Menopause management

Self-care

Get accurate information & support

It is helpful to understand what is happening to your body at any stage of life, but especially at times of change, such as menopause. Discussing menopause with others can also be helpful. Partners and other family members will find it easier to support you if they understand what happens during menopause. See websites below for more information.

Diet and Exercise

Regular exercise and a healthy diet help maintain or improve overall health and feelings of well-being, and exercise is known to reduce some of the symptoms of menopause. A diet that is low in fat, sugar, salt and processed foods and high in fruit and vegetables, calcium, and fibre can help to prevent osteoporosis and heart disease and to maintain a healthy weight.

Stress Management

Using stress management techniques such as relaxation, mindfulness techniques, and exercise can help to improve your mental health and wellbeing during the menopause transition. Doing things that you enjoy, not taking on too much, and making time for yourself are also important.

Managing hot Flushes

If you are experiencing hot flushes, it may help to anticipate and minimise situations that may trigger hot flushes. These may include reducing or stopping smoking, avoiding some foods (such as very spicy foods), and reducing caffeine or alcohol intake. Wearing clothing in layers so you can easily remove the top layers as needed is also helpful.

Getting professional help

Professional help for managing the symptoms of menopause can include:

- assessment
- information
- counselling
- medical treatments
- complementary or alternative therapies

What medical treatments are available?

- Menopause hormone therapy (MHT). The symptoms of menopause are caused by decreasing levels of the hormone oestrogen in your body. MHT involves replacement of oestrogen (usually along another hormone, progesterone and sometimes testosterone) and is the most effective treatment for symptoms related to the hormonal changes of menopause. MHT is also beneficial for bone health and may decrease cardiovascular disease.
- Non-hormonal menopause treatments are also available for women who for medical reasons or personal choice, wish to avoid MHT. These include some antidepressants as well as some other medications that are effective in reducing hot flushes.

The Canberra Menopause Centre

The Canberra Menopause Centre is a specialised service for people seeking information, support, and medical management of menopause. It is staffed by experienced female doctors who have a particular interest in this area.

For more details contact us during office hours on **02 6247 3077** or email **shfpact@shfpact.org.au**

Canberra Menopause Centre

Jean Hailes Womens Health

Australasian Menopause Society

* Health information produced by SHFPACT that describes gendered health needs and issues is not intended to exclude trans and gender diverse people. Please seek advice from your health professional regarding health risks that relate to the interaction of biological sex, and other therapeutic intervention including hormonal medication.

I'M ALL ABOUT

MENOPAUSE

SHFPACT

Sexual Health and Family Planning ACT
Level 1, 28 University Ave, Canberra City
Call 02 6247 3077

shfpact.org.au

Last updated June 2023

What is menopause?

Menopause is the stage of life when your menstrual periods stop. It occurs when your ovaries are no longer producing eggs.

When does menopause usually occur?

Natural menopause can occur at different ages but is usually between 45 and 55.

Premature menopause occurs when your periods stop before the age of 40. This may happen naturally or from medical treatments affecting your ovaries, such as surgery, radiotherapy, or chemotherapy, resulting in early menopause.

What happens during menopause?

Natural menopause has three phases:

Perimenopause

This is the time from the first onset of any symptoms until 12 months after your last menstrual period. Perimenopause can vary in length but usually lasts around 4 to 6 years. Symptoms can start up to 10 years before your final period. During perimenopause, periods commonly change. They may end suddenly but more often become irregular or heavier and longer before eventually stopping.

Menopause

This is the last menstrual period.

Post-menopause

This is from 12 months after your last menstrual period. Symptoms can continue for 2 to 5 years after your last period and for some people can continue into their 60s and beyond.

For some people, the menopause transition has little impact on their lives.

However, many do experience significant symptoms which are caused by the changes in hormone levels that occur during this time.

Some people may experience psychological, emotional, and physical symptoms severe enough to affect their health and well-being and to disrupt their lives.

Menopause can mean a new lease of life for you, free from concerns about periods, premenstrual syndrome, or the risk of pregnancy. However, some people find it difficult and may feel anxious about reaching this stage in their life or mourn the loss of their fertility and youth. For almost everyone, menopause is a time of significant change.

What are the symptoms of menopause?

Symptoms can vary from person to person. The majority of people will experience mild to moderate symptoms and around 20% of people will experience severe symptoms.

Symptoms of menopause include:

Hot flushes or sweats

Hot flushes may be associated with sweating, palpitations, a sudden ‘wave of heat’ especially around the neck and face, or a ‘crawling’ feeling under the skin. Sweating may be more noticeable at night, which can disturb sleep.

Emotional and psychological changes

These vary for each individual but may include symptoms of depression, anxiety, mood swings, tiredness, lower sex drive, and poor concentration or memory.

Emotional symptoms might also be made worse by life stresses that commonly occur around the same time as menopause. This can include caring for children; young adult children leaving home; caring for aging parents; parents’ death; employment changes; and changes in your health or relationships.

Vaginal changes

The lining of the vulva and vagina become thinner and less elastic, and there may be less vaginal lubrication. As a result, you may find that intercourse becomes less comfortable or less enjoyable.

Urinary problems

Reduced elasticity in your bladder and pelvic floor muscles may affect bladder tone. This means that you may pass urine more frequently or experience leakage when you cough or sneeze. Urgency (feeling the need to rush to the toilet when your bladder is full) can also occur.

Body changes

There can be body changes such as dryer and thinner skin, increased facial hair, joint pain, and loss of breast tissue.

What are the long-term effects of menopause?

Increased risk of cardiovascular disease

The risk of cardiovascular disease increases after menopause. This is caused by changes in metabolism due to lower levels of oestrogen. Cardiovascular disease is a leading cause of death. Taking care of your heart health with a healthy diet, regular exercise, maintaining a healthy weight, and regular visits to your GP becomes even more important after menopause.

Increased risk of osteoporosis

Osteoporosis is characterised by thinning bones, leading to a greater chance of a fracture occurring, particularly in the hip, spine, and wrist. Loss of oestrogen after menopause is the primary cause of osteoporosis. Factors that may increase your risk of osteoporosis include:

- Early menopause, a thin build, a history or eating disorders, excessive exercise.
- A family history of osteoporosis.
- Long-term use of some medications (for example, steroids,epilepsy medications, some antacids, and fluid tablets).
- Lifestyle factors such as smoking, high intake of alcohol or caffeine, a diet low in calcium, and lack of exercise.

What about sexuality after menopause?

We are sexual beings all our lives. Interest in and feelings about sex often change in midlife. Generally, if sex has been meaningful and enjoyable in your younger years, it will probably continue to be so as you get older. The quality of your relationship with your partner will also affect feelings about sex. Sexuality involves more than just intercourse and is enhanced when a relationship is supportive, loving, and involves good communication.

Physical changes such as vaginal dryness and thinning of the vaginal walls may lead to discomfort during sex. Vaginal oestrogen cream or pessaries, vaginal lubricants, vaginal moisturisers, and menopause hormone therapy can all help with this.