

# Menopause

## What to expect when your body is changing

### What is menopause?

*Menopause* is the time in a woman's life when her periods stop and she can't have children anymore. This happens because as a woman ages, her *ovaries* stop making enough of the female hormones *estrogen* and *progesterone*. You may have heard menopause called "the change of life" or even just "the change."

Some things you might have heard about menopause aren't true. For example, women don't lose interest in sex because of menopause. Many women feel better with no more periods to worry about. Many women also enjoy sex more without having to worry about pregnancy.

### When does menopause occur?

The average age for women to have their last period is about 50. But it's normal for menopause to occur any time from age 41 to 59. A woman often goes through menopause at about the same age as her mother did.

Women who have had both of their ovaries removed will go through menopause early. If the *uterus* (womb) is taken out but the ovaries are left, a woman won't have periods but she won't go through menopause until her ovaries stop making estrogen.

Some women have an early menopause without surgery—before age 40—for no obvious reason. If you stop having periods, your doctor can do a simple blood test to see if you're going through menopause.

Menopause is a gradual process that can take several years. You're not really through menopause (or "postmenopausal") until you haven't had a period for six to 12 months. During this time, keep using birth control if you don't want to become pregnant.

#### Call your doctor if you have:

- A change in your monthly cycle
- Heavy bleeding
- Bleeding that lasts longer than usual
- Bleeding more often than every three weeks
- Bleeding after sexual intercourse
- Any blood staining between periods

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## What are the common signs and symptoms of menopause?

Some women just stop having periods. Others go through several years of symptoms.

**A change in your menstrual cycle.** This is one of the first signs of menopause. You may skip periods or they may occur closer together. Your flow may be lighter or heavier than usual.

**Hot flashes.** Hot flashes are the most common symptom of menopause. Hot flashes can range from being a minor nuisance to a major disruption that affects your sleep and daily activities. Hot flashes usually occur for at least a year but not for more than five years.

When you have a hot flash, you'll feel warm from your chest to your head, often in wave-like sensations. Your skin may turn red and you may sweat a lot. Along with the hot flash you may feel sick to your stomach and dizzy. You may have a headache and feel like your heart is beating very fast and hard. Afterward, you may feel chilled.

A hot flash can last just a few seconds or go on for an hour. You may have as many as 10 in 24 hours. They're much more common at night. Hot flashes may start before you notice any change in your periods.

### Help for hot flashes

- Turn your thermostat down in the winter. Sleep in a cool room.
- Go for the layered look, so you can remove clothing when you get too warm.
- Wear cotton and other natural fabrics that “breathe” so you don't get overheated. Put cotton sheets on your bed, too.
- Drink cool water or other beverages when a hot flash starts.
- Avoid very hot fluids and foods.
- Avoid alcohol.

**Thinning of your vagina and vulva.** The skin of your vagina and the area around your vagina (*vulva*) becomes thinner with menopause. Your vagina also loses its ability to produce as much lubrication (wetness) during sexual arousal. These changes can lead to pain during sex.

If sex hurts, help is available. Your doctor may prescribe an estrogen cream (to put in and around your vagina) or suggest you try a water-based lubricant (such as K-Y Jelly). Don't use petroleum jelly (Vaseline) because it can damage condoms or diaphragms and may promote infections in the vagina.

**Urinary tract problems.** You're more likely to have bladder and urinary tract infections after menopause. Sometimes you may have

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symptoms without infection—having to go to the bathroom often, feeling an urgent need to urinate, feeling a burning sensation when urinating, not being able to urinate or having to go often during the night.

**Headaches, night sweats, trouble sleeping** and **tiredness** are other symptoms. Trouble sleeping and feeling tired may be caused by hot flashes and night sweats.

**Does menopause have emotional symptoms?**

Emotional symptoms have traditionally been connected with menopause. But sadness, nervousness and other symptoms have other causes too. Life changes also occur during the years of menopause, such as children leaving home or retirement. These changes may also cause sadness, anxiety and loss of sleep.

**Are other problems more common after menopause?**

Your risk goes up for osteoporosis and heart disease. And your risk for other problems, such as cervical cancer and breast cancer, doesn't go down after menopause. You still need to get your regular Pap smears and breast exams.

*Osteoporosis* means a loss of density in bones. Bones lose calcium and become more brittle, to the point of breaking easily. Osteoporosis causes many broken hips.

Osteoporosis is most common in women after menopause. You're more likely to develop osteoporosis if you're white or Asian, have a small bone frame, went through early menopause, have a family history of osteoporosis, smoke cigarettes, abuse alcohol, don't exercise or don't get enough calcium in your diet.

Heart disease also becomes more of a risk after menopause. You're more likely to have heart disease if you have a family history of it, or if you have a history of high cholesterol levels, high blood pressure or diabetes. Other risk factors include cigarette smoking, early menopause and lack of exercise.

**Reducing your risk for osteoporosis and heart disease**

- Consume 1,500 mg of calcium a day (an 8-oz glass of milk or 1.5 oz of cheese contain 300 mg and one antacid tablet, like Tums, contains 200 mg).
- Exercise regularly.
- Don't smoke cigarettes—they increase your risk for both osteoporosis and heart disease.
- Eat a diet low in fat and cholesterol.

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**What is hormone replacement therapy?**

*Hormone replacement therapy* can relieve the symptoms and problems of menopause. The therapy involves taking estrogen alone or estrogen combined with *progestin*, the synthetic form of progesterone.

Hormone replacement therapy can relieve symptoms such as hot flashes, vaginal dryness and some urinary problems. It can also slow down the development of osteoporosis and possibly heart disease. It seems to help calcium and exercise work to prevent osteoporosis. Depending on your needs, your doctor may recommend hormone replacement therapy for a few months, a few years or indefinitely.

**What are the risks of hormone replacement therapy?**

When estrogen is used alone, it can increase a woman's chance of getting *endometrial* cancer (cancer of the lining of the uterus). Of course, if you've had your uterus removed, you aren't at risk for endometrial cancer. If you haven't had your uterus removed, this increased chance of cancer can be prevented by taking progestin along with estrogen.

But taking progestin will cause many women to bleed for several days each month. It's not a real period, but some women find this bleeding unpleasant. Other side effects of progestin can include tender breasts, fluid retention, swelling, moodiness and cramps. Progestin may also reduce the protection estrogen can provide against heart disease.

Most doctors agree that you shouldn't have hormone replacement therapy if you've had endometrial cancer, breast cancer, blood clots, stroke, unexplained vaginal bleeding or liver disease. Some studies have shown the risk of breast cancer is increased by hormone replacement therapy, while other studies have shown no effect on risk.

**Should every woman have hormone replacement therapy?**

No. You and your doctor can discuss the benefits and risks of hormone replacement therapy, along with any symptoms you have, and your risks for developing osteoporosis and heart disease.

**Are other treatments available?**

Although no other treatment is as effective as hormone replacement therapy, other medicines may help some of the problems connected with menopause. Discuss these options with your doctor.

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This handout provides a general overview on this topic and may not apply to everyone. To find out if this handout applies to you and to get more information on this subject, talk to your family doctor.



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