



# MENOPAUSE MANAGEMENT

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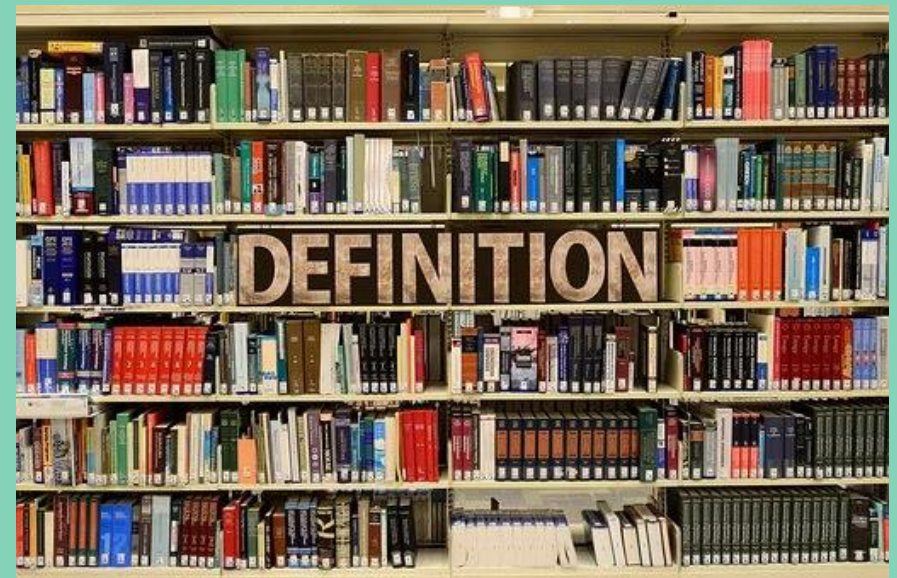
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# WHAT IS MENOPAUSE?



- **Definition:** Permanent cessation of the menstrual cycle  
Retrospective diagnosis: 12 months after last menstrual period  
From the Greek *menos*, meaning month, and *pausos*, meaning an ending
- **Other terms you might hear:**
  - Perimenopause
  - Premenopause or postmenopause
  - Early menopause
  - Surgical/induced/iatrogenic menopause
  - Premature ovarian insufficiency (premature menopause)



# WHO DOES THE MENOPAUSE AFFECT?



A



B



C

Average age of the menopause in the UK: **51** years

# SYMPTOMS OF MENOPAUSE



- **Vasomotor:** 70% of women affected by hot flushes/night sweats
- **Psychological:** sleep problems, low mood, anxiety, irritability, loss of energy, reduced libido
- **Physical:** joint pains, headaches, palpitation, dry skin, urinary symptoms, crawling skin sensation ('formication')
- **Vaginal:** dryness, burning, itching, painful sex
- **Periods:** more frequent, less frequent

An infographic titled 'MENOPAUSE' in large, vertical, pink letters. The background is light blue with a faint illustration of a woman's silhouette. At the top, it states 'EVERY WOMAN GOES THROUGH THE MENOPAUSE IT USUALLY OCCURS BETWEEN THE AGES OF 45 &amp; 55'. Below this, it asks 'DO YOU HAVE ANY OF THESE SYMPTOMS?' and lists six symptoms with corresponding icons: Hot Flashes (fan), Headaches (head with gear), Mood Swings (sad face), Palpitations (heart with pulse line), Tiredness (person with 'Z's), and Pains in Joints (knee with starburst). At the bottom, it says 'YOU MAY ALSO EXPERIENCE:' followed by a list of symptoms: 'Sweats, Have difficulty sleeping, Depression, Anxiety, Loss of sex drive (libido), Feelings of not coping as well as you used to and Changes to your periods.' A final note at the bottom reads: 'If you suffer any of these you might be menopausal. Be aware of the symptoms and discuss them with your doctor.'

# DIAGNOSIS OF MENOPAUSE



## What tests are needed?

For most women, menopause is a clinical diagnosis and does NOT require any blood tests

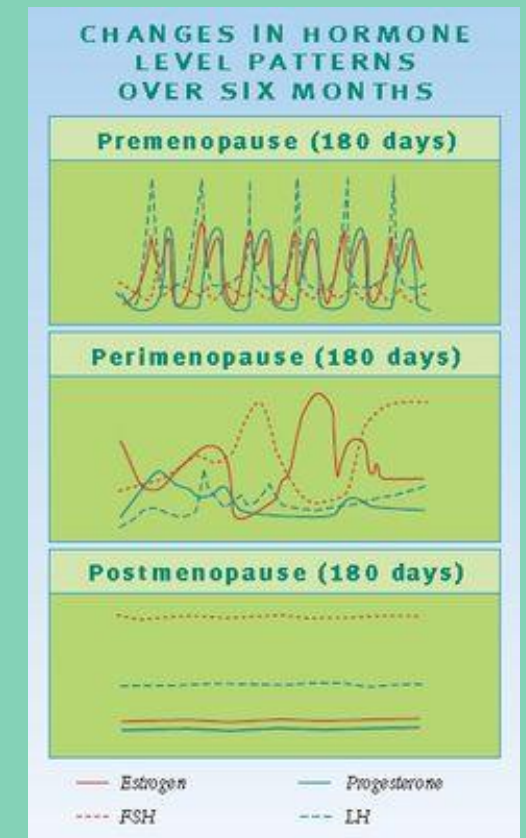
During the perimenopause blood tests can be misleading!



When is a test helpful?

younger women (<40yrs, consider when <45yrs)  
using hormonal contraception

Blood test: **FSH** follicle stimulating hormone  
costs the NHS **£9.6million!**



# LIFESTYLE INTERVENTIONS



## Focus on cardiovascular health and bone health



- **Eat Healthily:**

- Protein-rich diet to help muscle strength
- Calcium and vitamin D to help bones
- Reduce alcohol



- **Exercise:**

- 150 mins moderate exercise each week
- Weight-bearing and strengthening exercise to help maintain bone density



**Don't smoke!**

## ALTERNATIVE THERAPIES?



- Cognitive Behavioural Therapy (CBT)
  - Hot flushes, mood/anxiety problems
- Acupuncture
- Phytoestrogens
  - Isoflavones (soy, red clover), lignans (flaxseed)
- Herbal remedies
  - Black cohosh (unclear mechanism of action)
  - Sage
  - Wild yams



## WHAT IS HRT?



### Hormone Replacement Therapy: Estrogen +/- Progestogen

- What hormones are used?
  - Estrogen: **Estradiol**, estrone, estriol: synthesised from soybeans or yams but structure same as natural hormones
  - Progestogen: Most are synthetic, derived from plants, structurally different
    - Micronised progesterone – ‘natural’ progesterone



‘Body-identical’ vs ‘Bio-identical’



## BENEFITS OF HRT



**Most effective treatment for menopause symptoms: physical and psychological**

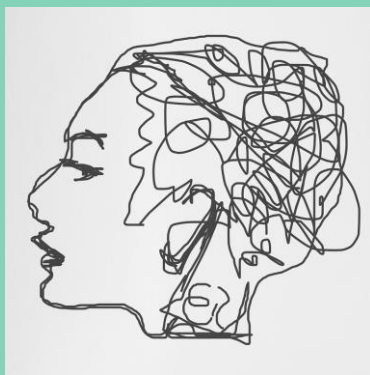


Treatment for osteoporosis in women under 60 (long term effect)



Reduced cardiovascular risk:  
'window of opportunity'

Reduced colorectal cancer risk in oral combined HRT



Potentially improved cognition/Alzheimer's risk in early menopause/POI

Reduced 'all-cause' mortality

# RISKS OF HRT

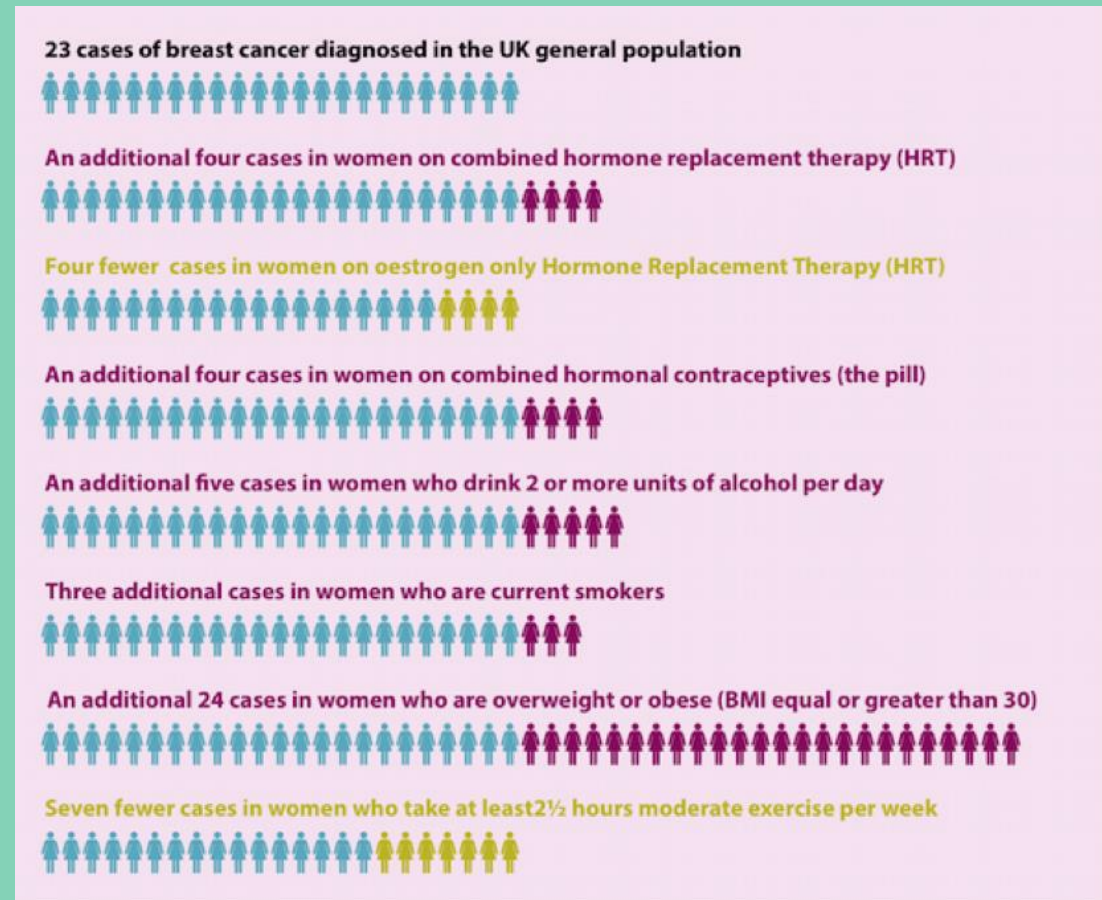


## Breast Cancer

Biggest concern for most women – sadly, a lot of misinformation out there!

- 2002 and 2004 - Women's Health Initiative (WHI) (placebo controlled, randomized)
- 2003 - Million Women's Study – (observational data, criticized for significant bias)

Increased risk of breast cancer with combined HRT ('over 30% increase')



## OTHER RISKS OF HRT



**Venous thromboembolism** – oral HRT increased risk (highest in first year)

Use of transdermal HRT shows no increased risk and can be used in those with history of thrombosis

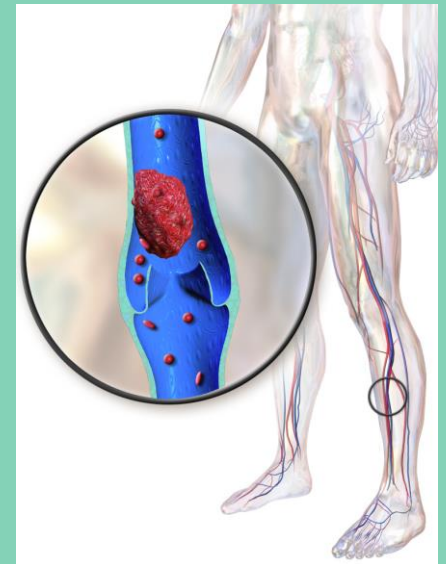
**Stroke** – higher risk if oral HRT started >10years after menopause

**Cardiovascular** – potential increased risk when started in older women

**Other cancers**

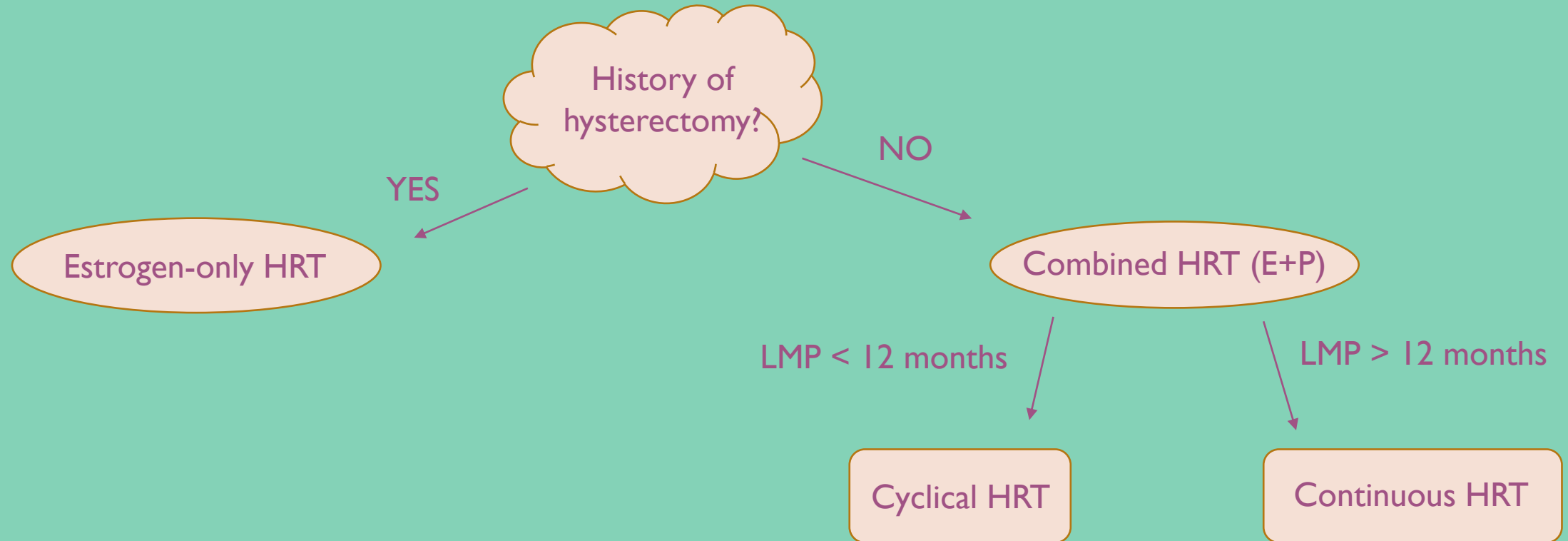
Ovarian – small increased risk (extra 1 case per 5000 women)

Endometrial cancer – small increased risk if cyclical HRT used for >5years



**OVERALL: BENEFITS OUTWEIGH RISKS FOR MOST WOMEN**

# WHAT TYPE OF HRT TO USE?



# FORMS OF HRT IN THE UK



- Tablets
- Gel
- Patches
- Mirena coil
- Topical: pessaries and creams



# CHOICE OF HRT PRODUCTS



## Considerations:

- Medical history: obesity, cardiovascular, thrombosis, gut problems
- Vaginal symptoms: use vaginal treatment alongside systemic HRT
- Need for contraception
- Previous hormone use
- Personal preference/lifestyle



Gold Standard: transdermal oestradiol + micronised progesterone - 'body identical'

## CONSIDER TESTOSTERONE



- Testosterone contributes to libido, metabolic function, muscle and bone strength, urogenital health, mood and cognitive function
- Loss of testosterone is particularly profound after iatrogenic menopause and premature ovarian insufficiency when testosterone production decreases by more than 50%.



Blood tests: total testosterone and SHBG

Free Androgen Index = Total Testosterone x 100 / SHBG.

No licensed product for women in the UK

- Male products: Testogel, Tostran
- AndroFeme

