

MENOPAUSE

midlife and beyond...



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one stop solution for all health issues of women 35 years plus

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The word menopause always relate to a period of female life when a physiological change leads to reproductive senescence. Menopause is not preventable but with due care the problems feared can be prevented and overall quality of life can be improved.

Definition

- Menopause :
Menopause, also known as the climacteric, is the time in women's lives when menstrual periods stop permanently, and they are no longer able to bear children. When production of the hormone oestrogen falls to a very low level the uterus stops responding, periods cease and this is called the menopause.

Menopause is the final menstrual period, confirmed after 12 straight months without a period or when both of a woman's ovaries are removed or permanently damaged or after some types of chemotherapy. When menopause occurs naturally-not as a result of surgery or other medical intervention, it's called "natural menopause." Menopause typically occurs between 49 and 52 years of age.

During the years of menopause, the decline of hormone oestrogen production can result in very distressing symptoms as well as erratic or heavy menstrual bleeding. It is irreversible natural biological process. Although it ends fertility, one can stay healthy, vital and sexual. During the period some women get the physical symptoms, such as hot flashes, and emotional symptoms of menopause that may disrupt sleep, lower energy or — for some women — trigger anxiety or feelings of sadness and loss. It can occur earlier in those who smoke tobacco.

- Peri-menopause is the transitional time immediately before natural menopause when the changes of menopause begin. Peri-menopause can last six years or more.
- Post-menopause is all the years beyond menopause.

One should not hesitate to seek treatment for symptoms that bothers. We offer many effective treatments from lifestyle adjustments to hormone therapy.

Menopause can result from :

- Natural decline of reproductive hormones
- Hysterectomy
- Chemotherapy and radiation therapy
- Primary ovarian insufficiency

Facing menopause

We help at our clinic to overcome the fears and suggest lifestyle modification to prepare for the smooth menopausal transition. Starting at perimenopause, schedule regular visits with our doctor for preventive health care and any medical concerns. Continue getting these appointments during and after menopause.

Preventive health care includes recommended screenings at menopause, such as a

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colonoscopy, mammography, lipid screening, and thyroid testing if suggested by history, breast and pelvic examinations.

It is better to seek medical advice in cases of bleeding from vagina after menopause.

Changes at Menopause

- **Physical:** At the physiological level, menopause happens because there is a decrease in production of the hormones estrogen and progesterone from the ovaries. Diagnosis of menopause does not require any investigations; but in case of need, it can be confirmed by measuring hormone levels in the blood or urine. Physical signs of menopause usually start during a woman's 40s but may start earlier. Many women have irregular menstrual periods that eventually stop when menopause is reached. For few women, the irregular menstrual periods of perimenopause are accompanied by hot flashes, trouble sleeping, and/or vaginal dryness.
- **Psychological:** Midlife can be associated with a variety of emotions, both positive and negative. After the age of 40, the rapid hormone fluctuations and the physical changes that are associated with menopause can lead to mood swings, anxiety, irritability, feelings of sadness, difficulties with memory and concentration and depression. Women can have an increased risk of developing significant depressive symptoms after they enter menopause.
- **Social:** Women who are experiencing menopause may be vulnerable to distress. Aging changes in the skin, hair and changes in appearance has effect on social behavior of a woman.
- **Family Changes:** Many middle-aged women experience major life events that can cause a period of psychological stress or depression, such as the death of a loved one, or a career setback, maturation of children, children leaving home, the "sandwich" of caring for both parents and children.
- **Changes in work place:** At this stage homemaker may start a new job or already working women may have carrier shift, transfer to new place or other midlife problems.

Symptoms

In the months or years leading up to menopause (perimenopause), woman may experience these signs and symptoms:

- Mood swings
- Lower sex drive
- Hot flashes
- Night sweats
- Painful sex
- Unprovoked palpitations and/or panic attacks
- Disturbed or poor quality sleep
- Tiredness/chronic exhaustion
- Reduced short-term memory/ poor concentration
- Depression
- Dry itchy skin
- Vaginal dryness and soreness
- Thinning hair and nails
- Headaches
- Leg cramps

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- Weight gain in abdominal region
Skipping periods during perimenopause is common and expected. Often, menstrual periods will occur every two to four months during perimenopause, especially one to two years before menopause. Despite irregular periods, pregnancy is possible. In cases of skipped periods it is better to consult a doctor to rule out pregnancy.

Diagnosis and Investigations

Menopausal transition can be diagnosed by signs and symptoms of menopause. Investigations are required for preventing or managing chronic conditions that may occur with aging.

Investigations - Essential

- Pathology Lab
 - » Complete blood picture
 - » Urine test routine
 - » Fasting glucose level
 - » Lipid profile
 - » Serum TSH
 - » Stool for occult blood
- PAP smear
- Transvaginal ultrasound
- Mammogram/ultrasound breast
- Eye check-up—intraocular pressures, refractive index, and retina.

Investigations for special needs

- FSH
- Estradiol
- Tests for increased risk of thrombosis
- Endometrial Biopsy
- BMD
- LFT
- ECG, 2D Echo, Stress test

Treatment

Menopause requires no medical treatment. Instead, treatments focus on relieving her signs and symptoms and preventing or managing chronic conditions that may occur with aging. Before deciding on any form of treatment, talk with our doctor about the options and the risks and benefits involved with each option. Review each option yearly, as her needs and treatment options may change. Understanding and knowledge about menopause are important components of the service we provide. Therapy options are adjusted according to each woman's individual needs.

- Hormone therapy
With media headlines giving conflicting advice, many women are concerned about what is best for them as an individual. Our doctor aims to give balanced advice according to the most up-to-date evidence based information.
- Non-hormone therapies
Many women cannot or prefer not to take hormone therapy. We at revive clinic advice about the safety and effectiveness of various non-hormonal options in treatment.

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