Menopause

Summary

- Menopause means the end of monthly periods.
- You may experience a range of symptoms.
- A healthy lifestyle can help to manage menopause symptoms.
- Continue to have regular breast checks and cervical screening tests.

What is menopause?
Menopause, also known as ‘the change of life’, is the end of menstruation (having periods) in a woman’s life. It is a natural occurrence at the end of the reproductive years, just as the first period during puberty was the start.

You will know that menopause has taken place if you have not had any menstrual bleeding for 12 months. Most women reach menopause between the ages of 45 and 55, the average being around 51. Menopause before the age of 40 is called ‘premature menopause’ and before the age of 45 it is called ‘early menopause’.

Hormone levels fluctuate leading to menopause
As you approach menopause, the production of ‘female’ hormones (oestrogen and progesterone) by the ovaries starts to slow down. Hormone levels tend to fluctuate, and you may notice changes in your menstrual cycle such as:

- period cycles may become longer, shorter or totally irregular
- bleeding may become lighter
- bleeding may become unpredictable and heavy (get advice from your doctor).

Eventually, your hormone levels will fall to a point where your ovaries stop releasing eggs, your periods stop and menopause is reached.

Although fertility after the age of 45 is low, you still need to use contraception to prevent pregnancy. Its recommended to continue contraception until you have had one year without a natural period if you’re over 50 years old, or two years without a natural period if you’re under 50.

Menopause symptoms
Some of the symptoms women may have include:

- hot flushes
- night sweats
- aches and pains
- crawling or itching sensations under the skin
- forgetfulness
- headaches
- irritability
- lack of self-esteem
- reduced sex drive (libido)
- tiredness
- difficulty sleeping – wakefulness or waking hot and sweaty
• urinary frequency
• vaginal dryness
• discomfort with sexual intercourse.

**Long-term health risks with menopause**
A decrease in female hormones after menopause may lead to:
• thinning of the bones (osteoporosis) and an increased risk of fractures
• an increase in the risk of heart attack and heart disease, high blood pressure and stroke.

**Managing menopause symptoms**
Unpleasant symptoms of menopause can often be reduced by:
• healthy diet
• regular exercise
• looking after your mental health
• reducing your stress levels
• getting enough good quality sleep
• using light-weight sleepwear and bedding to help with night sweats
• avoiding the things that trigger your hot flushes
• quitting smoking
• menopausal hormone therapy (MHT), previously known as hormone replacement therapy (HRT).

**Healthy diet and menopause**
Suggestions for maintaining good health through diet at the time of menopause include:
• Choose a wide variety of foods, including plenty of vegetables, fruits, cereals, whole grains and small portions of lean meat, fish or chicken.
• Increase fluids and eat low-fat dairy foods with high calcium content.
• Decrease caffeine and limit alcohol (aim for one to two standard glasses or less per day, and two alcohol-free days each week).

**Exercise and menopause**
Regular exercise is important. At least 30 to 45 minutes on most days of the week will help to:
• maintain your heart health and improve your general health
• keep your bones healthy and prevent bone density loss through osteoporosis – particularly weight-bearing and strength-training activities
• maintain good balance and reduce the risk of injury from falls
• provide a feeling of relaxation and wellbeing
• possibly improve hot flushes.

**Mood and menopause**
Some women experience mood changes such as mild depression, anxiety and irritability with menopause. These symptoms are often related to physical changes such as hot flushes, night sweats and poor sleeping.

Changes in mood may also arise due to how you are feeling about reaching this stage of your life – particularly if you are experiencing early menopause.

Mood changes can also be related to stressors that women are often dealing with around the time that they experience menopause, such as:
• physical signs of ageing
• changes to libido

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• health issues
• changes to the family unit (such as children leaving home, or divorce)
• caring for ageing parents
• career changes
• financial worries.

Visit your doctor or a psychologist if you are experiencing significant or persistent changes in mood that last longer than two weeks, as you could be experiencing depression.

The good news is, depression is treatable. The sooner a person with depression seeks support, the sooner they can recover.

**Smoking and menopause**

People who smoke may have an earlier menopause than those who don’t. It’s also important to avoid smoking because of the associated risk of osteoporosis, coronary heart disease and lung cancer.

For help to quit smoking, contact Quitline on **13 7848**.

**Menopausal hormone therapy (MHT)**

Menopausal hormone therapy (MHT) – previously known as hormone replacement therapy (HRT), and also known as hormone therapy (HT) – effectively reduces many of the unpleasant effects of menopause symptoms. MHT may be appropriate for use in women with moderate to severe menopausal symptoms.

For women who have undergone a premature menopause, some form of hormone therapy is recommended until the age of 50 years, unless there is a health reason for not using hormone therapy.

There are many different forms of MHT. The advice from international experts is that the benefits of MHT far outweigh the risks for healthy women around the time of menopause.

If you are thinking about taking MHT, it is important to discuss the advantages and disadvantages, benefits and risks with your doctor.

Some MHT is designed to treat many of the symptoms of menopause. This is usually in the form of tablets or a patch or gel applied to the skin. There are also vaginal pessaries (vaginal tablets) and creams if your vaginal or urinary symptoms are bothersome.

If you are one of the 10 per cent of women who have severe symptoms lasting 10 years or more, you may continue longer-term use of MHT. It is important to have a check-up once a year to assess the specific risks and benefits you may experience as a result of the therapy.

**Menopause and non-hormonal medications**

Some women are unable to use MHT because of health reasons such as:

• past breast cancer
• heart disease
• clots in the veins (for example, DVT).

However, there are a number of other medications that may be useful for controlling symptoms such as hot flushes and sleep disturbance around the time of menopause. They include:

• several types of antidepressants (SSRIs and SNRIs)
• the epilepsy medication, gabapentin
• clonidine – a medication that is useful for treating migraine and blood pressure.

Your doctor will be able to advise if any of these options are suitable for you.

**Menopause and complementary therapies**

Some women can benefit from using complementary therapies for menopause. But it is important to remember that ‘natural’ herb and plant medications can have unpleasant side effects in some women, just like prescribed medications. A registered naturopath may provide long-term guidance and balance through the menopausal years.

[Source](betterhealth.vic.gov.au)
Herbal therapies can often be taken in conjunction with hormone therapy. It is important to let both your doctor and naturopath know exactly what each has prescribed, and to consult your doctor before taking any herbal treatments or dietary supplements for menopause. Some natural therapies can affect or interact with other medications you may be taking.

Health checks and menopause

It is recommended that women who have reached menopause have:

- **cervical screening tests** every five years – visit your doctor or women’s health service
- A **mammogram** every two years – this is a free, Australia-wide service for women over 40. Contact BreastScreen Australia on **13 20 50** for more information.

Understand your body’s changes at menopause

It is important to understand the changes your body is going through before, during and after menopause. There are many different sources of information available. Make sure you seek out reputable websites and brochures that provide up-to-date, non-biased information from organisations that specialise in women’s health.

Some examples include:

- Australasian Menopause Society
- Jean Hailes for Women’s Health
- Royal Women’s Hospital
- Mayo Clinic
- NHS.

Where to get help

- Jean Hailes for Women’s Health Tel. **1800 JEAN HAILES (532 642)**
- Jean Hailes for Women’s Health have released a suite of new menopause resources, including fact sheets, video’s and multilingual fact sheets.
- Your **GP (doctor)**
- National Cervical Screening Program Tel. **13 15 56**
- Quitline Tel. **13 7848**

This page has been produced in consultation with and approved by:

Jean Hailes for Women’s Health

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