

Menopause

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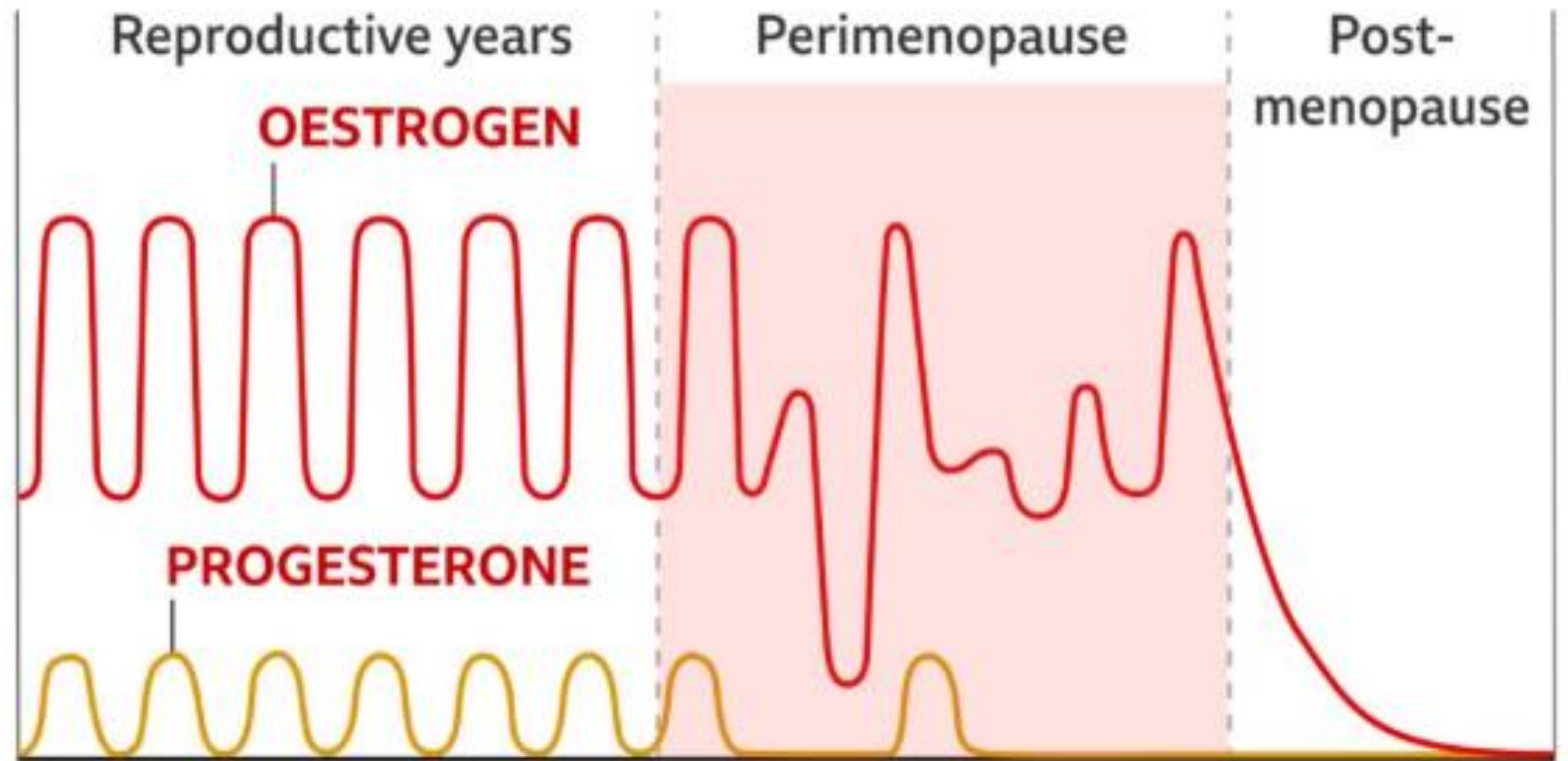
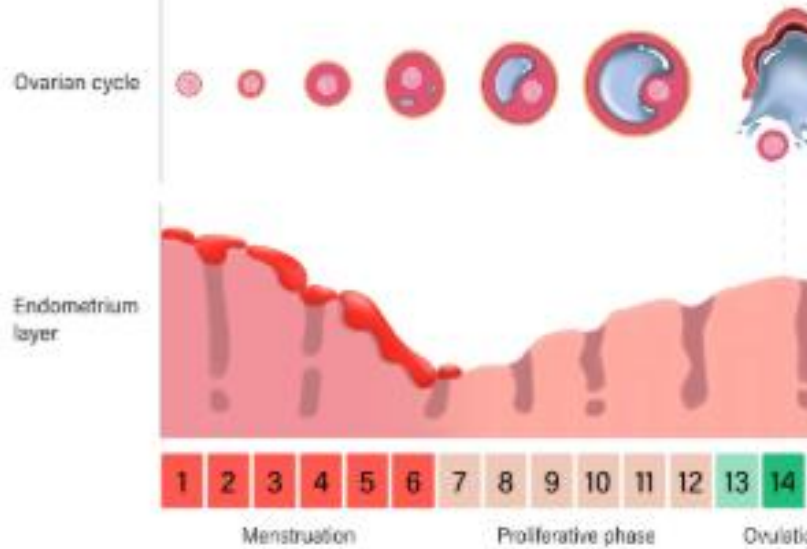
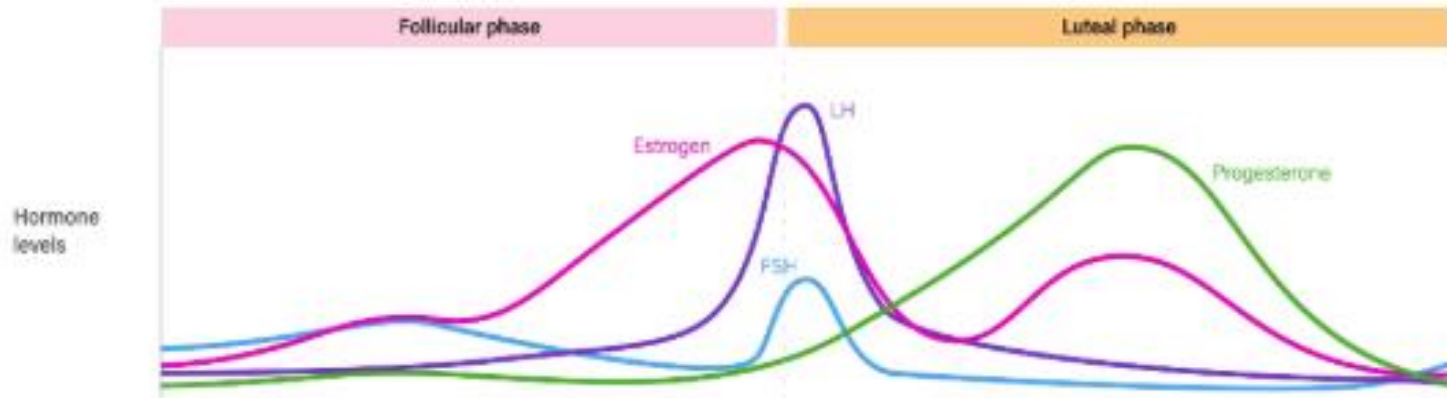
▶ Menopause

- ▶ The last menstrual cycle

▶ Peri-menopause

- ▶ Prior to final period
- ▶ Fluctuating hormone levels
- ▶ Heavier/lighter/irregular periods

Menstrual cycle



Why???




Primordial
follicles



Birth
1-2 million



Puberty
500.000



Menopause
Exhaustion

Effects

- ▶ Heart and
- ▶ Brain
- ▶ Joints
- ▶ Bones
- ▶ Bladder
- ▶ Vagina
- ▶



Hot flu
Anxiety
Poor sleep
Forgetfulness
Joint pain
Loss of sex drive

Menopause

- Every woman is affected by menopause in some way – either they experience symptoms or other physical changes.
- The average age of menopause is 51 years but you can enter menopause earlier.
- Hormonal changes cause menopausal symptoms.
- Most women will have some symptoms.
- Most women have symptoms for 5 to 10 years.

Symptoms

Can affect whole body or just the urogenital system

Whole Body

Early - change in menstrual periods

Hot flushes and night sweats

Problems sleeping

Pain in your joints and tiredness

Anxiety or mood changes



Urogenital system

Dry vagina

Overactive bladder or discomfort

Management Options for menopause

Non pharmacological

Life style

Acupuncture

CBT

Pharmacological

Hormones

SSRI

Anti epileptics

Herbal

Pharmacological

Hormones

SSRI

Anti epileptics

Herbal

Benefits of MHT

- MHT is the most effective treatment for hot flushes and night sweats.
- Only women with an intact uterus need the addition of a progestogen.
- The risks are small in most women within 10 years of their final menstrual period.
- Non-oral routes of administration have fewer risks than oral preparations.

Types of oestrogens

- Oestrogens are available as:
 - tablets
 - skin patches
 - gels
- Gels and patches: decreased risk of blood clots
- Vaginal oestrogen in creams, pessaries or tablets is available for vaginal dryness or dyspareunia.

The benefits of oestrogen- only MHT

- Oestrogen ↓ hot flushes 85%
- Oestrogen improves vaginal dryness.
- Improve sleep
- Improved Quality of life
- Decreases risk of fractures
- Does not cause weight gain
- Premature and early menopause need MHT

Benefits of Oestrogen

- Oral oestrogen increases the risk of stroke
risk increases with age.
Minimal increased risk woman <60 with N - BP
Lower risk with transdermal oestrogen
- Oral oestrogen - gall bladder inflammation
- Oestrogen alone unlikely to increase the risk of breast cancer.
- Oestrogen alone -no↑ risk of coronary heart disease.
? Decrease the risk

Types of progestogens

- Progestogens are mostly taken orally.
norethisterone, used in the progesterone creams are not reliable
No uterine protection
- Micronised progesterone capsules are a form of natural or “body-identical” progesterone recently available in both Australia and New Zealand.
- An alternative method is to deliver the progestogen directly to the endometrium using the levonorgestrel containing intrauterine system (Mirena).
- There is no evidence that either progesterone troches or progesterone cream confer adequate endometrial protection .

Other MHT

- Tibolone is a synthetic progestogenic hormone which, once metabolized, acts like oestrogen, progestogen and testosterone
- A selective oestrogen receptor modulator (SERM)
Duavive™.
Acts as a combined MHT
- Testosterone - is sometimes added to MHT and may improve libido and energy in some women

When to stop?

- The dose and duration of MHT: depends on patient's goals and symptoms
- Premature and early menopause : MHT until age of 50
- Risk of breast cancer is primarily associated with combined oestrogen/progestogen therapy and related to the duration of use.
 - Oral MHT increases the risk of stroke and the risk increases with age.
- Stopping MHT is associated with increased cardiovascular and cerebrovascular events and increased risk of fracture

Psychological Impact



Menopausal Transition

- Oestrogen Withdrawal = “A Window of Vulnerability”
 - ▶ Oestrogen withdrawal impact
 - ▶ Oestrogen plays a crucial role in brain health,
 - ▶ cognitive processes
 - ▶ emotional regulation.

While many women do not have mental health issues during the menopausal transition, unstable oestrogen levels can have an impact on the brain and can complicate and overlap with mental health symptoms

Common Psychological Impacts

Mood swings

Feeling angry or irritable

Difficulty concentrating or making decisions

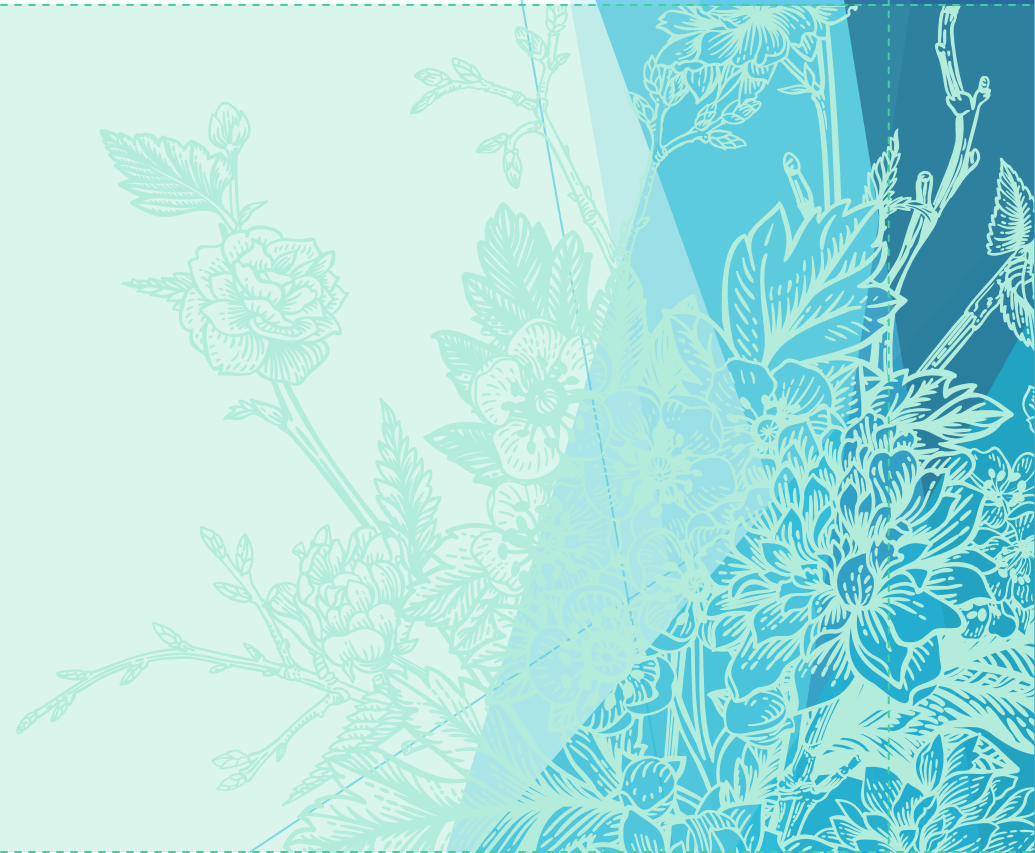
Forgetfulness

Anxiety and depression symptoms

Social withdrawal

Shifting sense of values and purpose

Body image challenges



Risk Factors

Past experiences:

- ▶ Previous episodes of mental illness
- ▶ Reproductive related mood disturbance (premenstrual dysphoric disorder, postpartum depression)
- ▶ Adverse childhood experiences

Current Factors:

▶ Psychosocial Stressors:

- ▶ Stressful life events: caring for children, caring for elderly parents, career changes, relationship changes, ageing, body changes, illness
- ▶ Financial difficulties
- ▶ Poor social support

▶ Lifestyle Factors:

- ▶ Sedentary lifestyle
- ▶ High BMI
- ▶ Cigarettes

Tips to Help

Physical Considerations

- ▶ Treatment of vasomotor symptoms (hot flushes, night sweats)
- ▶ Prioritise Sleep and practice sleep hygiene
 - ▶ Seek treatment of sleep disturbance if required
- ▶ Balanced nutrition
- ▶ **Stay hydrated**
- ▶ Regular exercise
 - ▶ Evidence shows positive impact on mood and sleep
- ▶ Limit caffeine and alcohol
 - ▶ Both can exacerbate mood swings and sleep issues.



Nutrition and Exercise

Heart, Brain, Bones, Gut

- ▶ 30 plants/week (gut biome)
- ▶ Calcium intake
 - ▶ Food, not tablets
 - ▶ <https://www.osteoporosis.foundation/educational-hub/topic/calcium-calculator>
- ▶ Exercise every day
 - ▶ Strength (resistance)
 - ▶ Balance
 - ▶ Aerobic

Tips Continued

Psychosocial Tips

- ▶ Positive attitudes towards menopause and ageing
- ▶ Social Support
 - ▶ Connect with other women going through similar experiences
- ▶ Psychological Resources:
 - ▶ Stress Management Skills
 - ▶ Coping Strategies
 - ▶ Positive Self-image
 - ▶ Practice self-compassion

References

<https://www.jeanhailes.org.au/>

<https://menopause.org.au/health-info/fact-sheets/menopause-and-mental-health>

<https://www.affinitypsychology.com.au/perimenopause/understanding-the-perimenopause-rollercoaster-2/>

<https://www.beyondblue.org.au/mental-health/womens-mental-health/perimenopause-menopause-mental-health>

<https://www.promotingwomenshealth.com/women-in-menopause-experience-real-estrogen-withdrawal/>

Journal Article:

- ▶ Promoting good mental health over the menopause transition (2024). Lydia Brown et al.

Book:

- ▶ Management of Menopause: Chapter-Psychological Problems and Menopause. Radhika Chetan, Jyothi Seshadri and Prabhat Agrawal

The background features abstract, overlapping geometric shapes in various shades of blue, ranging from light sky blue to deep navy blue. These shapes are primarily located on the left and right sides of the frame, creating a modern, dynamic feel. The central area is a plain, light grayish-white.

Questions?