about vaginal dryness and pain, and are reluctant to seek medical help.

Other common symptoms women will experience are:

Hot flushes

It is a sudden feeling of heat in the upper body. It may start in the face, neck or chest, and then spreads upwards or downwards (depending on where it started). The skin on the face, neck or chest may redden and become patchy, and the woman typically starts to sweat. The heart rate may suddenly increase (tachycardia), or it may become irregular or stronger than usual (palpitations). Hot flashes generally occur during the first year after a woman's final period.

Night Sweats

If the hot flashes happen in bed, they are called night sweats. Most women say their hot flushes do not last more than a few minutes, but are extremely uncomfortable and disrupt their sleep.

Disturbed sleeps

Apart from night sweats, insomnia or anxiety may also contribute to difficulty falling asleep and staying asleep as women go through menopause.

Urinary problem

Women tend to be more susceptible to urinary tract infections such as cystitis. Having to urinate more frequently may also occur; this may herald the start of an overactive bladder syndrome (OAB).

Moodiness

This often goes hand-in-hand with sleep disturbance. Experts say that most mood disturbances are triggered by poor sleep.

Problems focusing and learning

Some women also experience short-term memory problems, as well as difficulty concentrating on something for long. Some women may not be able to learn as well shortly before menopause compared to other stages in life.

Osteoporosis

Bone loss from calcium loss (osteopaenia and osteoporosis) is due to the lack of estrogen during menopause, which may eventually cause fractures in the spine or long bones (fragility fractures).

Lower fertility

When a woman's estrogen levels drop significantly, this in turn lowers her chances of becoming pregnant.

Vaginal dryness

This is usually accompanied by itching and/or discomfort. Some women may experience dyspareunia (pain during sex). Some will also experience vaginal atrophy, where the vaginal wall thins out due to shrinking of the tissues, as well as decreased lubrication caused by a lack of estrogen.

Fat build-up

More fat building up in the abdomen.

Loss of hair

Hair loss (thinning of the hair) is another common occurrence.

Loss of breast size

This is also common.

If left untreated, these symptoms will usually taper off gradually over a period of two to five years. However, in a small minority of women, symptoms can persist for much longer.

Treating menopause

Only about 10 percent of women seek medical advice regarding their menopause. However, if symptoms are adversely affecting the woman's daily life, it is advisable to see a doctor. The kind of treatment the patient should have depends on her symptoms, her medical history, as well as her own preferences. Available treatments to treat hot flushes include different kinds of medications, and this is best discussed with a specialist. But, one of the most common and well-known treatments is hormone replacement therapy (HRT). This is very effective for many of the symptoms that occur during menopause, including vaginal dryness, vaginal itching and discomfort, urinary problems, bone-density loss, hot flashes and night sweats, as it “returns” estrogen to women who lack it.



However, as with many treatments, HRT has its risks as well as benefits. Its benefits include effectively treating menopausal symptoms, preventing osteoporosis and lowering colorectal cancer risk (cancer of the colon or rectum). There are small but significant risks with HRT, and these include breast, ovarian and uterine cancer risks, mild and temporary increase in coronary heart disease and stroke upon starting HRT, and mild increase risk of changes in thinking and memory among women aged 65 and over.

Alleviating mild common menopause symptoms

There are many things that women can do to aid in the transition through menopause, and these include many non-medical options listed below:

- a Do plenty of exercise regularly.
- b Avoid wearing tight clothing.
- c Wear cotton-based clothing.
- d Make sure the bedroom is not hot.
- e Reduce stress levels by learning how to do deep breathing, guided imagery, progressive muscle relaxation therapy and yoga.
- f Avoid spicy food, caffeine, smoking and alcohol.
- g Go to bed and get up at the same time each day – even during weekends. Make sure you get at least seven hours of sleep each time.
- h If you are sexually-active, consider using over-the-counter, water-based lubricants or moisturisers.
- i Practise pelvic floor muscle exercises like Kegel exercises. If you practise three or four times a day you will most probably notice a difference after four to six weeks of regular exercise. This will help if you have urinary incontinence.
- j Eat a well-balanced diet that includes plenty of vegetables, fruits, whole-grain foods, good quality fats, fibre, and unrefined carbohydrates.
- k Try to consume 1,200 to 1,500mg of calcium and 800 IUs of vitamin D per day. **HT**

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