National Institute on Aging



"My mom never talked to me about menopause. She says her mother never talked about it either."

"I'm not sad I'm past menopause. I'm glad those monthly periods are over."

"Is it hot in here, or is it me?"

Menopause, or the "change of life," is different for each woman. For example, hot flashes and sleep problems may trouble your sister. Meanwhile, you could have a new sense of freedom and energy. Your best friend might hardly be aware of a change at all.

What is Menopause?

Menopause is a normal part of life, just like puberty. It is the time of your last period, but symptoms can begin several years before that. And these symptoms can last for months or years after. Some time around 40, you might notice that your period is different how long it lasts, how much you bleed, or how often it happens may not be the same. Or, without warning, you might find yourself feeling very warm during the day or in the middle of the night. Changing levels of estrogen and progesterone, which are two female hormones made in your ovaries, might lead to these symptoms.

This time of change, called *perimenopause* by many women and their doctors, often begins several years before your last menstrual period. It lasts for 1 year after your last period, the point in time known as *menopause*. A full year without a period is needed before you can say you have been "through menopause." *Postmenopause* follows menopause and lasts the rest of your life.

Menopause doesn't usually happen before you are 40, but it can happen any time from your 30s to your mid 50s or later. The average age is 51. Smoking can lead to early menopause. Some types of surgery can bring on menopause. For example, removing your uterus (hysterectomy) before menopause will make your periods stop, but your ovaries will still make hormones. That means you could still have symptoms of menopause like hot flashes when your ovaries start to make less estrogen. But, when both ovaries are also removed (oophorectomy), menopause symptoms can start right away, no matter what your age is, because your body has lost its main supply of estrogen.

What Are the Signs of Menopause?

Women may have different signs or symptoms at menopause. That's because estrogen is used by many parts of your body. So, changes in how much estrogen you have can cause assorted symptoms. But, that doesn't mean you will have all, or even most, of them. In fact, some of the signs that happen around the time of menopause may really be a result of growing older, not changes in estrogen.

Changes in your period. This might be what you notice first. Your period may no longer be regular. How much you bleed could change. It could be lighter than normal. Or, you could have a heavier flow. Periods may be shorter or last longer. These are all normal results of changes in your reproductive system as you grow older. But, just to make sure there isn't a problem, see your doctor if:

 your periods are coming very close together,

- you have heavy bleeding,
- you have spotting,
- your periods are lasting more than a week.

Hot flashes. These are very common around the time of menopause because they are related to changing estrogen levels. They may last a few years after menopause. A hot flash is a sudden feeling of heat in the upper part or all of your body. Your face and neck become flushed. Red blotches may appear on your chest, back, and arms. Heavy sweating and cold shivering can follow. Flashes can be as mild as a light blush or severe enough to wake you from a sound sleep (called *night* sweats). Most hot flashes last between 30 seconds and 10 minutes.

Problems with the vagina and bladder. Changing estrogen levels can cause your genital area to get drier and thinner. This could make sexual intercourse uncomfortable. You could have more vaginal or urinary infections. You might find it hard to hold urine long enough to get to the bathroom. Sometimes your urine might leak during exercise, sneezing, coughing, laughing, or running.

4

Sex. Around the time of menopause you may find that your feelings about sex have changed. You could be less interested. Or, you could feel freer and sexier after menopause. You can stop worrying about becoming pregnant after one full year without a period. But, remember you can't ever stop worrying about sexually-transmitted diseases (STDs), such as HIV/AIDS or gonorrhea. If you think you might be at risk for an STD, make

sure your partner uses a condom each time you have sex.

Sleep problems. You might start having trouble getting a good night's sleep. Maybe you can't fall asleep easily, or you wake too early. Night sweats might wake you up. You might have trouble falling back to sleep if you wake during the night.

Mood changes. You might find yourself more moody, irritable, or depressed around the time of menopause. It's not clear why this happens is there is a connection between changes in estrogen levels and emotions or not? It's possible that stress, family changes such as growing children or aging parents, or always feeling tired could be causing these mood changes. **Changes in your body.** You might think your body is changing. Your waist could get larger. You could lose muscle and gain fat. Your skin could get thinner. You might have memory problems, and your joints and muscles could feel stiff and achy. Are these a result of having less estrogen or just related to growing older? We don't know.

What About My Heart and Bones?

Two common health problems can start to happen at menopause, and you might not even notice.

Osteoporosis. Day in and day out your body is busy breaking down old bone and replacing it with new healthy bone. Estrogen helps control bone loss. So losing estrogen around the time of menopause causes women to begin to lose more bone than is replaced. In time, bones can become weak and break easily. This condition is called osteoporosis. Talk to your doctor to see if you should have a bone density test to find out if you are at risk for this problem. Your doctor can also suggest ways to prevent or treat osteoporosis.

Heart disease. After menopause, women are more likely to have heart

disease. Changes in estrogen levels may be part of the cause. But, so is getting older. As you age, you may develop other problems, like high blood pressure or weight gain, that put you at greater risk for heart disease. Be sure to have your blood pressure and levels of triglycerides, fasting blood glucose, and LDL, HDL, and total cholesterol checked regularly. Talk to your health care provider to find out what you should do to protect your heart.

How Can I Stay Healthy After Menopause?

Staying healthy after menopause may mean making some changes in the way you live.

- Don't smoke. If you do use any type of tobacco, stop it's never too late to benefit from quitting smoking.
- Eat a healthy diet—one low in fat, high in fiber, with plenty of fruits, vegetables, and whole-grain foods, as well as all the important vitamins and minerals.
- Make sure you get enough calcium and vitamin D in your diet or in vitamin/ mineral supplements.

- Learn what your healthy weight is, and try to stay there.
- Do weight-bearing exercise, such as walking, jogging, or dancing, at least 3 days each week for healthy bones. But try to be physically active in other ways for your general health.

Other things to remember:

- Take medicine to lower your blood pressure if your doctor prescribes it for you.
- Use a water-based vaginal lubricant (*not* petroleum jelly) or a vaginal estrogen cream or tablet to help with vaginal discomfort.
- Get regular pelvic and breast exams, Pap tests, and mammograms. You should also be checked for colon and rectal cancer and for skin cancer. Contact your doctor right away if you notice a lump in your breast or a mole that has changed.

Are you bothered by hot flashes? Menopause is not a disease that has to be treated. But you might need help with symptoms like hot flashes. Here are some ideas that have helped some women:

 Try to keep track of when hot flashes happen—a diary can help. You might be able to use this information to find out what triggers your flashes and then avoid it.

- When a hot flash starts, go somewhere cool.
- If night sweats wake you, try sleeping in a cool room or with a fan on.
- Dress in layers that you can take off if you get too warm.
- Use sheets and clothing that let your skin "breathe."
- Have a cold drink (water or juice) when a flash is starting.

You could also talk to your doctor about whether there are any medicines to manage hot flashes. Gabapentin, megestrol acetate, and certain antidepressants seem to be helpful to some women.

What About Those Lost Hormones?

These days you hear a lot about whether you should use hormones to help relieve some menopause symptoms. It's hard to know what to do.

During perimenopause, some doctors suggest birth control pills to help with very heavy, frequent, or unpredictable menstrual periods. These pills might also help with symptoms like hot flashes, as well as prevent pregnancy.

As you get closer to menopause, you might be bothered more by symptoms like hot flashes, night sweats, or vaginal dryness. Your doctor might then suggest taking estrogen (as well as progesterone, if you still have a uterus). This is known as menopausal hormone therapy (MHT). Some people still call it hormone replacement therapy or HRT. Taking these hormones will probably help with menopause symptoms and prevent the bone loss that can happen at menopause. However, there is a chance your symptoms will come back when you stop MHT. Also, menopausal hormone therapy has risks. That is why the U.S. Food and Drug Administration suggests that women who want to try MHT to manage their hot flashes or vaginal dryness use the lowest dose that works for the shortest time it's needed.

Right now, there is a lot that is unknown about taking hormones around menopause. Use the resource listing at the end of this *Age Page* if you would like to learn more about menopause or if you want the latest information on menopausal hormone therapy.

Do Phytoestrogens Help?

Phytoestrogens are estrogen-like substances found in some cereals, vegetables, legumes (beans), and herbs. They might work in the body like a weak form of estrogen. They might relieve some symptoms of menopause, but they could also carry risks like estrogen. We don't know. Be sure to tell your doctor if you decide to try eating a lot more foods that contain phytoestrogens or to try using an herbal supplement. Any food or over-the-counter product that you use for its druglike effects could change how other prescribed drugs work or cause an overdose.

How Do I Decide What to Do?

Talk to your health care provider for help deciding how to best manage menopause. You can see a gynecologist, geriatrician, general practitioner, or internist. Talk about your symptoms and whether they bother you. Make sure the doctor knows your medical history and your family medical history. This includes whether you are at risk for heart disease, osteoporosis, and breast cancer. Remember that your decision is never final. You can and should—review it with your doctor during a checkup. Your needs may change, and so might what we know about menopause.

A hundred years ago life expectancy was a lot shorter. Reaching menopause then often meant that a woman's life was nearing its end. Not so now. Women are living much longer. Today, a woman turning 50 can expect to live, on average, almost 32 more years. You have the time and freedom to make them active, busy years. Follow a healthy lifestyle and plan to make the most of those years ahead of you!

For More Information

Other resources with information on menopause include:

National Institutes of Health Menopausal Hormone Therapy Information www.nih.gov/PHTindex.htm

National Library of Medicine MedlinePlus In Health Topics, go to: "Menopause" www.medlineplus.gov

American College of Obstetricians and Gynecologists

409 12th Street, SW P.O. Box 96920 Washington, DC 20090 1-202-638-5577 www.acog.org

North American Menopause Society

P.O. Box 94527 Cleveland, OH 44101 1-440-442-7550 www.menopause.org

For more information on health and aging, including osteoporosis and the latest on menopausal hormone therapy, contact:

National Institute on Aging Information Center

P.O. Box 8057 Gaithersburg, MD 20898-8057 1-800-222-2225 (toll-free) 1-800-222-4225 (TTY/toll-free) E-mail: *niaic@jbs1.com* To order publications (in English or Spanish) or sign up for regular email alerts, visit: *www.niapublications.org*.

The National Institute on Aging website is *www.nia.nih.gov*.

Visit NIHSeniorHealth.gov (www.nihseniorhealth.gov), a seniorfriendly website from the National Institute on Aging and the National Library of Medicine. This simple-touse website features popular health topics for older adults. It has large type and a 'talking' function that reads text aloud.





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