CHEAT SHEET

LAUGHOLOGY

MENOPAUSE

What is it?

You may not think that information about the menopause is relevant to you. However, everyone can be affected by it.

This cheat sheet will give you a better idea of what the menopause is, and isn't, whether you are the partner, son, daughter or workmate of someone who is going through the menopause, or the woman herself .

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The Menopause

What Is It?

The menopause is when your periods stop. It is influenced by a change in hormone levels, namely oestrogen and progesterone, which can cause a number of symptoms. The definition of 'being menopausal' is when you have not had a period for one year.

Perimenopause refers to the time when you experience menopausal symptoms, but continue to have periods. These periods are often more irregular and light than they used to be.

It has nothing to do with spicy chicken, but it can make you sweat as much.

The menopause experience is unique to every individual. There are some myths and facts though, which it's helpful to understand.

FACT: Menopause is not an illness, but for many women it can be a very challenging time mentally and physically, impacting on self-esteem, work and personal relationships. It isn't something that we should just put up with.

FACT: The average age of UK women to experience the menopause is 51, but many of these women are perimenopausal in their 40s.

FACT: Premature menopause (although less common) can and does occur in even younger women. Menopause can occur immediately after some surgeries, cancer treatments or treatments that purposely bring on a chemical menopause. A chemical menopause is a type of 'induced menopause'. This is distinct from a natural menopause, which occurs when the ovaries naturally decrease their production of the sex hormones oestrogen and progesterone.

FACT: Up to a quarter of women do sail through the menopause, largely unaffected. Don't hate them for it.

FACT: It is likely that transgender men, taking testosterone, will stop having periods. They may have symptoms similar to the menopause

MYTH: If you have periods early, you will have an early menopause.

MYTH: The menopause causes weight gain. The change in hormones can affect the way fat is stored, but there are no proven direct causal links between menopause and weight gain.

MYTH: You have to be a woman in her fifties to experience the menopause.

MYTH: Life will never be the same after the menopause.

MYTH: You can ditch contraception.

Finally…

If you think you may be menopausal or perimenopausal…

Make an appointment with your GP, if your symptoms are troubling you. If you are younger than 45 then your GP should consider tests. The most common test is a blood test measuring a level of a hormone called follicle stimulating hormone (FSH). If this is raised, then it is very likely that you are menopausal. This blood test is often repeated 4-6 weeks later. If you are under 40 years then you may be advised to have other blood tests.

Find out more by visiting websites such as:

- www.nhs.uk/conditions/menopause/
- www.menopausematters.co.uk

Remember that the menopause is a perfectly normal process. Let's talk about it, let's cry about it, let's laugh about it. Let's empower ourselves, friends, family members and colleagues to find out what treatment options and coping strategies help, so that we can all feel the benefits.

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Recognising the symptoms and addressing them

Did you know that many women mistake being perimenopausal and going through the menopause for stress?

In this cheat sheet, we will look at the signs and symptoms to look out for and some of the coping strategies that you can use.

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Recognising the symptoms

Treatments and coping strategies

The menopause experience is unique to every individual and symptoms can range from mild to severe and can fluctuate over time. Some of the symptoms are:

- Hot flushes
- Night sweats
- Irritability
- Mood swings
- Forgetfulness
- Anxiety
- Depression
- Hair loss
- Brittle nails
- Itchy Skin
- Headaches
- Vaginal dryness
- Sleeplessness
- Loss of libido
- Fatigue
- More frequent urination – especially at night.

Good Humour

'Must have GSOH' doesn't just need to be a requirement in a partner - we all need a good sense of humour. When we laugh, positive neurotransmitters are released, which then help redress the imbalance caused by the changing hormone levels.

TRY:

Actively seeking out more things that you enjoy; spending time with friends who make you laugh; watching films that you find funny. Why not go to a comedy club, if you're inclined to. Or you could go online to find funny ways that other women have coped with the menopause. This will help you to understand that you're not the only one.

H.R.T.

Most women experiencing menopausal symptoms can take HRT and many women have found HRT to be very helpful.

*HRT may not suitable for you if you have: a history of breast/ovarian/womb cancer; a history of blood clots; liver disease; untreated blood pressure. Speak to your GP if you are interested in HRT.

Relaxation Techniques

Techniques, such as mindfulness and meditation, can help alleviate the anxiety and depression symptoms that are common with the menopause.

TRY:

Short online yoga sessions, that you can do at home. There are some great mindfulness apps too. Rather than spending time looking at the less positive news and social media apps, download a 2-3 minute mindfulness exercise instead.

The Basics

Surprise! A healthy diet, regular exercise and reduced caffeine and alcohol intake will help your body manage the menopause better. Why not use the menopause as an opportunity to look at your self-care, seeing where it needs tweaking and taking action.

TRY:

- Eating nuts and seeds.
- Eating fresh fruit.
- Having a healthy breakfast, within an hour of getting up . This will help your brain function better and will positively impact on sleep later.
- Drinking plenty of water.
- Reducing your red meat intake and eating more fish.
- Going for a short walk at lunch times – even if this is just 5-10 minutes, it will help.

Sleep Hygiene

No, this doesn't mean clean bed sheets (although we do recommend this). It means establishing a regular routine so your body knows it's time to sleep.

TRY:

- Creating a calming bedtime routine that works for you, e.g. stretching or having a warm bath or shower.
- Switching off phones / laptops / TV screens in the bedroom.
- Avoiding stimulants at least one hour before bed. Avoiding drinking at least 1.5 hours before bed to reduce getting up in the night to urinate.
- Taking some cold water to bed in a travel/drinking flask, with ice in it. If you wake up hot in the night this can cool you down by taking small sips as well as pressing the flask against your head/body.
- Having some cold water in a washing up bowl by your bed (somewhere that you won't trip over it). If you wake up and are really hot in the night, dip your feet in the bowl to cool down - have a towel ready.
- Alternatively, you could put a damp flannel in the freezer an hour before you go to bed and take this upstairs with you to put by the side of your bed.
- Wearing very lose light clothes to bed or nothing at all.

Sweet dreams!

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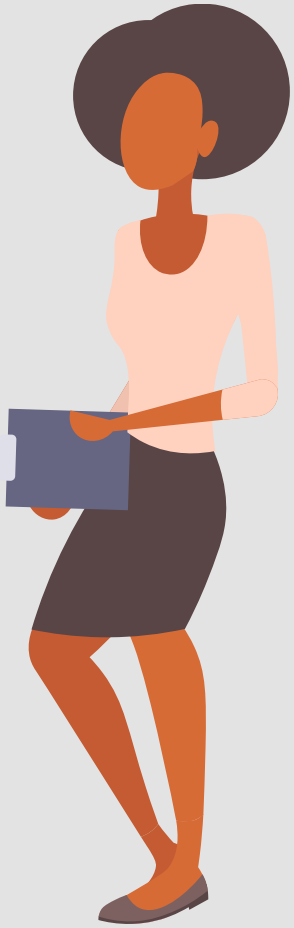
Taking control

Apart from pregnancy, gender and age related health issues are rarely discussed at work. The menopause can be tricky to talk about at home too!

In this cheat sheet we look at the benefits of chatting to others, and how we can go about this – should we choose to.



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How you might start conversations..

Who can you chat to?

If you find that the menopause is affecting your happiness and ability to do your job, there are lots of people that you can chat to:

- A healthcare professional, such as your GP or a nurse.
- Supportive departments in your organisation, e.g. Occupational Health or H.R.
- Your line manager or another manager, if you find this more comfortable.
- Colleagues, particularly those who may be experiencing similar symptoms.
- Friends and family, as they may be affected by it too.

It can help just talking about how people feel, even if you don't have all the answers.

There are many different ways to start conversations. It's up to you whether you choose to start chatting about the menopause or not. By doing so, you may find that you can take better control of your wellbeing and working environment.

KEEPING IT CONFIDENTIAL: All conversations regarding your health should be confidential. You can remind your manager of this by asking, 'Is now a good time for a private chat about my health?' It might emerge that, during the conversation, you would like certain aspects shared with the team. Then you should agree who is going to do this, when and how.

BEING SOLUTION FOCUSED: Whilst it may be helpful for colleagues to know the difficulties that you're experiencing, change is more likely to happen if you can suggest a solution to the problem. For example, 'I've been thinking. It would be really helpful for ladies who are having hot flushes if we could have some cold water in the meeting, rather than just hot drinks.'

YOU'VE GOT TO LAUGH! Well, you don't have to, but it does help! Using humour is a great way to deflect embarrassment. If people are discussing the temperature in a room, you could explain that 'as a lady of a certain age' your thermostat is not to be relied upon!

IT DOESN'T HAVE TO BE FACE-TO-FACE: If you don't fancy having a face-to-face chat, there are lots of other options. Occupational health or another colleague could speak to your manager on your behalf, you could choose to go old school and write a note, or you might prefer to send an email. Remember again to mark any correspondence as confidential and be forward thinking and solution focused in your approach.

BEFORE MEETING YOUR GP:

- Do your research; take a look at the NICE guidelines, knowledge is power.
- Make a list of all your symptoms and anything you have used to try to alleviate them.
- Take a trusted friend or family member with you; it can be great to have support.
- Make a list of your questions; it's easy to forget once you sit down with the doctor.
- Be prepared to wait for answers; if your doctor is unsure, ask him or her to consult a colleague or read the NICE guidelines before coming back to you.

What could you chat about?

You might want to chat about reasonable adjustments that can be made. For example, asking if there is any flexibility in your working hours, e.g. being able to take more regular toilet breaks, working later shifts to allow you to have a better night's sleep.

Or you might want to suggest company-wide improvements. For example:

Starting up a Menopause Forum, so that women can meet up regularly to share experiences and ideas.

Having free sanitary wear in toilets or a machine that you can access at work.

Preparing for the chat can be helpful too:

- Book a time
- Prepare what you want to say and how
- Offer solutions
- Follow up: set a time to follow up on any actions that have been agreed.

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Frequently asked questions

How long does the menopause last?

Everyone is different and experiences the perimenopause and menopause in their own unique way. On average though, the menopause lasts for 4-8 years.

What if I don't have any symptoms? Does that mean I'm not properly going through the menopause?

The average age to go through the menopause is 51. Just because you are a 50 year old woman, does not necessarily mean that you are going through the menopause. For some people, the menopause doesn't occur until they are in their mid-60s. This is called a late-onset menopause.

Also, bear in mind that you might be one of the 25% who pretty much sail through the menopause unaffected

How might my body change?

Some of the body changes that you experience may be because of the menopause and the associated reduction of oestrogen. Others may simply be part of the aging process.

Skin: You may notice an increased dryness, loss of elasticity and vascularity, thinning of the skin and increased wrinkling.

Hair: It may be that you experience a thinning of scalp, leg and pubic hair. At the same time you may find that you grow more facial hair. This is a scientific phenomenon – known as sod's law!

Bladder: Around the time of menopause, urinary frequency, cystitis and incontinence are more common. You may need to go to the toilet more often during the night which can affect your quality of sleep.

Weight changes: Weight gain cant be attributed to the menopause. However, on average, hormonal changes lead to women gaining half a kilo per year, between the ages of 45 and 55.

For more information about body changes and what you can do to help yourself, go to: https://bit.ly/2BSn4dZ

How can I take back control?

- Be aware of the influence that the media and advertising can have on how you are feeling. In particular, watch out for messages that tell you you should 'reduce the tell-tale signs of aging'. Try not to listen to negative messages and focus more on self-acceptance and your emotional wellbeing. Here are some suggestions, as to how you can do that: https://bit.ly/2TnIvO5
- Improving your physical will help you combat the symptoms of the menopause. For example, swimming or going for a bike ride will improve your heart rate. Strength exercises will reduce your risk of osteoporosis. Yoga and meditation are great for centring your mind and relieving some of the anxiety that you may be experiencing. For more information: https://bit.ly/2NtjI5C
- Know that, if you eat crap, you'll eventually feel crap. Enough said?
- Look after yourself during the day, to enable a better night's sleep. The expert on sleep is Dr Nerina Ramlakhan. Either Google 'Dr Nerina menopause' or read her blogs for great advice: http://drnerina.com/blogupdateable.php
- If your symptoms are becoming problematic, chat to your GP about HRT or other treatments. You might prefer to try complementary medicines? In which case, pop into your local chemist

Will people know that I'm going through the menopause?

Not necessarily. However, if there is a change in your behaviours, e.g. mood swings, needing to go to the toilet more often, then some people might realise – particularly other women who are going through, or have been through, something similar.

It is up to you whether you want to chat about the menopause with your colleagues, your manager at work, your friends or your partner. By doing so, it might help them to better understand and be able to support you.

If you would prefer, you could also talk to Occupational Health or Human Resources. (Can we include details here?)