

MENOPAUSE MANAGING YOUR BODY'S CHANGES







MENOPAUSE: Changes you may notice

Before you began your monthly periods, your body went through many changes. In the same way, your body goes through changes during perimenopause (the 3 to 5 years before menopause) and menopause (the time when monthly periods stop, usually around age 51).

This pamphlet explains how these changes happen, the common problems you might go through during menopause, and what you can do to help yourself during this time.

Menopause is the time of life when your ovaries, the organs that form your eggs, stop making the female hormones estrogen and progesterone. Hormones are chemicals that move through your blood and have an effect on other body organs.

The hormone estrogen is needed so that you can have a normal, monthly period. As you get older, estrogen levels drop and your periods often slow down. In time, when estrogen levels drop enough, your periods will stop altogether and you can no longer have a baby.

THIS DROP IN ESTROGEN LEVELS ALSO CAN AFFECT YOU IN OTHER WAYS. YOU MAY HAVE ONE OR MORE OF THE FOLLOWING:

- Quick body temperature changes (hot flashes)
- Problems with sex
- Dryness or itching in your vagina
- Weaker bones
- A higher risk for heart problems

HOT FLASHES

Hot flashes are a sudden feeling of heat in the body. This feeling comes when blood vessels open up and let a lot of blood flow through the skin. Your face may turn red and you will suddenly feel hot. The feeling lasts 1 to 5 minutes. Then you may feel very cold and even wet (clammy) as your sweat dries and you return to normal.

HERE ARE SOME THINGS TO TRY WITHOUT SEEING A DOCTOR:

- Avoid hot places and wear lighter clothes;
- Don't eat spicy foods; and
- Try to avoid stress in your life, which may bring on hot flashes.

If you still have strong hot flashes, you may want to visit your doctor and get help.

The best way to treat hot flashes is to replace the estrogen your body is losing. Your doctor can prescribe an estrogen pill or other medications such as SSRI drugs (mostly used as antidepressants), Neurontin, megestrol acetate, or medroxyprogesterone acetate.

NOTE: Some women who cannot take estrogen or don't want to take estrogen can try other medications. Some women who take estrogen may have a higher risk of getting breast cancer and cancer of the uterus.

As with all medications, these may have side effects. Please talk with your doctor to find the best treatment option for you.

PROBLEMS WITH SEX AND VAGINAL DRYNESS

Hormone changes can affect the vagina, because estrogen loss leads to thinner tissues in those areas.

When the tissues that line the vagina get thinner, you may feel pain during sex. You may feel dryness or itching in the vagina.

You can buy vaginal moisturizing medications that relieve dryness in the vagina. Drug stores sell these products.

If these products don't work, replacing your body's estrogen may help. In this case, estrogen can be delivered in the vagina in smaller doses so that very little will get into the body through the blood stream. This estrogen can be in the form of a cream, a tablet, or a ring worn in the vagina that releases estrogen.

Some women lose their urge to have sex at this time of life.

POSSIBLE THINGS TO TRY TO GET BACK YOUR DESIRE FOR SEX:

- Talk more with your partner;
- Find a more pleasing and relaxing time for sex;
- Enjoy other activities together; or
- Seek counseling.

MOODS

In some women, menopause is associated with mood changes or deep feelings of sadness (depression). If your mood changes seem to be mild, then discussing any sad or stressful life events with your doctor may help.

IF YOUR MOOD CHANGES ARE BECOMING A BIG PROBLEM, HOWEVER, THEN YOU COULD TRY OTHER METHODS:

- Learn ways to avoid stress;
- Get more exercise;
- Go for counseling; or
- Join a support group.

If you still have mood swings, you can also try to replace the estrogen your body is losing. Some women who cannot take estrogen or don't want to take estrogen can try other medications.

The SSRI drugs also are very good at treating medium and high levels of depression.

PROBLEMS WITH Your bladder

When tissues near the bladder (the sac that holds urine) become thin, you may have changes in urination. You may feel pain when you urinate or a need to urinate more often. You may also have a sudden loss of urine that you cannot control.

POSSIBLE WAYS TO FIGHT THESE PROBLEMS INCLUDE:

- Trying Kegel exercises (for example, holding the urine flow back a few times while you are going, or tightening these muscles often during each day) to make the muscles near your bladder and vagina stronger;
- Using a chart to note the times that you urinate or leak urine. Then you can plan to empty your bladder before you have a problem; and
- Using electronic devices to learn when your bladder and nearby muscles move, so you can help gain control. (Ask your doctor about these devices.)

Some medications act on the muscles near your bladder to keep it emptying more fully or not as often. Other medications tighten muscles at the bladder opening to prevent leaks. If medications don't help, surgery to support the bladder may be an answer.

HEART DISEASE

Women who have gone through menopause have a higher risk of heart attacks than younger women. A heart attack hits when blood vessels around the heart are so clogged with fat that oxygen cannot reach all parts of the heart. At about age 60, half of the deaths in women are caused by heart disease.

See your doctor if you are having chest pain, shortness of breath or pain radiating down your arm. Also see your doctor if you have a family history of heart attacks or strokes.

YOU CAN KEEP YOUR HEART HEALTHY BY:

- Eating a low-fat diet
- Keeping your cholesterol levels low
- Keeping your body weight normal
- Exercising daily
- Quitting smoking
- Drinking very little alcohol

Another way to prevent heart disease is to try medications that lower high cholesterol. These drugs, which your doctor prescribes, are called "statins." Lovostatin, simvastatin, and atorvastatin can lower your risk of dying from a heart attack.

If you have high blood pressure, there are other medications that may be helpful.

BONE WEAKNESS

One body change you may not notice is that your bones become weak. If this happens, you might get a "widow's hump," which makes you look bent over. When your bones become weak they are more likely to break. Breaks in your backbone or hip bone can happen when you fall. You may find it hard to recover from broken bones as you get older.

First, you may want to learn how strong your bones really are. A DEXA scan or bone density test can show if you have lost bone or are at risk of losing bone.

IF YOUR BONE LOSS IS SMALL, YOU CAN MAKE SOME SIMPLE CHANGES. IT HELPS TO:

- Stop smoking;
- Drink only a small number of alcoholic drinks each week;
- Exercise at least 20 minutes 3 times each week;
- Get at least 1,200 to1,500 mg of calcium every day (with a mix of dairy products and calcium pills); and
- If you are over 70, get at least 800 IU (international units) of vitamin D every day.
 If you are under 70, talk with your doctor before using vitamin D.

Estrogen can help to prevent bone loss and broken bones. SERMs (Selective Estrogen Receptor Modulators), such as raloxifene, can do some of the things that estrogen does, including keeping your bones strong. In some ways, SERMs are safer than natural estrogen because they may lower the risk of breast cancer. You can also try medications called bisphosphonates. Some of the drugs in this family are alendronate, risedronate, and ibandronate.

Another medication you can take is calcitonin, which also blocks the breakdown of bone. It is safe, and can be taken through your nose in spray form. (This medication is only approved for use by women who are 5 years past the time of menopause.)

Again, please make sure to discuss the possible side effects of these medications with your doctor before taking them.

TELL YOUR Doctor About:

- Health problems you seem to be having often
- Medications you take every day, including herbal medicines*
- Reactions to medications
- Chest pain
- Pain during sex
- Pain or trouble urinating
- A need to urinate more often or a sudden unexpected loss of urine
- Swings from hot to cold in your body
- Sudden changes in moods or deep sadness
- Signs of weaker bones, such as bone fractures without a previous injury or a "widow's hump," which makes you look bent over
- Women in your family who have weak bones
- Any form of cancer you have had
- Women in your family who have had breast cancer
- Women in your family who have had cancer of the uterus
- Liver problems
- Problems with blood clots
- Bleeding from your vagina that is not normal

If your doctor knows your whole story, then he/she can work with you to find the best treatment option for you.



*While many women use herbs to help with their symptoms, please be aware that herbs have not been well-studied and they are not approved by the U.S. Food and Drug Administration.

Disclaimer: The information in this pamphlet does not replace a visit with your doctor. Please speak with your doctor before taking any medications, and if you are taking supplements or herbs. To find a reproductive endocrinologist near you, an expert in hormone-related conditions, visit www.hormone.org or call 1-800-HORMONE.

PLEASE FILL THIS OUT AND Bring to your doctor when Discussing your health.

SYMPTOMS I AM HAVING:

- Hot flashes
- Pain or trouble during urinating
- Need to urinate more often or a sudden unexpected loss of urine
- Pain or trouble during sex
- Chest pain
- Swings from hot to cold in my body
- Sudden changes in moods or deep sadness

MY HEALTH HISTORY:

- I have/had a form of cancer
- Women in my family have/had breast cancer or cancer of the uterus
- Women in my family have/had weak bones
- I have/had liver problems
- I have/had problems with blood clots
- Members of my family have had heart attacks or strokes

POSSIBLE TREATMENTS:

HOT FLASHES

- Estrogen
- SSRI drugs (anti-depressants)
- Neurontin
- Megestrol acetate
- Medroxyprogesterone acetate

HEART DISEASE

- Diet and exercise
- Reduce/Quit drinking and smoking
- SERMs
- Statin drugs
- High blood pressure drugs

- Signs of weaker bones, such as bone fractures without a previous injury or a "widow's hump"
- Bleeding from my vagina that does not seem normal
- Other symptoms/health problems:

🗅 Other

List of medications, herbs and supplements (vitamins) I am taking:

PROBLEMS WITH SEX/VAGINAL DRYNESS

- Vaginal moisturizers
- Estrogen cream or ring
- Counseling

PROBLEMS WITH BLADDER/ URINATION

- Kegel exercises
- Electronic devices
- Drugs
- Surgery

BONE WEAKNESS

- Estrogen
- SERMs
- Bisphosphonates
- Calcitonin
- Calcium
- Vitamin D

MOOD PROBLEMS

- Counseling
 - Support group
 - SSRI drugs
 - Exercise

THE BODY CHANGES YOU HAVE DURING MENOPAUSE DON'T HAVE TO KEEP YOU FROM A NORMAL, ACTIVE LIFE. REMEMBER:

- Menopause changes are different for each woman.
- There are many ways to solve the changes you may have during menopause.
- You don't always have to take medications to relieve your body changes. There are other things to try first.
- If your problems aren't getting better, you may need to see your doctor.
- Replacing estrogen is one answer for some of the changes during menopause. Other medications can help, too.
- To learn more about the problems of taking hormones or other medications over a long time, talk with your doctor.

ASK YOUR DOCTOR ABOUT:

- The usual signs of menopause
- Your own body changes and how to get relief for them
- How long your changes may last
- Whether you need medical treatment for your changes
- Getting pregnant or preventing pregnancy in the time leading up to menopause
- Non-hormone treatments for body changes
- New medications that may give you relief
- The benefits of replacing hormones
- The risks of replacing hormones
- How to decide if you should replace hormones
- Taking non-pill forms of estrogen (such as creams and patches) and other female hormones
- The side effects you can expect from medications
- Medicines made from herbs (many of which have not been studied well)
- Testing your bone density (DEXA scan)

For more information about menopause and other women's health issues, visit The Hormone Foundation at www.hormone.org

The Hormone Foundation, the public education affiliate of The Endocrine Society, is dedicated to serving as a resource for the public by promoting the prevention, treatment and cure of hormone-related conditions through outreach and education.



THE HORMONE FOUNDATION

8401 Connecticut Avenue, Suite 900 Chevy Chase, MD 20815-5817 Phone: 1-800-HORMONE = Fax: (301) 941-0259 www.hormone.org

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