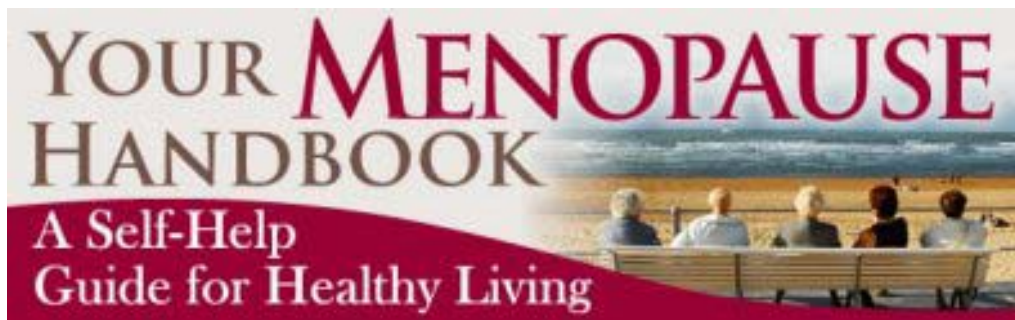


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Your Menopause Handbook

A Self-Help Guide for Healthy Living

By Lilah Borden

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About the Author

Lilah Borden

Lilah Borden has found that many women have more trouble than they should when they approach and experience menopause because of their lack of knowledge and preparation.

She believes that even more problems and distress are the result of the lack of support that many women get from colleagues and, especially, their partners and other close members of their families.

Because the effects and experiences of different women can vary greatly as they go through menopause, many incomplete or inaccurate “facts” are circulated.

Lilah hopes that this ebook will help to give every woman that reads it more confidence to make their experience better.

She also believes that putting as much information as she could gather in the book will help all readers to make better choices and help give them the confidence to get support and understanding from their families and friends.

Part-I: Introduction

1. Menopause – An Overview

Menopause is a normal biologic process. It is the time in a woman’s life when she stops having regular monthly periods. It signifies the end of her reproductive period.

Normally, women enter menopause around the same age as their mother did. This, typically, occurs between the ages of 45 and 55, although this can vary, sometimes by as much as ten years.

Hormones like estrogen and progesterone regulate menstruation and pregnancy in women. When your ovaries stop producing these hormones, menopause is triggered.

Menopause can set in earlier in women who have never been pregnant, live in high altitudes or smoke regularly. So, ladies, if you want kids but have not had any and are in your thirties ... get busy.

Usually, the first indication of approaching menopause is irregular periods. This time is called **perimenopause**. For some, this period could last for as much as ten years.

The irregularities may be in the length of period, level of bleeding and time between periods. If a woman stops having regular periods for more than twelve consecutive months and she is not suffering from any other ailment, she is in perimenopause.

Hormonal changes are the main cause for menopause. These changes can also increase the risk of:

- Osteoporosis

- increased incidence of fractures due to decreasing bone density
- higher cholesterol levels, and
- heart disease.

Common symptoms of menopause include nausea, hot flashes, mood swings, night sweats, fatigue, vaginal itching and dryness, depression, heavy bleeding, weight gain, urinary incontinence, lowered sex drive, insomnia, changes in breast shape, thinning of skin and headaches.

Gosh, did I miss any?

Natural and Artificial Menopause

Menopause usually fits into one of two categories; natural or artificial.

There is another type of menopause; **premature menopause**, but it is not very common. If a woman ceases to have regular menstrual periods before the age of forty, it is called “premature menopause”. This is most likely due to genetic causes, autoimmune diseases, smoking or exposure to harmful chemicals.

The majority of women have a natural menopause.

Artificial menopause occurs because of the surgical removal of ovaries.

Tests

There are a few tests that determine menopause in women.

Blood tests check levels of **follicle stimulating hormone** or **FSH**.

This hormone prompts growth of eggs during your reproductive

period. Their decreasing levels reduce estrogen levels and menopause sets in.

Bone testing checks bone density levels. Lower than usual levels indicate decreasing bone density, a common symptom of approaching menopause.

There are medications for helping with menopausal symptoms and menopause, there are also a few simple home remedies and certain lifestyle changes you can try to get more relief.

Soy protein is claimed by some people to be very helpful for menopausal symptoms. Drink soymilk, include soy flour or tofu in your regular diet, or eat raw or roasted soybeans.

Refrain from spicy foods, alcohol, and caffeine, as these aggravate menopause symptoms.

Consume a low-fat and low-cholesterol diet.

Regular aerobic exercise may provide some relief from hot flashes.

Strength training exercises can increase the strength of bones.

You might also try alternative therapies like deep breathing exercises, acupuncture, biofeedback, hypnosis, meditation and paced respiration with slow breathing.

Menopause is not an ailment or illness. But, if you want to alleviate some of the symptoms, you can get hormone replacement therapy.

This may bring extensive relief from osteoporosis and hot flashes. But, hormone replacement therapy may have serious side effects.

It may make you more vulnerable to strokes, breast cancer and Alzheimer's disease.

Some people claim that testosterone shots can provide great relief from the unpleasant side-effects of menopause. They say that women with high testosterone levels suffer little, or sometimes not at all, from menopause. This is not a widely held view and there does not seem to be any definitive supporting research.

Because menopause is not an ailment, you cannot prevent its occurrence. But, you can increase the likelihood that you will have a smooth transition period by reducing possible risk factors.

Increase calcium consumption in your diet. This is possible through daily consumption of reasonable quantities of milk, yogurt, cheese, calcium-fortified orange juice, salmon or calcium dietary supplements.

WARNING: Excessive intake of calcium may increase the chance of kidney stones. Therefore, always consult your health provider about what is a suitable level of calcium supplementation for you.

It is a good idea to have a thorough annual check-up once you are forty or beyond. This check-up should include pelvic examination, breast examination and mammogram.

Checking for colon and heart disease is also very worthwhile.

Part-II: Understanding Menopause

2. What is Menopause?

Normally, menopause occurs between the ages of 45 and 55. It is not an ailment or disease. It is a normal biologic process, as normal as breathing.

It does not begin within a narrow range of ages, like puberty or loss of one’s first tooth. It typically occurs over a span of eight to ten years.

Menopause marks the end of a woman’s fertility period. Her ovaries no longer produce eggs, and production of hormones like estrogen and progesterone also decrease.

There are many significant physical changes. The body attempts to continue to send hormones to stimulate ovulation for as long as possible, but it is a failing process.

Ovaries may respond erratically, causing erratic menstrual periods. Eventually, the ovaries are unable to ovulate. This restricts, and finally stops, monthly periods.

The ovaries still continue to ovulate for some time and produce low levels of estrogen and, sometimes, androgens. **Androgens** are substances, such as testosterone or androsterone, which promote male characteristics. These are often converted into estrogen in a woman’s fatty tissues.

The uterus lining also thins down due to low estrogen levels.

Sadly, menopause does not cause sudden stoppage of menstrual periods. There could be irregular occurrences spread over several years.

These may include

lengthy or very short periods

excessive or very little bleeding

bleeding with clots and

variation of the time between menstrual periods.

Useful Menopause Terms

Premenopause refers to most reproductive years in your biological cycle

Perimenopause includes the years prior to the onset of menopause, when one experiences different symptoms, especially irregular menstruation and hot flashes

Menopause is the point of permanent cessation of menstruation

Post-menopause are the years following menopause.

Causes of Menopause

There is no single cause or specific happening, which you can attribute to the onset of menopause.

Menopause may be categorized as surgical, induced or premature.

Surgical menopause is due to surgical removal of ovaries.

Induced menopause is when ovaries are damaged due to x-rays, drugs, or other factors.

Premature menopause is considered to be any onset before the age of 40. It can be either natural or induced.

Menopause is a natural biologic process that occurs over a span of time and involves various related processes.

Normally, women in their 40's experience menopausal symptoms, and attain menopause by their mid-fifties.

Although menopause is normally a natural process, it can sometimes be related to an external cause, such as medical situations like hysterectomy, damage to ovaries, cancer, etc.

Every woman is born with around two million eggs in follicles (sacs) within her ovaries. A woman may still have around 300,000 by the time of puberty. Only 400 to 500 eggs mature fully for release during her full menstrual cycle. The rest of these eggs degenerate.

A woman could be left with less than ten thousand eggs when she approaches menopause.

In the reproductive years, her brain releases specific chemicals that induce the release of an egg each month. The follicle produces higher levels of sex hormones, estrogen and progesterone, to

thicken the uterus lining. This lining will provide necessary support to the egg, if fertilized.

If there is no fertilization, the uterus lining breaks, the estrogen and progesterone levels drop and menstruation occurs.

However, a woman’s ovaries do not stop producing estrogen completely.

Progesterone levels also register varying levels.

These changing hormone levels may affect other glands of her endocrine system.

So, she may experience changes in her breast tissue, bone density, gastrointestinal tract, vagina, skin and urinary tract.

Some of these changes may disrupt her normal body functioning.

She may:

- suffer pain in her breasts
- experience vaginal dryness and itching
- develop urinary incontinence and
- have more pronounced signs of aging skin.

4. Who Is Affected by Menopause?

Menopause affects women across all cultures, races, religions and creeds.

Menopause normally affects women in their forties and fifties, with 95% experiencing it within the age range of 44 to 56.

Genetic factors have great sway over when she enters her perimenopause. Smokers, and women living in high altitudes, may have a comparatively early menopause.

Women do not all experience the same symptoms of menopause. It depends on their lifestyles, diets and other social and cultural factors.

Mayan women often suffer no symptoms, while Thai women are believed to suffer some of the most excessive headaches due to menopause.

Greek women experience high rate of hot flashes, while Japanese women experience some of the lowest rates of hot flashes.

North American women report most symptoms, while Scottish women report few symptoms.

A friend really appreciates her menopause. She suffers no ill effects, but her menstrual flow is far lighter, and her period has been reduced to just three days.

She has always been very healthy, and has regularly taken some vitamins and supplements.

She also has always had a high testosterone level.

Are these factors significant? If you view them in the light of the fact that North American women seem to suffer the most, and she is one, that might be seen to makes her exceptional.

5. Signs and Symptoms of Menopause

Menopause does not occur one fine day, while walking in the park, like a mugger’s attack. No one calls 911.

It is a process that usually is spread over a few years.

Menopause is the cessation of periods and is due to hormonal changes.

These hormonal changes cause various symptoms. Different women experience different symptoms and no single woman experiences all symptoms (one prays not, anyway).

Signs and Symptoms of Menopause

Hot Flashes and Night Sweats

Hot flashes are the most common menopause symptom. You suddenly feel very hot around your face, neck and other parts of your upper body.

You may develop red blemishes on her arms, back, and chest.

These flashes may be experienced almost anytime and anywhere.

Hot flashes could wake you from your sleep.

This is often followed by excessive sweating and, sometimes, then by a feeling of intense cold and shivering.

Insomnia

Night sweats may keep you awake. There could be many incidents of night sweats in any single night. This disturbs your sleep and reduces the chance that you will get any more sleep that night.

Fatigue

Excessive night sweats disturb the sleep, with resultant fatigue.

Irritability

Irritability occurs when you become tense due to frequent hot flashes in your day, and sweating at night. Lack of sufficient rest can make you irritable.

Mood Changes

Changes in estrogen levels can have an effect on your moods. You may experience severe mood swings and often feel depressed.

Mood swings can be aggravated by fatigue.

Vaginal dryness

Your vaginal lining becomes thinner and loses its flexibility. This can cause vaginal dryness and intercourse may become painful.

Incontinence

With age and menopausal symptoms, the organs surrounding the vagina begin shrinking and thinning. Different parts of the urinary tract and urethra lose their elasticity and incontinence can result.

This may increase the chance of urinary tract infections, which lead to frequent and/or sudden urination.

Osteoporosis

Menopause decreases bone density, so you may face a greater risk of fractures. Osteoporosis would make your bones brittle and more prone to bone ailments.

Poor estrogen levels weaken the bones.

Hair changes

With the onset of menopause, your testosterone (male hormone) levels start increasing while estrogen levels decrease. This imbalance causes an increase in facial hair and thinning of normal hair, as is common among men.

Drying of your skin

Poor hormone levels may result in shrinking of your skin. You may develop age spots. Your skin may become dryer and look malnourished.

Cigarette smoking may increase these effects.

Aches

Body aches, pain in the joints and headaches are common menopause symptoms. Sometimes, you may suffer serious headaches, leading to migraines.

Weight Increase

Increase in weight, especially in the pelvic region, is a common menopausal symptom.

Irregular Periods

The ovaries do keep producing estrogen, although progesterone levels are in decline. Menstrual periods do not follow what had been your normal routine and could extend for many days or for a shorter time. Bleeding could be heavy with excessive clotting, or just some spotting.

Anxiety

Menopause can cause palpitations (irregular and rapid, or pulsating) heartbeats. You may become more restless and anxious with every small incident.

Sore breasts

You may experience tenderness in your breasts, making them sore and painful. Hormonal changes are a major cause for such soreness.

Fluid retention

Hormonal changes can affect your gastro-intestinal tract. Excessive fluid retention in your body could cause bloating.

Memory Loss

Progesterone affects the functioning of nerve cells and may cause some loss of memory.

Decreased Sexual Appetite

Hormonal changes may cause changes in libido. Sexual arousal may be low due to vaginal dryness and other discomfort.

Menopause, of course, will not protect one from STD's unless it completely turns one off from sex.

6. What Happens During Menopause?

Menopause is a transitional period that usually culminates in complete cessation of menstrual periods. Monthly periods occur due to regular ovulation of ovaries. However, with age, your ovaries do not function in the same way. Ovulation is less frequent and there are fewer eggs in ovaries. Lower ovulation leads to less hormones. Normally, different hormonal changes occur every month and these changes transform into your menstrual periods. During your menopause period, your body registers fewer rises in estrogen and progesterone levels.

You have long periods with lower hormone levels.

Sometimes, there is a sudden jump in hormone levels and you may have menstrual periods, though not in accord with your regular cycle. This is because your ovaries do not suddenly stop producing estrogen. Sometimes, estrogen and progesterone levels increase and result in menstrual periods. Such irregular periods are common during menopause.

However, over a few years, your ovaries come to have very much lower levels of estrogen and progesterone.

These low levels can no longer induce menstrual periods and your periods come to an end. This is the culmination of menopause. If you do not have menstrual periods for a minimum period of twelve months, doctors confirm you have entered menopause.

What Actually Happens During Menopause?

Estrogen and **progesterone** are the two most important hormones responsible for your menstrual periods.

Estrogen stimulates growth of the uterus lining to house your egg, if fertilized.

Progesterone is responsible for thickening the uterus lining and produces glycogen, which provides food for the embryo.

Every month, your ovaries release an egg for fertilization.

If fertilized, it is implanted within the thickened uterus lining and proceeds through pregnancy.

If the egg is not fertilized, progesterone production stops and that results in the uterus lining being shed in the form of menstrual periods. That is your menstrual cycle.

This cycle does not stop abruptly. Reduced hormonal production by the ovaries may cause some unpredictable changes in menstrual cycles.

Some cycles could have heavy menstrual discharge but sometimes menstrual periods are completely skipped.

These changes occur over a period of five to eight years, called perimenopause, and finally end in menopause.

7. What are the Risk Factors for Menopause?

Menopause is a normal biological process. Yet, there are certain factors that could affect the onset of menopause.

Genetic

If you have a family history of premature menopause, you stand a greater risk of having it too. Premature menopause is where you enter menopause before the age of forty.

Medical Treatments

If you are treated for any ailment where you undergo radiation and chemotherapy treatments, this may cause you to enter menopause sooner.

Surgery

If you undergo surgical removal of the ovaries as in total hysterectomy and bilateral oophorectomy, you will enter menopause early. A hysterectomy removes only your uterus and not your ovaries. Such an operation may not cause menopause, as your ovaries continue to produce estrogen and progesterone hormones.

Smoking

Nicotine levels in your body may help to induce early menopause, as they are believed to restrict free production of hormones. This could disrupt your regular menstrual cycle and you may enter perimenopause and menopause earlier.

Medications

Specific medications that reduce estrogen levels in your body could cause early onset of menopause.

Autoimmune diseases

Certain autoimmune diseases disrupt normal physiological functioning of your body and some may be involved in the early onset of menopause.

Premature Ovarian Failure

This is a very rare condition where your ovaries could stop functioning well before the age of forty due to specific genetic or other medical conditions. This may causes menopause to start earlier.

8. Myths and Misconceptions about Menopause

Menopause marks the start of a new phase in your life. Many women treat menopause as something unwanted or uncalled for but menopause is a normal biological process and you cannot run away from it.

There are numerous myths and misconceptions about menopause.

Myth: Menopause causes weight gain

Your metabolic rate normally decreases with age. There could be a little gain in weight during menopause but it not be due to menopause alone.

Eating the right type of foods and exercising for thirty to forty-five minutes every day can help you maintain your weight.

Myth: Menopause marks the end of sexual life

Menopause causes vaginal dryness and lowered libido. However, reduction of hormone levels does not mark the end of your sexual life. You can maintain normal sexual relations with your partner.

Myth: Menopause denotes you have become old

Menopause is a normal process and every woman has to experience it. Some women experience severe symptoms while some encounter few or no symptoms.

Menopause usually starts in your forties and fifties when you have completed almost half your lifespan. Although you are aging by then, you can learn to age gracefully.

It is the second innings of your life. Learn to relax and enjoy it.

Myth: Menopause causes memory problems.

Menopause may not be the sole or even the main cause for your memory problems. Various nervous diseases or stress about life issues such as retirement, familial problems etc., cause problems in retaining facts.

Menopause causes hormonal changes. Some of these changes may contribute in part to problems in concentration.

Myth: Menopause is a disease

Menopause is not an illness or ailment. It happens to every woman. Develop and maintain a positive attitude towards a different chapter in your life.

Learn to accept life as it comes and you will be able to sail through your menopause smoothly.

Myth: Menopause is natural, so it does not have major consequences

Menopause is a natural process. But, it could be a factor in the occurrence of various ailments like osteoporosis, colon cancer, vaginal and urethral atrophy, diabetes, heart disease, Alzheimer’s disease, and impaired vision.

Low estrogen levels may make you more vulnerable to these diseases.

However, there is no need to panic. Proper management of symptoms and prompt medical care can help you overcome almost all possible ailments.

Myth: Hormone replacement therapy is bad

Hormone replacement therapy may have serious side-effects with some individuals. But, it is not always a bad option.

Hormone replacement therapy is a conservative option.

Doctors advise such therapy treatment to women in dire need of it. It can bring huge relief from most menopausal symptoms like hot flashes, night sweats and vaginal dryness.

Myth: Menopause causes depression

Depression is risk factor among women with a family history of depression and a common ailment among women in their late forties and fifties.

Menopause can aggravate depression symptoms in women with a prior history of depression but this does not mean that menopause causes depression.

Depression can be an after-effect of various other ailments like heart disease.

Myth: Menopause could mean the end of an active life.

This is an unfortunate myth.

Menopause is a part of your life.

You can continue with your active life schedule. Regular exercise, good and nutritious food, adequate rest and remaining connected with different issues can help you continue with your active life without much disturbance.

Regular visits to your doctor and regular checkups can help you lead a healthy life for many years after menopause.

Part-III: Diagnosis and Clinical Aspects

9. When to Seek Medical Advice

Menopause normally starts between the ages of 45 and 55. It could start with irregular periods.

Visiting your doctor and seeking medical advice can tell you if you are pregnant or in the perimenopause stage.

Women in their perimenopause and menopause stages should undergo a thorough annual medical check-up that includes mammogram, pelvic examination and breast examination.

The perimenopause stage could bring different changes in your body. Seeking medical advice helps you to understand those body changes and what, if any, treatments may be necessary to reduce the possibility or effects of major symptoms.

Menopause and perimenopause are transitional stages and your body needs sufficient time to adjust to these changes.

Your doctor can give you advice about what to expect and how to deal with these changes.

Menopause signifies low estrogen levels in your body. You may be at a greater risk for different ailments like heart disease and cancer.

Professional advices from your doctor can help you make suitable dietary and lifestyle changes as a preventive measure.

Menopause could cause irregular periods due to low estrogen levels. Yet, you can still become pregnant. Doctors sometimes advise birth control pills with low estrogen levels to prevent pregnancy and get some relief from hot flashes, a common symptom of menopause.

Seeking medical advice at all stages of perimenopause and menopause is essential to maintain good health.

10. How Is the Menopause Diagnosed?

There are many tests and examinations that help in determining menopause.

Most of these tests involve drawing a little blood from your veins and arteries. You could feel slight pain and discomfort as a result.

In some cases, it could cause excessive bleeding. Infection is possible. Sometimes, though rarely, you could experience dizziness or could lose consciousness for some time.

But, doctors take all necessary precautions before undertaking any of these tests.

Diagnosis of menopause includes reviewing your medical history, present symptoms and ruling out other possible causes for your symptoms.

Irregular periods are a common menopausal symptom, although it does not necessarily indicate menopause.

Other Tests to Diagnose Menopause

Urine test: Doctors advise a specific urine test to detect hormone levels because high hormone levels in urine could indicate menopause.

Blood Test: A blood test to determine the amount of follicle-stimulating hormone (FSH) can indicate if symptoms pertain to menopause. This test is specifically for women who have had a hysterectomy operation without removal of ovaries. The result is that the ovaries of these women continue to produce estrogen and progesterone.

Pituitary glands produce FSH and stimulate ovaries to produce estrogen. However, in women over the age of forty, estrogen production declines although their FSH level may increase.

Excess FSH then enters your blood.

Sometimes, a single FSH test is not enough for diagnosis of menopause.

Further, some doctors may advise that you should not be taking birth control pills when you are tested as hormones present in those pills could affect test results.

Your FSH levels can help to identify symptoms of menopause if you are in this group.

Bone Tests: Menopause may lower the density of your bones, sometimes leading to osteoporosis.

Bone tests detect and calculate bone density levels and compare it with normal levels.

This involves taking an x-ray of hipbones and those in the lower parts of your spine. Before this, simple screening of bones through ultrasound machines can detect bone density. However, this simple screening is insufficient to detect actual levels necessary to determine menopause.

If levels are between 1 and 2.5 standard deviations below the average value, it may indicate osteoporosis.

Heart Tests: Menopause could place you at risk of heart ailments. Doctors prescribe normal blood tests to determine cholesterol levels. High cholesterol may indicate the possible existence of heart disease.

Pregnancy Test: Doctors conduct pregnancy tests to determine if you are pregnant or in menopause if you miss your regular menstrual periods.

Thyroid Test: Thyroid problems in women often show the same symptoms as those of menopause. Therefore, doctors recommend a thyroid-stimulating hormone test to check if irregular periods are due to thyroid problems or due to menopause.

Urine test: There is a specific urine test that determines hormonal levels in urine. High hormone levels may indicate menopause.

Transvaginal ultrasound test: This test detects abnormalities in uterus or any extra growth around uterus that could be responsible for excessive and abnormal bleeding during or in-between menstrual periods.

Menopause may induce such irregular periods with excessive bleeding. This test can help doctors determine if the bleeding is due to menopause or other problems associated with the uterus.

Endometrial biopsy: This test detects the functioning of the uterine lining. Normally, progesterone and estrogen form a thick lining around uterus to house a fertilized egg. If there is no fertilization, this lining comes off as menstrual bleeding. This biopsy can therefore detect if such uterine lining takes place and thereby can give some indication if you are into menopause or not.

Estradiol test: Estradiol is an important form of estrogen secreted in the ovaries, adrenal cortex and placenta. This test detects estradiol levels in blood. This hormone promotes growth and development of uterus, breasts, vagina and fallopian tubes. It also promotes distribution of body fat.

You should not take birth control pills or be on estrogen therapy while taking this test. This test can check functioning of ovaries, adrenal glands and placenta. It also detects any abnormal growth around ovaries or placenta.

This helps doctors analyze if you are going through menopause or having other problems related to your ovaries like ovarian cancer, a tumor or any other problem.

LH (Luteinizing Hormone) Blood Test: This test detects levels of the **luteinizing hormone** or **LH**. Your anterior pituitary gland releases a special protein hormone, LH. Increase in LH levels during mid-cycles of menstruation causes ovulation.

Doctors conduct this test on a specific day of your menstrual cycle. Doctors detect such levels through blood test. If levels of LH hormones in your blood test are very high, it may indicate menopause.

But, these levels also could be high if you have ovarian cancer, a tumor or possibly the formation of cysts around the uterus.

Doctors analyze these test results with regard to your other menopause-linked symptoms to detect if you are into menopause or not.

You should refrain from using any birth control pills or hormone replacement therapy while undergoing this test.

Pelvic Examination: Doctors conduct a thorough pelvic examination to detect any abnormalities in your pelvic region and around the uterus. Excess growth, pain or discomfort could prompt doctors to go into deeper examinations to detect the actual cause of your problem.

Normally, women into menopause have fat deposits in the pelvic region that may result in some weight gain. This test can detect changes in vaginal lining that take place during menopause.

Breast examination or mammography: Breast examination can detect abnormalities or pain around or in the breasts. Menopause induces a tender feeling in the breasts while making them softer. Mammography can detect any such abnormalities for doctors to diagnose the root cause of your problem.

12. Self-Testing for Menopause

You can use a self-testing method to detect if you are in menopause or not.

Some of the home tests are said to be similar to those used by doctors. However, doctors have greater knowledge and are better able to analyze test results in conjunction with your other symptoms to come to the most reliable conclusions.

Even if your self-testing gives a positive response, you cannot be sure that you are into menopause and therefore stop using any contraceptives.

Getting your doctor’s confirmation and opinion is essential.

Similarly, do not assume that a negative result indicates you are not yet into menopause. There could be other reasons that cause such a result.

A simple home-testing kit measures follicle stimulating hormone (FSH) levels in your urine. Your pituitary gland produces FSH and these levels every month increase to stimulate your ovaries to ovulate. During menopause, your ovaries stop ovulating and the FSH levels increase in your urine.

This self-testing involves checking your first morning urine. After putting a few drops of urine on the test device, dip it into a cup of urine. Chemicals in the device react and produce a specific color, which indicates current FSH levels.

Although this test may deliver good results most of the time, your results also depend on other factors like:

- the amount of water you had before the test,

- if it is the first morning urine,
- if you are on any contraceptives, estrogen supplements
- if you are on any estrogen supplements or
- if you have undergone hormone replacement therapy.

13. Medical History for Menopause Diagnosis

Your medical history assumes great importance in your menopause diagnosis. Doctors need to know if you suffer from any chronic illnesses like arthritis, hypertension, diabetes, thyroid disease, or urinary tract infections. You should give all details of therapies, medications, and allergies.

Menopause diagnosis requires information about the start of your menstruation cycles, length of cycles and bleeding during cycles. Information about pregnancies, abortions, fibroids, pelvic surgeries, contraceptives in use and sexually transmitted diseases is also essential.

Doctors would also inquire about your lifestyle and dietary habits. Family related details like your mother’s and sister’s age at menopause, fertility problems and any genetic disorders inherent in your family also play a part in your menopause diagnosis.

14. Is It Possible to Delay the Menopause?

Menopause is a natural biological process and you cannot delay it.

However, a very recent news item offers an alternative prospect.

Robert Winston, professor of fertility studies at Imperial College, declared that researchers found a new protein that may be able to delay the onset of menopause.

Professor Winston stressed that risks with use of this pill or injection might be fewer than with some other treatments.

Some researchers suggest that, as they believe that many women today are much healthier than fifteen years back, menopause might be delayed without much risk.

If further research and controlled testing bears out this theory, you might be able to prolong your fertile years. This could enable women to have healthy pregnancies and smooth deliveries even in their forties.

But, the risk factors remain.

Women who smoke may have menopause two to three years earlier. Drug addiction may cause premature menopause. Alcohol abuse and high caffeine consumption may cause menopause to set in earlier by two to three years.

Maintaining good health through adequate nutrition and a sensible lifestyle and dietary changes may help to protect you from major diseases like cancer.

15. Life after Menopause

When there has been complete cessation of menstrual periods for over twelve months, you enter the post-menopause period.

Women undergoing surgical removal of ovaries, chemotherapy treatments, or hormone replacement therapy enter menopause much early in life. Although they stop having periods during such treatments, some start their menstrual periods once again after completion of therapy. Hence, they may experience menopausal symptoms during the intervening period and also later in life.

The post-menopause period is not the same for all women. Menopausal symptoms like hot flashes and night sweats could also occur in your sixties and seventies.

Life after Menopause

Post menopause is a new life and often, there is more publicity about the supposed negatives of this period than its positives.

This period has these positives for most women:

- ✓ allows you to be free of worries like unexpected pregnancies,
- ✓ absence of hot flashes and night sweats,
- ✓ better sexual life,
- ✓ gives you a sense of a special type of freedom.

This second beginning offers many women the chance to perhaps take up a different vocation that may relate to your hobby or other interests.

Often, you can spend more time on yourself, as your children are grown-up and independent.

You can revive your personal passions and undertake new journeys to rediscover yourself.

Menopause is a transition period.

The fall in estrogen levels during this period is the main cause for most menopausal symptoms. After that, it takes some time for your body to accept and adjust to the low hormonal levels.

Once you are able to attain this equilibrium, you can be more at peace and ease with your body. You may no longer suffer from depression or other psychological ailments.

Sex life in the post menopause period is more carefree and interesting. Although vaginal dryness could pose some problems, medications like creams help you over these problems. You may no longer have to take contraceptives or use other birth control techniques.

The risks of osteoporosis and heart disease increase during post menopause due to low estrogen levels. However, seeking medical help early and adhering to a few restrictions may help you to overcome these.

Part-IV: Menopause and Other Conditions

16. Complications of Menopause and Other Conditions

Menopause could signal the start of various chronic medical conditions. You are better able to combat them if you are well-informed.

You might start following preventive measures from an early age to reduce the chance that you could experience severe menopausal symptoms later in life.

Osteoporosis

Osteoporosis causes serious loss of bone density, making your bones weak and brittle. Loss of bone density may increase faster during and after menopause.

You have a higher risk of fractures, especially of the spine, wrist, and hips.

In consultation with your doctor, include calcium-rich foods in your diet and increase your intake of vitamin D. Have more milk, cheese, yogurt and, maybe, calcium supplements.

Regular exercise, like jogging and walking, may help you to keep your bones strong and healthy during and long after menopause.

Cardiovascular disease

Low estrogen levels may increase your risk of cardiovascular diseases. You can lower your chances of developing heart ailments by adhering to a simple diet rich in whole grains, vegetables and fruits.

Abstain from diets rich in saturated fats, stop smoking, and keep alcohol consumption, if any, low.

Take steps to control your blood pressure and protect you from possible heart diseases.

Regular aerobic exercises are very useful.

Increase in body weight

Menopause may encourage women to develop greater fat deposits around their hips and abdomen.

Although you cannot avoid it totally, you can restrict weight gain considerably. You might want to start on a low-calorie diet and make exercises a part of your daily routine.

This helps to keep your metabolism rate at a healthy level and maintain a good and normal body weight.

Urinary incontinence

Estrogen is responsible for maintaining urinary tract functions. Estrogen levels fall drastically during menopause and consequently, your urinary system may suffer. Your bladder muscles and sphincter have less flexibility.

Your vagina and urethra lose some of their elasticity.

Some women experience frequent urinations, urinary incontinence and urine leakage when laughing, coughing or lifting weights.

Pelvic exercises may prove very helpful in combating these incontinence problems. If you have been practicing these exercises since your youth, you could largely escape suffering these problems during menopause.

17. Menopause and Your Emotions

Menopause bring along many emotional problems. These are due to hormonal changes which are taking place in your body.

Menopause does not cause a complete cessation of hormone production. Your ovaries continue to produce estrogen and progesterone. However, the amount produced is lower and the levels may vary.

These variations in the amount produced can cause you to experience serious emotional changes. Sometimes you feel sad, unhappy, and low while you are happy and contented at other times. Women often experience irritability, anxiety, concentration problems, tension, mood changes, poor motivation, sadness, aggressiveness, and overall fatigue during menopause.

Combating the emotional swings during menopause is essential to maintain your equilibrium.

You can get the help of trained psychological professionals.

But, remember that some simple things can help to de-stress your life, such as:

- ✓ You can talk out your emotions with your family members and friends.
- ✓ Talking about pleasant things in life can help change your mood and raise your emotions to better levels.
- ✓ Physical and mental relaxation is very important to overcome any emotional upsets during menopause.

- ✓ Regular exercise can help you feel satisfied and happy. Taking part in physical activities like swimming, jogging, and walking can make your body strong and fit. This makes you feel better and you probably will have a better emotional outlook in general.
- ✓ Yoga and meditation can bring extensive mental relaxation.
- ✓ Join support groups with members from the same background or who are experiencing similar emotional problems. Talking with each other about your emotional problems will help all members that constructively participate.
- ✓ If the group members are not supportive, then either they or you should seek a different group.

Other simple tactics to overcome emotional problems include;

- ✓ avoiding alcohol intake and sedatives.
- ✓ Eating a healthy diet helps you stay fit and mentally alert.
- ✓ Engage in varied social and group activities,
- ✓ go out with your friends, and
- ✓ engage your mind in healthy activities.
- ✓ This gives you less time to brood or go into emotional lows.
- ✓ Friends help you laugh which boosts your spirits and improves your mood easily.

18. Menopause and Depression

Depression is a common problem associated with menopause.

Emotional upheavals are common during menopause due to low estrogen levels.

Also, physical symptoms like lack of adequate sleep, hot flushes, and night sweats tend to make you irritable. The combination of physical and psychological symptoms can induce depression during menopause.

Depression during menopause can take many different forms:

- Lack of appetite causing you to be overindulgent at times and make you only nibble at other times.
- Changes in your sleep patterns. You sometimes lay awake the whole night and you oversleep at other times.
- Hard to retain interest in hobbies or other activities you really liked before.
- Low sex drive.
- Concentration and memory problems.
- Some people even develop suicidal tendencies.

Although there are various depression symptoms that may occur during menopause, few women experience all the symptoms. It seems to be related to the estrogen levels in your body.

Combating depression during menopause is important. You can get the help of trained professionals to overcome your depression. There is nothing to be gained by keeping the information to

yourself. Feel free to discuss all your problems with your medical practitioner and follow their directions. You could experience extensive relief.

Depression can cause problems in doing your normal routine.

Talk to your family members and friends to support you and help you overcome any days when you have especially deep depression.

Exercise can make you feel better, as physical exercise causes your brain to release special feel-good hormones that will help you to overcome your low feelings.

Maintain a regular exercise schedule. Spend time in doing yoga, meditation, deep breathing or other mental relaxation exercises.

Maintain a regular sleep pattern by going to bed and waking up at the same time each day. Get adequate rest.

Relax by reading a book, listening to soothing music or having a warm bath.

Eat a healthy and well-balanced diet.

Reduce or eliminate your alcohol consumption and smoking.

Go for friendly outings and spend time indulging yourself - keep yourself happy.

19. Menopause and Bladder Function

Menopause causes low estrogen levels in your body. Estrogen affects many important body functions. Low estrogen levels may adversely affect your bladder function and urinary system.

Menopause might increase your chances of contracting urinary tract infections which could make your bladder weaker.

Estrogen helps control your urinary system by keeping bladder muscles toned and strong. The sphincter at the bottom of the bladder also remains taut.

The bladder muscles and sphincter jointly control urine leakage. Low estrogen levels can cause these muscles and sphincter to function poorly and this results in some degree of incontinence with some women.

Although your incontinence problem may not be apparent, urine leakage could occur if you sneeze hard or laugh loudly.

Hormone replacement therapy might also aggravate the situation.

You can try some measures to try to overcome or manage the problem.

Simple surgery can help improve sphincter taught and control leakage.

Another option is to have collagen injections. This can tone up bladder muscles and sphincter.

Pelvic floor exercises can provide relief. If you do regular pelvic exercises from your youth, incontinence in menopause is likely to be less of a problem.

Dietary changes like a reduction of consumption of alcohol, citrus juices, caffeine, spicy foods, and artificial sweeteners can provide some relief if you suffer from bladder related problems during menopause.

Get your doctor’s advice as to whether changing some medications might provide some relief.

20. Menopause and Cancer

Cancer is a debilitating disease. It requires many prolonged treatments, therapies, and medications. The impact of these treatments and therapies is not the same for all women.

Cancer often requires radiation and chemotherapy treatment. These treatments can damage your ovaries and bring on early menopause. Sometimes they cause irregular periods, which later develop into menopause.

If you are diagnosed with cancer in your youth and seek chemotherapy treatment, you stand a greater chance of having a premature menopause. When this is a sudden change, you experience severe menopausal symptoms like hot flashes, poor sex drive, depression, and irritability.

Women in their menopause have a higher risk of developing cancer than women in pre-menopause stages due to poor resistance. In some cases, the age of reaching menopause may affect their chances of developing cancer.

A long reproductive period may give a woman higher than average estrogen levels and that may increase their greater risk of developing these cancers in their menopause to some degree.

Women undergoing hormone replacement therapy record higher instances of breast cancer.

Chances of ovarian cancer are higher with women with higher ovulation. So, women with a longer than average menstrual history have had many ovulations and may have a higher risk of ovarian cancer.

21. Menopause and Osteoporosis

Menopause may be a factor in the development of osteoporosis.

Osteoporosis is general weakening of bones where bones tend to lose more density than the amount they form.

Excessive bone mass loss is osteoporosis. This disease has no warning symptoms. You often only realize its presence only when you suffer a fracture. More than 20% of expected bone loss in your lifetime occurs during the first five to seven years of your menopause.

Menopause involves falling estrogen levels in your body. Estrogen plays an important role in building of the bones in your body.

Osteoblasts are small cells within your body. These cells build up your bones with the help of estrogen. However, low estrogen levels during menopause reduce the easy and quick buildup of bones. When the bones start wearing out faster than the rate of rebuilding, they become weak and osteoporosis sets in.

Osteoporosis is treatable to some extent and doctors advise relevant therapies and treatments to overcome or prevent osteoporosis.

Although you cannot increase estrogen levels in your body, you can take better care of your bones.

Eat calcium-rich foods like milk and yogurt, take calcium supplements, and increase vitamin D levels in your body.

Vitamin D is essential for calcium absorption in your body. Drinking vitamin-D fortified milk is a good option. You can take additional vitamin supplements in consultation with your doctor.

Regular exercises, like walking, keep your muscles stronger and better toned.

Although exercises cannot stop bone loss, a regular program can help to slow down the pace of osteoporosis.

Exercises increase overall fitness and may reduce the damage sustained by falls.

22. Menopause and Smoking

Smoking influences the onset of menopause greatly. Women who smoke cigarettes regularly have a greater risk of entering menopause around one to three years earlier than those that don't smoke according to some medical research and studies.

Smoking cigarettes causes inhalation of tobacco smoke. The nicotine that is present in cigarettes can affect the central nervous system, causing numerous changes in hormone secretions. These changes in hormonal levels may be a factor in the early menopause.

An early menopause may make you more susceptible to heart diseases and osteoporosis.

As these conditions reduce your resistance to common menopausal symptoms like hot flashes, night sweats, irregular sleep patterns and irregular periods they have greater effect. You may, therefore, experience a more intense menopause.

Women concentrating on their career tend to delay having their first child.

Smoking may also increase your chances of developing ovarian, uterine, or cervical cancers. In some cases, these cancers remain undetected for long and that may lead to ovarian failure.

Giving up smoking is claimed by some to sometimes help delay the onset of menopause which may help you to combat menopausal symptoms better when they occur.

Part-V: Treatment Options

23. Treatment Options for Menopause Symptoms

Menopause is a natural occurrence in women. It is not a disease that needs treatment. Menopause is often accompanied by symptoms that require suitable treatments

Common menopausal symptoms include hot flashes, heavy and irregular bleeding, mood changes, irregular sleep patterns and depression.

Treatment Options for Menopause Symptoms

Irregular and Heavy Periods

This bleeding is due to low progesterone levels in your body. Doctors may prescribe **birth control pills, non-steroidal anti-inflammatory drugs (NSAIDs)** or a **levonorgestrel (LNg)** IUD to combat heavy bleeding.

Surgical procedures, like removal of the uterus (hysterectomy) can offer a permanent solution.

Some claim that surgical application of heat to scar the uterus walls can prevent or reduce heavy bleeding.

Hot flashes

This is a very common menopausal symptom. Low-dose hormone therapy, high blood pressure medication clonidine, selective serotonin reuptake inhibitors (SSRIs), antidepressants like fluoxetine and paroxetine or anti-seizure medication gabapentin or Neurontin may offer relief from hot flashes.

Multiple symptoms

If you suffer from multiple severe menopause symptoms, some say that hormone therapies may be the best treatment option.

Low-dose hormone replacement therapy with estrogen and progestin may bring relief from heavy bleeding. You might consult your doctor whether using low-dose estrogen-progestin birth control pills would be a suitable option.

Vaginal dryness and irritation

Vaginal muscles lose their elasticity during menopause; dryness and irritation are common.

Vaginal lubricants like estrogen creams and tablets can combat dryness of skin and help to relieve the irritation.

Vaginal application may cause lower absorption of these estrogen-based creams into your system and this might be an option with reduced risk.

Treatment Options for Menopause Symptoms

Hormone therapy

This is the most popular and effective treatment option for hot flashes, a menopausal symptom.

Doctors prescribe estrogen in low doses after considering other factors such as your family medical history.

Many use this therapy as a short-term treatment option.

Initially, it was thought that this therapy provided protection against heart disease and dementia. Of late, however, research results show otherwise.

Some women may suffer stroke, heart attack, or blood clotting after more than one year of using this therapy.

Regular use of therapy for many years may increase the risks of breast and ovarian cancers.

But, the incidence of these risks do not relate just to hormone therapy alone. Your physical condition may also play a major role.

Bioidentical hormone replacement therapy (BHRT):

This is a new hormone therapy treatment.

Scientists produce hormones from plants like soy and yams, or from animal sources like horses and pigs.

They treat these hormones with chemicals in laboratories and produce synthetic hormones.

The molecular composition of these synthetic hormones is very similar to that of natural hormones.

They are available in the form of oral pills, gels, creams and other formulations.

These therapies are yet to record an established success rate. They may have the same risks as those of hormone replacement therapy, like the increased chance of heart disease, cancer, blood clots and dementia.

Herbal remedies

There are some herbal preparations that are claimed to provide relief from emotional upsets and to help to control excessive aggression.

Some people claim that certain herbal extracts and potions may bring relief from menopausal symptoms.

Always consult your doctor before buying or using any of the preparations in this section.

Black cohosh is claimed to alleviate depression and hot flashes. There are unconfirmed reports that it may increase the risks of uterine and breast cancer.

The changes in hormone levels during menopause may cause severe emotional disturbances like mood swings, depression, and irritability. Some people suggest that yoga, meditation, deep breathing, and biofeedback may help to control your emotional symptoms associated with menopause.

Lifestyle Changes

Adopting a healthier lifestyle may reduce the impact of menopause symptoms.

Eat a regular and balanced diet.

Reduce or eliminate your alcohol and caffeine intake.

Quit smoking.

Make exercise a regular part of your daily life. You can choose from many forms of physical exercise to help to maintain body fitness and build up or protect healthy muscles and bones.

24. Medications

Menopause causes potentially serious symptoms like hot flashes, night sweats, fatigue, irritability, depression, irregular bleeding and mood swings.

Some medications offer relief from such symptoms.

Hormone replacement therapy

This is a very popular treatment option. Many women take hormone therapy treatment for a short-term and at a low dosage. Hormone replacement therapy is believed to increase the risk of serious health problems like heart diseases, cancer, dementia, strokes, and blood clots if used over long periods.

So, many women opt for non-hormonal treatments and medications to get relief.

Some people claim that most menopause symptoms can be relieved to some degree by non-hormonal or hormonal medications for menopause symptoms.

Common Medications for Menopausal Symptoms

Non-hormonal

Clonidine: This medication is said to be in common use among high-pressure patients. It is claimed to be effective against hot flashes as experienced during menopause.

Some women report side effects of this medication like low blood pressure and dizziness.

Belladonna (Bellergal): This medication contains Phenobarbital. It is claimed to lower the effects of hot flashes. It can cause sleepiness and should be only ever used for a short period. It is addictive.

SSRIs: SSRIs are **selective serotonin reuptake inhibitors**. They are antidepressant medications like Paxil or Prozac.

It is claimed that they can bring relief from hot flashes; you experience fewer flashes and with lesser severity.

However, there is no clear indication of how safe they are for long-term use.

Gabapentin or Neurontin: This is an anti-seizure medication. It is claimed to reduce hot flashes. It can cause a few side effects like dizziness, sleepiness and swelling.

Medications for bone loss: Raloxifene, Calcitonin and bisphosphonates are claimed to help reduce bone loss due to menopause, thereby reducing risks of fractures and dislocations.

Hormonal

Progestin pills: These pills like levonorgestrel IUD release progesterone into the uterus. It is claimed that they help control irregular and heavy menstrual bleeding during perimenopause.

It is claimed that there are few minor side effects of these pills.

Birth control pills: These pills contain estrogen and progestin. They can regulate menstrual bleeding. However, you should take these pills only until menopause.

They are said to have side effects. Low-dose pills are available for women over the age of 35.

Stay away from this medication if you suffer from diabetes, cardiovascular disease, high blood pressure or if you have had breast cancer. Smokers also should not take these pills.

Vaginal estrogen medications: These are available in the form of tablets, creams or rings. They alleviate urethral and vaginal dryness and irritation without changing your body’s estrogen levels.

Progesterone creams: These creams may help to correct low progesterone levels. They also may give serious side effects like headaches, blood clots, and breast cancer or increase the risk of uterine cancer in some cases.

Low-dose estrogen: A small dose of daily estrogen may help to maintain good health and make your bones strong. However, the effects of long-term use of estrogen is not very clear.

Estrogen therapy is claimed to provide relief from hot flashes, improve cholesterol levels and reduce the risk of fractures. It is claimed to be beneficial in treating urinary infections and vaginal problems due to menopause.

Side effects including stroke, gallstones, painful intercourse, and blood clots may occur.

It does not prevent pregnancy.

Hormone Therapy: Hormone therapy involves taking estrogen with progesterone according to your doctor’s specifications. Continuous use of this therapy may increase the risk of breast cancer.

Testosterone-estrogen: If estrogen therapy is unable to give you the desired relief from menopausal symptoms, you might be

advised, subject to your doctor's advice, to try Testosterone-estrogen.

This is a new therapy and it does not have FDA approval. Long-term use may cause serious side effects like facial hair growth, hair loss, acne and deepening of your voice.

It may also increase your risk of heart ailments, stroke, blood clots and breast cancer.

Doctors do not advise this for menopausal women except in special cases.

25. Hormone Replacement Therapy (HRT)

Hormone replacement therapy involves replacing the hormones that your body no longer produces to alleviate symptoms associated with menopause. Menopause can involve debilitating symptoms like hot flashes, fatigue, irritability, night sweats, depression and mood swings.

Menopause causes erratic production of hormones in your body. These unpredictable levels can trigger severe symptoms.

Doctors sometimes recommend hormone replacement therapy to overcome severe menopausal symptoms.

Before starting on hormone replacement therapy, doctors advise various tests. Blood tests help determine cholesterol levels.

Your individual constitution requires thorough analysis to see how good this therapy may be for you.

Doctors start with low doses and may increase doses according to the results you get.

Benefits

Hormone replacement therapy has been claimed to have many benefits:

It may manage your menopausal symptoms because it increases your body’s hormone levels to where you suffer less from hot flashes, vaginal irritation or fatigue.

Low estrogen levels increase chances of osteoporosis. This therapy can help to increase estrogen levels and may reduce the osteoporosis risk.

Low estrogen levels could increase the chance of heart diseases. With hormone replacement therapy, estrogen levels increase and that may lower the risks of heart ailments. But, this is more likely if you are not a smoker and have good health.

Risks

Hormone replacement therapy may carry some inherent risks like increased risk of uterine and ovarian cancer. But, these risks are probably, in part, also dependent on other factors, including your genetic history, your medical history of ailments like cancer or a family history of serious ailments.

It may be difficult to arrive at a suitable dose of hormones in your hormone replacement therapy. Hormonal loss is very individualistic, so your doctor has to be very careful when judging how much hormones you require and how much hormones your body is actually producing.

This therapy can have its own side effects such as:

headaches leading to migraines,
excessive weight gain, especially around hips and
fatigue.

HRT may also cause excessive fluid retention, resulting in swollen ankles, facial swelling, breast tenderness and pain in the legs.

Such excess fluid is normally reduced within the first few months of therapy.

Nausea and vomiting are other common side effects. Taking hormonal injections or having hormonal pills after a small snack at bedtime can reduce such feelings.

HRT can induce heavy bleeding in the initial months. After a few months, the bleeding may tend more to be within a specific pattern and you could be better able to adjust to it.

HRT and Menopause

HRT has its advantages and risk factors. Recently, there have been indications that HRT may be a factor in women who take it getting various serious diseases like cancer and heart ailments.

These ailments could occur during the treatment or even long after stopping the therapy. In that context, many are wary of going in for this treatment.

You should discuss whether the advantages for you are greater than the risks.

Precautions

Another way of possibly reducing the possible risks of HRT is to take a few precautions:

- Consider a low estrogen dosage, in the form of vaginal creams, to provide necessary relief and perhaps reduce the chance of serious problems.
- Have scheduled pap smears and regular pelvic examinations to assist early detection of any problems.
- Regular mammograms and breast examinations are also essential.

Other tactics to reduce potential negative effects of HRT include:

- avoiding spicy foods, caffeine, and alcohol,
- use relaxation techniques like meditation, yoga, deep breathing

- practice Kegel exercises regularly
- have an active sex life
- include soy foods in daily diet, and
- use water-based lubricants during intercourse to prevent vaginal pain and irritation.

26. Bioidentical Hormone Replacement Therapy (BHRT)

Doctors sometimes prescribe bioidentical hormone replacement therapy for specific women as an alternative therapy treatment for menopause.

Bioidentical hormones have similar chemical content to natural hormones that occur in your body. They are similar to natural hormones like Estradiol, Estrone and Estriol.

Bioidentical estrogen compounds are normally in specific ratios of these estrogen compounds like 10% Estradiol, 10% Estrone, and 80% Estriol. This is popular as Tri-estrogen or Tri-est.

Another combination includes two estrogen compounds and is popular as Bi-estrogen.

Formation of Bioidentical Hormones

Bioidentical hormones are chemically synthesized hormones produced from plants and animals.

Some refer to bioidentical hormones as natural hormones because their molecular identity is similar to hormones produced naturally within your body.

Scientists and researchers take hormones and steroids from plants and animals like soy and yam plants or pigs and horses. They then treat them with specific chemicals in laboratories to alter their molecular structure.

These hormones are made available in the form of gels, creams, injections, nose spray or oral pills.

Popularity of Bioidentical Hormone Replacement Therapy

This therapy helps to stabilize hormone levels in women during perimenopause and menopause.

As the chemical construction of bioidentical hormones is very similar to natural hormones, many women find them effective. They say that they are able to overcome most menopausal symptoms through use of this therapy.

However, this therapy is not without any risks. Bioidentical hormone replacement therapy, being a new entrant, could have many far-reaching risks and consequences. This therapy still requires more time for doctors to study them and understand all possible implications and effects when many women use them.

This therapy may carry the same risks as hormone replacement therapy. Women using bioidentical hormone replacement therapy could expose themselves to various risks like heart disease, stroke, blood clots, breast cancer, and dementia.

Advantages of Bioidentical Hormone Replacement Therapy

Bioidentical hormone replacement therapy may have advantages over hormone replacement therapy.

Normally, hormone replacement therapy treatment is the same for all. All women irrespective of their symptoms undergo the same therapy treatment.

Bioidentical hormone replacement therapy functions differently. Treatments and dosage is set according to specific individual as per their individual symptoms.

Estriol is claimed to offer protection against hormone-induced cancer. It also binds to an estrogen receptor and is said to function as a tumor suppressor.

Success Rate of Bioidentical Hormone Replacement Therapy

Bioidentical hormone replacement therapy is a relatively new concept. It is still in its early stages and the success rate is not very clear.

Also, every therapy can be expected to have side effects.

You can improve your overall health to sustain therapies if the need arises. Regular exercises help build up your muscles and bones. These also may help to provide relief in the early stages of debilitating diseases like cancer, heart ailments, and osteoporosis which sometimes occur among menopausal women.

Part-VI: Managing Menopause and Keeping Healthy

27. How to Reduce or Eliminate Menopause Symptoms

Menopause often causes severe symptoms, although all women do not suffer from the same symptoms. Most symptoms are temporary and do not cause any long-term effects.

Simple self-care may reduce the severity of most menopausal symptoms:

Osteoporosis is common among menopausal women. Some believe that you need around 1,000 to 1,500 mg of calcium daily. Spread your consumption of calcium through the day, as your body cannot absorb more than 500mg at a time. Good calcium sources include milk, cheese, calcium-fortified orange juice, yogurt and salmon with bones. If need be, ask your doctor if you should take appropriate calcium supplements.

Adequate vitamin D is essential for absorption of calcium. Doctors recommend a suitable dosage according to your individual medical condition. Vitamin D fortified milk is a good source.

Regular physical exercises strengthen your muscles and bones. Adhere to a regular schedule, building up from fairly short sessions to maybe thirty to forty-minutes.

You can adopt the longer exercise schedule if you want to reduce body weight and your doctor approves.

Exercises reduce stress and alleviate menopausal symptoms of depression, irritability and mental fatigue.

Exercises help you combat the onset and effects of diseases like diabetes and cardiovascular diseases.

Kegel exercises strengthen your pelvic region for better management of menopause symptoms and controlling urinary incontinence.

Reduce or eliminate smoking and alcohol consumption, as they reduce body resistance and are claimed by some to encourage an early menopause.

They may also aggravate hot flashes experienced during menopause.

Consume a balanced diet with lots of green leafy vegetables, whole grains and fruits.

Restrict consumption of fats, oil, and sugar.

Stay away from spicy or oily foods and caffeine.

Use water-based vaginal lubricants and moisturizers like Astroglide, Vagisil and Replens. These control vaginal dryness and irritation. Having an active sexual life may help to reduce vaginal discomfort during menopause.

Get adequate sleep and rest. This keeps all emotional symptoms under control. Consider using relaxation techniques like meditation, yoga, deep breathing, muscle relaxation, and similar others to relax all nerves of your body.

Go for regular medical checkups. Undergo screening tests like pap-smear tests, lipid levels and mammograms at prescribed intervals.

28. Ten Ways to Relieve Menopausal Hot Flashes

Hot flashes are synonymous with menopause. Almost all women in their perimenopause or menopause experience hot flashes in varying degrees.

Here are some ways to relieve menopausal hot flashes:

1] Your diet could be the trigger for your hot flashes. Normally, spicy and hot foods, oily foods, caffeine products (like tea, coffee, and carbonated drinks), consuming alcohol and smoking cause hot flashes. Staying away from these may give you lot of relief.

2] Soy contains phytoestrogens, a plant estrogen similar to estrogen hormone. Daily consumption of soy foods is claimed by some to bring marked relief from hot flashes. Soy-rich products include whole soybeans, soymilk, soy powder, tofu, and miso. One to two servings of these products daily may alleviate hot flashes.

3] Black cohosh is a herbal remedy that some people use for hot flashes. They claim that daily consumption of 20mg to 60mg three times provides relief from hot flashes. Additionally, it may also reduce other menopausal symptoms like anxiety and headaches. Discuss these and any other treatments you are currently considering with your medical practitioner before starting, as they might cause adverse reactions.

4] Some people claim that 400 IU to 800 IU of Vitamin E tablets may reduce the frequency and severity of hot flashes. Vitamin E is also claimed by some to strengthen your body’s immune system

and even reduce the incidence of heart disease. I don't know of any independent endorsement of these claims by qualified researchers.

5] Prometrium is a progesterone cream available by prescription for relief of hot flashes.

6] Gabapentin is claimed to be an effective drug for migraine headaches and for hot flashes too.

7] Effexor is an antidepressant which is said by some to provide considerable relief from hot flashes. It is a prescribed antidepressant that is also said does not cause weight gain.

8] Physical exercise is a natural way that many claim will help to reduce the impact of hot flashes. You can adopt any suitable form of physical exercise like walking, jogging, cycling, or others. Build up your amount of exercise to maybe thirty minutes daily but only after consulting your doctor.

9] Hot flashes may increase in hot weather. Wear cotton clothes and keep yourself cool where possible by staying under a fan. Avoid going out in extreme hot weather.

10] Hormone replacement therapy is claimed to provide relief from hot flashes. However, be aware of all advantages and disadvantages of the therapy before starting.

29. Diet Tips to Stay Healthy During Menopause

Menopause induces a biological change in your life. It brings some of these symptoms with it; hot flashes, mood changes, fatigue and depression.

Different women experience different symptoms and with different intensity because of their individual health situation. Healthy women with good nutrition levels report fewer symptoms.

Your diet plays a major role in the frequency and intensity of menopausal symptoms.

Here are a few simple dietary tips to help you stay healthy and reduce the effect of most menopausal symptoms:

Eat a balanced diet every day with three small meals and, maybe, a few healthy snacks in between. Eat a healthy combination of carbohydrates, proteins, and fats. Eat food low in calories to help your digestive system assimilate food easily. This restricts weight gain, as commonly seen during menopause.

Consume more whole grains, dark leafy vegetables and fruits. These provide necessary vitamins like vitamin C, carotene, essential minerals and necessary fiber.

Some of the vegetables to include are sweet potatoes (in place of ordinary potatoes), tomatoes, cauliflower, carrots, spinach and broccoli.

Fruits like grapefruit and oranges are good sources of vitamins and minerals.

Salads and peppers are healthy foods.

Include soy and soy products, like soymilk and soy flour, as soy contains phytoestrogens. This is similar to body estrogen.

Menopause causes your body’s estrogen levels to fall. It is claimed that soy helps to increase the low estrogen levels in your body.

Milk is a very good source of calcium. Include milk, yogurt, cheese and sardines in your daily diet to provide necessary calcium. Spread these foods over your different meals for better assimilation of calcium.

Restrict consumption of sugar and salt.

Stay away from sugary drinks. Sugar contains empty calories and adds to your body weight.

Salty and smoked foods like sausages, hot dogs, bacon, smoked fish, and ham may increase the hot flashes experienced during menopause.

Dried fruits like figs may improve the efficiency of your digestive system.

Fresh fruits like banana, lemons and oranges are rich sources of potassium and vitamin C. These may help to improve sodium and water retention levels in your body.

Include more pasta, lentils and beans in your regular diet. These may provide continued energy over time and help to overcome fatigue symptoms.

Seaweed contains many natural chemicals that some claim combat most menopausal symptoms.

Include carbohydrates like cereals, wheat bread and bagels to help to find relief from depression. Depression is common in menopause, due to varying hormone levels.

Consume more grilled or broiled foods rather than fried foods. Using more canola oil or olive oil instead of saturated fats may make your diet healthier.

30. Exercise and Menopause

Exercise should be an essential component of your life, and especially so for menopausal women.

Regular exercise will help you to boost your spirits, regulate body weight, and it may strengthen your heart, muscles and bones.

It promotes an overall sense of well-being and you feel and remain more happy and contented.

Exercise can take many forms such as walking, jogging, running, swimming, dancing, biking, taking your dog for a walk, serious gardening, normal household chores or almost any other aerobic activity.

Aerobic exercise increases breathing and heart rate. This improves your physical health.

If you practice regular exercise, you can build up lost bone mass.

If you have been exercising regularly right from a young age, you may face minimum risks of developing osteoporosis.

If you start exercising later in life, you can reduce the chance of osteoporosis in your menopause and perimenopause stages.

Exercise prompts your brain cells to release special hormones called endorphins. These are feel good hormones and stimulate your mood to feel happy. Such effects remain for a long time. Thus exercise can help you get over depression and mood swings during menopause.

Exercise stimulates body cells to work harder and regenerate lost bone mass.

**Always consult your doctor before
starting any exercise program.**

Ideally, you should start with simple and less vigorous exercises. You may later proceed on to more strenuous exercise. If you already suffer from back pain or osteoporosis, you should choose exercises accordingly so that you do not cause fractures or put more pressure on your back.

The Downside of Lack of Exercise

Lack of active physical exercise could make you obese. You are more likely to have poor blood circulation and your muscles become weaker.

You suffer loss of bone mass and may find it more difficult to breathe normally.

You could suffer from various ailments like back pain, stiffness of muscles, heart illness, irregular periods, depression, and poor quality of sleep.

Bones have a natural tendency to diminish in weight with age and lack of use. Loss of bone mass is therefore a common menopausal symptom

Osteoporosis is a common disease among menopausal women due to lack of sufficient bone mass.

Part-VII: Alternative and Complementary Therapies

31. How to Treat Menopause Symptoms Naturally

Menopause is a natural, transitional biological process but can produce some symptoms that are difficult and frustrating for you. Menopausal symptoms may disrupt your normal life to some extent if you let them.

Although you cannot escape menopausal symptoms, there are many ways that may offer you some relief.

Among these remedies, many women prefer trying natural ways to hormone therapy, surgery, and medications.

Always consult your doctor before trying any of these methods and never try to replace methods and medicines that your doctor recommends with non-prescribed “remedies”.

Natural remedial treatments and options for menopause are claimed by some to have few side effects.

They cannot offer a cure, but some users and sellers claim that their products may offer relief over a period of time because they treat a natural process through natural balms.

Common menopausal symptoms include irregular periods, heavy bleeding, fatigue, irritation, depression, mood swings, vaginal dryness, hot flashes, night sweats, osteoporosis and heart disease.

One of the main causes linked to many menopausal symptoms is the variation in the levels of body hormones like estrogen and progesterone.

Natural Treatment Options

Herbal Remedies

There are many herbs that users and providers claim may ease menopausal symptoms. The treatment and effect will depend on an individual’s state of health and requirements, according to the intensity of the symptoms.

Consult (1) your doctor and (2) a reputed herbalist before starting on herbal medications.

Some herbs could prove dangerous and some could cause serious reactions if taken with other medications.

Herbs that may to treat menopausal symptoms include:

Ginseng: This herb has many fatty acids that are claimed to alleviate hot flushes and stress.

Black cohosh: This herbal root is claimed to be effective for vaginal dryness and hot flashes.

Dong quai: This is claimed to improve blood circulation but some women feel this herb intensifies symptoms.

Women with fibroids should avoid using this herb.

Agnus castus: This herb is claimed to stabilize hormone levels and provide some relief from hot flashes and vaginal dryness.

Homeopathy

Homeopaths believe in treating your entire body if you have discomfort in any one particular part.

So, homeopaths consider your entire constitution while treating you for menopausal symptoms and prescribe remedies accordingly.

There are numerous preparations available from homeopaths that claim may help with menopausal symptoms. But, the same remedy does not deliver equal results in different women although both may suffer from the same menopausal symptoms.

You could consult a registered homeopath to find solutions to your menopausal problems but always abide by the advice you get from your qualified doctor.

Proper Nutrition

Your diet can play a pivotal role in tackling most of your menopausal symptoms.

Menopausal women require high quantities of vitamin C, D, E and minerals like calcium and magnesium.

Forgoing oily and spicy foods may reduce hot flashes immensely.

Similarly, quitting smoking and lowering alcohol consumption may help to stabilize your hormone levels.

Include more leafy green vegetables, soy and soy products, milk, cheese, yogurt, oily fish like salmon and sardines, salads, whole grains, cereals, pasta and a variety of fruits to provide all essential nutrients to your body.

Aromatherapy

Aromatherapy involves the use of essential oils from plants and flowers.

Inhaling or massaging these oils is claimed to cause a calming effect and reduce most emotional symptoms of menopause. You can use some of these oils in water as a compress or inhale the aroma.

Or, you can massage it on different body parts.

Get the help of experienced masseurs and registered aromatherapists for the best results.

Beneficial oils include:

Clary sage: It is claimed to be an effective antidepressant.

Geranium: It is claimed to help to stabilize hormone levels and relax tense nerves.

Bergamot: It is claimed to uplift your emotions

Cypress: It is claimed to reduce hot flashes.

Lavender: It is claimed to induce better sleep and may relieve some pain to some extent.

Roman chamomile: It is claimed to be a soothing balm for relieving pains and to calm frayed nerves.

Acupuncture and acupressure

These are Chinese remedies that are claimed to help obtain balanced maintenance of yin and yang in your body to get some relief from pains and debilitating symptoms.

Acupuncture involves piercing by small pointed needles at strategic pressure points in your body.

An experienced acupuncturist can identify such pressure points and pierce them accurately. The needles remain in place for twenty minutes.

It is claimed that you do not feel any pain; only a tingling or warm feeling. They suggest that you can feel the relief after eight to ten sittings.

Acupressure is similar to acupuncture in that it works through identification and application of pressure at strategic points in your body. These pressure points are claimed to be energy channels. Application of pressure rejuvenates these energy channels. This treatment is claimed to bring relief from minor menopausal symptoms with some women.

Exercise

Exercise plays an important role in maintaining your good health. Exercise is important at every stage of life, and especially during menopause. It keeps your physical body fit and soothes your mental state.

Exercising can take many forms like walking, jogging, running, cycling, swimming, running your dog, playing games like tennis and badminton, or working out at a gym.

Physical activity exercises your bones and muscles and may help to reduce the risk of them becoming weak and inefficient.

It may reduce reduction of bone mass.

Exercise encourages sound sleep and strengthens your heart and other body muscles. It increases flexibility of your body.

It causes your brain to release a feel-good chemical that enhances your moods and emotions.

All these factors together can help you fight most menopausal symptoms like osteoporosis, fatigue and heart ailments.

Relaxation Therapies

Different relaxation therapies like yoga, meditation, biofeedback and deep breathing may help to control most emotional symptoms of menopause.

You should consider learning to use these therapies from registered and experienced practitioners to grasp the correct techniques.

Regular practice of these therapies may help to calm your nerves and stabilize emotions.

32. Herbal Remedies for Treating Menopause

Few herbal remedies can give any proof of effectiveness against menopausal symptoms like hot flashes, night sweats, depression, breast tenderness, and headaches.

Any claimed effectiveness of herbal remedies will also depend on the severity of individual menopausal symptoms.

Some of these preparations could react with your other medications.

Discussing the possibility of using them with your medical practitioner can help you decide suitability of herbal remedies.

Different herbal remedies include:

St. John's Wort: Small dosages of less than 1.2 mg taken every day are claimed by some people to help against depression.

CAUTIONS: Not to be used by pregnant women.

Do not continue this treatment for long periods, like two years.

Common side effects include increased skin sensitivity to sun and reactions with prescription medications.

This herbal remedy is not effective against severe depression.

Black cohosh: Short-term treatment through use of this herbal remedy can treat night sweats and hot flashes.

CAUTION: You should not continue with this treatment beyond six months.

Soy and Isoflavones: Soya beans contain high isoflavones and may increase body estrogen levels considerably. It is claimed to provide some relief from hot flashes and night sweats. Prolonged

use is claimed by some people to lower cholesterol levels and strengthen your bones.

CAUTION: Excessive dosages might increase the risk of breast cancer.

Evening primrose: Seeds of this herbal plant are claimed to be a rich source of gamma-linolenic acid. Many take these capsules for treating breast pain and tenderness during menopause.

However, its effectiveness may not be very satisfactory.

Valerian root: This herb acts as a sedative.

CAUTION: It has serious withdrawal symptoms and therefore medical practitioners do not support its usage.

Dong quai: This can reduce hot flashes.

CAUTION: It may contain specific compounds that might cause or increase the risk of excessive bleeding, thin your blood and increase your skin’s sensitivity to sun.

Ginseng: There are different varieties of Ginseng like white, red, American, Siberian, and Korean. This herb is claimed to promote a sense of well-being by reducing stress.

Chaste berry: This herb is used by some women for breast pain. Some menopausal women feel this herb promotes better mood with improvements in menopausal symptoms like headaches, anger, and breast fullness.

Herbal remedies may prove costlier in the long-run. They do not have insurance coverage. There is little or no governmental regulation of these supplements at this time.

Part-VIII: Menopause Support

33. Menopause and Your Family

Menopause is something that every woman goes through, though not with the same intensity.

Some women experience severe symptoms while some have a smooth sailing almost without ever realizing they are passing through menopause.

In any case, your family members should be a part of all that you experience.

You should talk and explain to your family members of the possible consequences of menopause:

Mood swings and depression come without any notice.

You could be in foul mood at times and it could take your family members by surprise when you overreact to small matters.

Keeping your family members aware of your possible outbursts can help them to understand that you are in a foul mood presently and it is best to approach you later.

There are various information booklets on menopause available at public libraries.

You can gather more information from the Internet. Read to gain information. Also, ask your family members to go through these too.

Discuss all aspects of your menopause frankly.

Form support groups with friends and colleagues to help each other during difficult days and times.

Understanding menopause and its consequences can make going through your transition period a smoother process. It might prove easier to cope and stay ahead in life.

Discuss all aspects with your doctor and, if possible, ask your husband and children to go with you and discuss it with your doctor. This provides an opportunity to all of you to discuss the matter openly and clarify any doubts.

34. Where to Find Help for the Menopause

Menopause is a phase that may be a real struggle. Some women find menopausal symptoms severely debilitating. It disturbs their entire routine.

You feel unprepared and unable to cope with the disruptions. Fortunately, there are various help options available.

You may choose the most suitable one so that you do not have to suffer alone.

Help For Menopause

Your Doctor: Your doctor is the best and the first person you should seek help from. Your doctor can explain everything in detail and reduce your doubts and anxieties.

Help Groups: Women suffering menopausal symptoms often come together to form support groups. The members provide much essential help to each other. They comfort each other. By joining these groups, you understand that you are not the lone sufferer. This gives you a boost and you are able to face menopausal symptoms with greater grit.

Online Groups: Similar to offline groups, there are various support groups on the Internet. You can become a member of such groups. A major attraction for such online groups is that you can keep your identity a secret. You can discuss all embarrassing and intimate questions, as the other people are strangers and cannot see or recognize you later.

The Internet: There are numerous articles and e-books on menopause on the Internet. Going through these can keep you better-informed.

35. Supporting Someone Going through Menopause

Menopause is a natural occurrence in every woman's life. Your ovaries stop producing estrogen, an essential body hormone. Absence or low levels of this hormone cause physical and emotional changes, which are menopausal symptoms.

In some cases, menopause could be the result of major surgery. Although menopausal symptoms after surgery are the same as those in natural menopause, these come suddenly.

Sudden changes may be even more difficult to adjust for and bear.

Offering Support

You could be the spouse or son/daughter of a person experiencing menopause.

At the onset, educate yourself in detail about menopause and its possible complications and symptoms. Being aware can help you understand what she is experiencing and equip you better to provide all possible help to make her feel comfortable and loved.

Common menopausal symptoms include hot flashes, night sweats, vaginal dryness and irritation and depression.

Hot flashes could wake her up in the middle of the night. She may require a cooler temperature though you may not need it. Wear something warm and let her have the cool temperature she craves.

Some days, she may find fault with everything you do and nothing is able to please her. Be patient and her mood may soon return to normal.

Sexual intercourse could prove painful due to vaginal dryness. Try using water-based lubricants and other aids.

As children, you may find some changes in your mother a little disturbing. Remain loving and understanding of her feelings.

Someday, you may have to undergo a similar stage or help your wife go through it.

Part-IX: Menopause FAQ

36. Menopause – Frequently Asked Questions

What is menopause?

Menopause is a natural biological occurrence in every woman’s life involving the cessation of regular menstrual periods and reduction of levels in two important hormones.

When does menopause occur?

Menopause normally starts in a woman’s late forties to their early fifties. In very rare cases, it may start in the thirties or the sixties.

What is perimenopause?

Perimenopause is the period leading into menopause. Although your menopausal symptoms start by the late forties and early fifties, you could experience such symptoms for three to five years. This period is perimenopause.

Is pregnancy possible during perimenopause?

Yes, pregnancy is possible. Ovaries produce fewer eggs and chances of pregnancy are less but you cannot rule out the possibility unless you remain without periods for one full year.

What is surgical menopause?

Surgical menopause is the onset of menopause due to surgical removal of your ovaries. This could be due to various causes and at any age. However, menopausal symptoms of surgical menopause are more severe and sudden.

What are the symptoms of menopause?

Menopausal symptoms include hot flashes, night sweats, vaginal dryness, depression, irregular periods, irritability, body aches, insomnia, fatigue, headaches, mood swings, urinary tract infections, urinary incontinence, weight gain, hair loss and anxiety leading to heart palpitations.

Menopause could increase the risk of osteoporosis and heart ailments later in life.

Do all women experience the same menopausal symptoms?

Not all women experience the same menopausal symptoms or to the same degree. Different women experience different symptoms. Some women experience severe symptoms while some experience less severe symptoms.

Some women have a smooth transition into menopause.

Is it possible to prevent menopause?

No, it is not possible to prevent menopause. It is a natural occurrence and you cannot stop it from happening.

What happens during menopause?

During menopause, your ovaries produce lower quantities of estrogen and progesterone; essential body hormones. Estrogen provides the necessary lining around your uterus to support a fertilized egg.

Progesterone offers support for the growing embryo. If there is no fertilization, menstrual flow occurs.

During menopause, lowered secretion and levels of these hormones cause irregular periods. Drastic changes in hormone levels cause mood swings and other physical symptoms.

Is hormone replacement therapy the best option?

Hormone replacement therapy is not always the best option as it increases body hormone levels through use of synthetic estrogen and progesterone.

This may increase various health risks, such as higher chance of heart ailments, ovarian cancer, breast cancer, strokes and clots.

Can hormone replacement therapy prevent osteoporosis?

Hormone replacement therapy cannot prevent osteoporosis. It can slow down bone loss through synthetic hormones. Yet, once you stop the therapy, you start losing bone mass.

Should women with a history of cancer opt for hormone replacement therapy?

No. Your body’s estrogen promotes growth of cells in breast and uterus. Synthetic estrogen, as available through hormone replacement therapy, may promote the growth of tumors, placing you at a higher risk of developing cancer again.

What are the other treatments for menopause?

It is sometimes claimed that menopausal women may find some relief with the help of:

- natural remedies like herbal remedies,
- healthy food choices,

- regular exercises, physical and mental.

Nutritious and balanced food at regular intervals can keep you fit.

Refrain from oily and spicy foods and avoid alcohol and caffeine.

Maintain a regular exercise schedule and practice aerobic exercises.

This may strengthen your bones and muscles.

Mental exercises like yoga, meditation and deep breathing may help to keep you stress-free.

Herbal remedies like soy products, black cohosh and valerian root may provide relief, although there is no medical evidence to prove the claims that I have read.

Part-X: Glossary of Terms

37. Menopause - Glossary of Terms

Actonel: Medicinal drug that helps build bone mass, used in osteoporosis treatment

Adjuvant therapy: Therapy in addition to main treatment

Alternative medicine: Medicines not recognized by registered medical councils

Amenorrhea: Absence of a woman’s monthly period

Antidepressants: Medications for treating depression.

Anxiety: Feeling of fear or nervousness, accompanied by restlessness

Biofeedback: Method to control body functions like heart beat, muscle tension, and blood pressure voluntarily with a machine. Intended to help relieve pain

Birth control: Controlling possible pregnancy through use of pills, intrauterine devices (IUDs), and other ways

Bisphosphonates: Drugs for treating osteoporosis and pain in the bones

Bladder: Sac that holds urine

Bladder prolapse: Pelvic weakness that cause lowering of bladder

Bone mineral density (BMD): Amount of calcium present in bone

Breast cancer: Cancer of the breast due to abnormal division and multiplication of cells within breasts

Calcium: Essential body mineral available through dietary intake and necessary for maintaining bone health.

Cervix: Lowest part of womb that helps in easy childbirth

Chemotherapy: Common treatment option for cancer

Complementary therapy: Treatments like herbal remedies, vitamin supplements and massage that are not conventional medical treatments.

Depression: Negative mood and loss of interest in normal activities.

DXA scan: X-ray to detect bone thinning

Dysmenorrhea: Pain during menstrual period

Dyspareunia: Pain during intercourse.

Endometrial cancer: Cancer of uterus lining

Estrogen: Female sex hormone that can be produced naturally or artificially

Evista (Raloxifene): Drug for treating osteoporosis in postmenopausal women

Fibroids: Benign tumors developing in and around uterus

Follicle-stimulating hormone (FSH): Hormone produced by pituitary gland that stimulates the growth of egg follicles

Forteo: Injectable bone-building medication

Gynecologist: Doctor specialized in care of female reproductive organs

Hormone therapy (HT): Use of synthetic estrogen and progesterone to treat menopause

Hormones: Body chemicals produced by glands that control the actions of certain cells or organs

Hot flash: Momentary sensation of heat and heavy sweating

Hysterectomy: Surgical removal of uterus.

Incontinence: Loss of bladder and/or bowel control

Induced menopause: Menopause due to surgical removal of uterus

Inhibited sexual desire (reduced libido): decrease in desire for sexual activity

Insomnia: Difficulty in sleeping

Kegel exercises: Exercises to strengthen pelvic floor muscles; helps with control of incontinence problems

Luteinizing hormone (LH): Hormone produced by pituitary gland, necessary for ovulation

Mammogram: Series of specialized X-rays of breast to detect abnormalities in breast tissues

Menopause: The final stage of a woman's fertile period

Menstrual cycle: Monthly cycle of hormonal changes from one menstrual cycle to another

Menstruation: Periodic shedding of uterine lining

Oocytes (ova or egg cells): Female reproductive cells

Oophorectomy: Surgery to remove one or both the ovaries

Osteoporosis: Fall in bone density and mass, causing thinning of bones

Ovarian cancer: Growth of malignant tumor within ovaries

Ovarian cyst: Fluid-filled sac formed within one of the ovaries

Ovary: Female reproductive organ that secretes hormones and holds egg cells

Pap smear: Screening test of sample cells from cervix to detect changes

Pelvic cavity: Space in the pelvis that holds reproductive organs

Pelvic examination: Medical examination of pelvic region through speculum for any changes or lumps

Perimenopause: Transitional period that leads to menopause

Phytoestrogens: Estrogen-like substance available from plants

Post-menopause: Time after menopause.

Premature menopause: Menopause before the age of 40

Premature ovarian failure: Sudden stoppage of egg production by ovaries

Progesterone: Female hormone that prepared uterus to sustain a fertilized egg.

Progestin: Synthetic form of progesterone.

SERM: Selective estrogen receptor modulator

Stress incontinence: Involuntary leakage of urine during coughing, laughing, sneezing or exercising

Urinary tract infection (UTI): Infection in the urinary tract

Uterus: Small and hollow organ in a woman’s pelvic region where fetus develops

Vagina: Tube that joins cervix to outside of the body

Vaginal dryness: Insufficient lubrication of vagina

Vaginal lubricant: Moisturizing product to treat vaginal dryness.

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