UNDERSTANDING MENOPAUSE

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Reproductive Years

30-35 Years

Perimenopause

3-7 Years : 1 Year

Postmenopause

Puberty

Last Menstrual Period

THE MENOPAUSE JOURNEY

The Stages of Menopause

The transition to menopause is often incremental, with hormonal changes and associated symptoms potentially starting before women begin to notice changes in their menstruation. Changes occurring in late reproductive years or perimenopause can be confusing since it may not be clear that they are related to menopause.

Although the term menopause is often used loosely to describe the entire time frame of midlife changes, there are different stages to **menopause**.

It is important to note that the beginning of the menopause transition and the time it takes to progress through the stages of menopause vary from person to person. There is no right or wrong way to progress through the stages of menopause.

45% of women don't know the difference between perimenopause and menopause prior to experiencing symptoms³



Research suggests that the age of natural onset for menopause and the duration of the menopause transition are influenced by a complex set of factors, including:

Health Characteristics

- Smoking status
- Alcohol consumption
- Physical activity
- Weight
- Oral contraceptive use

Sociocultural Factors

- Educational level
- Employment
- Stress
- Trauma

Biological & Medical Influences

- Genetics
- Autoimmune disorders
- Cancer treatments
- Pelvic surgeries



Types of Menopause

Because menopause is characterized by the permanent ending of a woman's menstrual cycles, it is clinically considered permanent loss of ovarian function. Types of menopause are defined by the age at which menopause occurs. These include:

- ▶ Premature menopause (before age 40)
- ► Early menopause (ages 40-45)
- ▶ Menopause at the typical age (age >45)



Pathways to Menopause

Not all paths to menopause are the same, and the cause of menopause may affect symptoms and treatment. Many women experience a "typical" menopause, developing symptoms and the end of menstruation in their 40s and 50s. However, there are a number of reasons a woman may experience menopause earlier (i.e., premature or early menopause). Examples include:

- ▶ Chemotherapy
- ▶ Radiation
- Damage or surgical removal of ovaries (e.g., oophorectomy)
- ► Genetic factors
- Autoimmune disorders (e.g., thyroid, adrenal, diabetes)

There are times when a woman may stop menstrual bleeding, for example, after a hysterectomy to remove

Some women may experience primary ovarian insufficiency (POI), which is the loss of ovarian function before age 40 that may not be permanent. While many women with POI experience irregular periods and fertility issues, this is different from premature menopause because women may continue to have their period and/or become pregnant.

her uterus. However, if her ovaries are still making hormones, then she is not yet menopausal.

Women who experience premature or early menopause may have increased risk for symptoms associated with menopause and related health problems over the long term. If you have been diagnosed with premature or early menopause, talk to your health care provider about a personalized care plan for your situation. For more information, see the Menopause Care section of the SWHR Menopause Preparedness Toolkit.

A hysterectomy surgery removes the uterus, which will cause menstrual bleeding to stop, but does not lead to menopause. However, some procedures might involve removing the ovaries, which would affect their hormone production and menopause. Talk to your health care provider about the type of hysterectomy you plan to have (or have had) and how it will impact your gynecologic and reproductive health.

SYMPTOMS OF MENOPAUSE

Every woman will experience menopause differently. Some women transition to menopause with very few symptoms, while others may have a variety of symptoms that come and go, or symptoms that persist and are very bothersome.

Common symptoms associated with menopause:

- ► Vasomotor symptoms (VMS): hot flashes, night sweats
- ➤ Changes in mood and premenstrual syndrome (PMS), irritability, difficulty coping
- Depressive symptoms, increased anxiety
- Sleep disturbances and insomnia (often linked to hot flashes)



Hot flashes, weight gain, and sleep difficulty are rated by women as their most impactful menopause symptom.³

- Genital symptoms: vaginal dryness, burning, and irritation
- Sexual symptoms: reduced sexual desire/arousal, poor lubrication, painful sex
- Urinary symptoms: urgency, painful urination, recurrent urinary tract infections
- Brain fog, difficulty with concentration, learning, and memory
- Weight gain, typically around the hips and stomach
- ▶ Joint pain
- ► Heart palpitations

Genitourinary syndrome of menopause (GSM) describes the broad set of symptoms across genital, sexual, and urinary areas associated with menopause. Formerly known as vulvovaginal atrophy and atrophic vaginitis, GSM encompasses urologic signs and symptoms.

Women of different races and ethnicities may have very different experiences with menopause symptoms. The Study of Women's Health Across the Nation (SWAN) reported variations in how long VMS usually last.⁴

4.8 years Japanese

5.4 years Chinese

6.5 years White

8.9 years Hispanic

10.1 yearsAfrican American



Studies have further shown that different groups of individuals may be more likely to report certain symptoms. For example, African American women often report the highest incidence of hot flashes, whereas Hispanic women may be more likely to report vaginal dryness.⁵

Women of color are also more likely to begin perimenopause earlier, experience a longer menopause transition, and have more severe associated symptoms.⁶