

AgeAmazing
rejuvage

MENOPAUSE

Your questions answered!

From symptoms to HRT to
natural remedies.

A complete guide!



By Tracey Leslie

with contributions from Kathy Abernethy

HRT, Testosterone,
Hot Flushes, Depression,
Exercise, Perimenopause,
Night Sweats, Treatments,
Herbal Remedies

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Louise and Tracey would like to introduce you to their Menopause Guide. As two menopausal women we have enlisted the help of specialists and shared our own stories - we hope it helps you!

Keep an eye out for our upcoming Menopause, Health & Wellness events, held in Surrey.

www.rejuvage.com

KEEP SMILING!

1. Time to talk menopause

From symptoms to HRT to natural remedies.

The menopause can be a troubling time. It often comes on suddenly and many women are left ill-equipped with how to deal with the symptoms. Alongside the physical changes that come with the menopause are the strains on your mental health and emotions. You can feel like you're losing control of your own body, feel "past it", become so forgetful you feel like you're losing your mind, feel worthless and battle self-loathing.

The good news is that most of us women go through it! Throughout our time working on Rejuvage we have spoken to many women of different ages and stages going through the menopause. We love to listen to their stories and hear what has helped them. Talking about it with people who understand is a positive experience.

We've put together this handy guide on the menopause including what to expect say, how to cope, treatments and a handy questions and answers section with our very own menopause expert Kathy Abernethy MClinSci RN.

2. What is the menopause?

The menopause is caused by a change in the body's hormones, which occurs as you get older. It happens when your ovaries stop producing as much of the hormone oestrogen and no longer releases an egg each month. Premature or early menopause can occur at any age, and in many cases, there's no clear cause.

It's worth talking to your GP if you have menopausal symptoms that are troubling you or if you're experiencing symptoms of the menopause before 45 years of age. Your GP can usually confirm whether you are menopausal based on your symptoms, but a blood test to measure your hormone levels may be carried out if you're aged 40 to 45.



3. Coping with the menopause

When our periods stop and we are no longer able conceive naturally, the menopause has usually arrived!

There is normally a lead up to this, with periods lessening over either months or years before they stop altogether whilst our bodies are adjusting. This is peri-menopause, the introduction before the main event!

The menopause can occur between ages 45 and 55 - with the average woman in the UK reaching menopause at 51.



Coping methods

There are various ways to cope with peri and menopausal symptoms and we have covered quite a lot within this guide Section 7 explains the herbal alternatives that may assist with alleviating some of the symptoms, whilst Section 8 guides you through using exercise as a way of dealing with it.

As well as the other methods of coping, cognitive behavioural therapy (CBT) has shown to have a mild-to-moderate beneficial effect when it comes to coping with the menopause.

Treatments

Some women want to keep the menopause quiet due to the stigma that has sadly been attached to it over the years! Doctors are here to help, although some admittedly know more than others! It is always a good place to start and having an open discussion with your GP can be beneficial.

Requesting a blood test to determine whether you are currently in the menopause or not is recommended, some GP's are against this, but if you insist they will normally do this for you. Go armed with knowledge! Otherwise unfortunately some GPs are known for administering antidepressants instead of recognising menopausal symptoms.

4. HRT & Bioidentical HRT

Many women avoid taking HRT due to a belief that it is unsafe and carries too many risks. The majority of women still do not realise that the benefits of HRT usually outweigh the risks for women under the age of 60 years. Many people are put off by the stories that it increases the chance of getting breast cancer. There are risks associated with HRT, but sometimes the risks are small compared to the benefits of taking it, including the fact that it reduces the risk of osteoporosis and heart disease. Whatever you have heard about HRT, it's important to talk it through with a menopause expert or your GP to fully understand all the options available to you.

HRT

HRT comes in various forms depending on your requirement. HRT is made up of two hormones, oestrogen and progesterone. Oestrogen only HRT is prescribed for women who have had their womb removed due to a hysterectomy, whereas a combined HRT of both oestrogen and progesterone are normally prescribed, as the progesterone protects the womb lining and is said to prevent womb cancer.

Some menopausal women find an increase in headaches/migraines and taking the 'kinder' patches/gel should help in reducing this, it is also safer as it is absorbed into the skin. The oestrogen is derived from a plant chemical which is extracted from yams (tropical root vegetables).

Bioidentical HRT

This is seen as the nearest solution to natural hormones. Derived from a plant chemical which is extracted from yams, they create 'body identical' hormones. The oestrogen is normally in the form of gels or patches and is absorbable through the skin, thus giving you less risks and side effects.

Progesterone, advisable to take if you still have a womb, is an important component of HRT along with the oestrogen. This bioidentical form is also created from yams and is readily available from your GP as long as you know what you need to ask for!

Alternatives

HRT is the obvious choice for treatment, but many of us are reluctant or unable to take it. There are some alternatives which we will talk about later in the guide.

5. The 10 most Googled menopause questions

Below are a selection of the most Googled menopause questions asked by women.

1. What are the symptoms of the menopause?

The menopause is caused by a change in the body's hormones, which occurs as you get older. It happens when your ovaries stop producing as much of the hormone oestrogen and no longer releases an egg each month.

2. What do I do about night sweats and hot flushes?

Many women learn to live with menopause-related hot flushes, but if they're really bothering you and interfering with your day-to-day life, talk to your GP about treatments that may help.

The most effective treatment for hot flushes is hormone replacement therapy (HRT) which usually completely gets rid of them. Speak to either your GP or a specialist.

3. What are the signs of menopause?

The signs vary from person to person, some women will experience all of them and some of them have none! They can include any of the following: anxiety, sleep deprivation, mood swings, lethargy, middle weight gain, feeling emotional, forgetfulness, hot flushes, tingling, vaginal dryness and loss of sex drive.

4. What is perimenopause?

This is the time before the menopause, when a woman's oestrogen levels are decreasing, and she will experience some of the menopausal symptoms. Again, not all women will experience them but they can include weight gain, vaginal dryness, hot flushes, mood swings or night sweats.

5. What are the signs of early menopause?

The main symptom is that periods decrease and stop, accompanied by some of the above symptoms.

6. How long does menopause last?

An average of 4 years although no time limit is put on this. For some women it can go on for 12 years.

7. What are the side effects or HRT?

Some of the main side effects are breast tenderness, bloating, nausea, leg cramps, headaches, indigestion and vaginal bleeding.

8. What natural remedies are there for the menopause?

There are many natural remedies for the menopause, including different herbal combinations. See our natural remedies section detailing the many types.

9. What vitamins should I be taking during the menopause?

The B vitamins, which include thiamine, niacin, B12 and folic acid, are often referred to as the 'stress' vitamins. It can be important to take these as symptoms of B vitamin deficiency can include tension, irritability, difficulty managing stress, poor concentration and anxiety.

10. What are the alternatives to HRT?

Bioidentical HRT is one option. These are made from plant sources but are not all regulated. Antidepressants are known to assist some of the symptoms. Clonidine is a prescription medicine that can help reduce hot flushes and night sweats in some menopausal women.



6. Your top menopause questions to Rejuvage answered by Kathy Abernethy

In partnership with Kathy Abernethy MClinSci RN



The menopause has become a very talked about topic, with celebrities sharing their experiences and openly discussing their symptoms. We are delighted to see 2018 kicked off with BBC radio 4 hosting discussions on Women's Hour covering all aspects of the menopause.

www.bbc.co.uk/programmes/p05tpw79



We too have experienced the impact of the menopause on our bodies and our lives and are keen to open up the discussion and understanding on how to deal with the menopause. Throughout our time working on Rejuvage, we have been asked a wide variety of questions from women who have struggled to get the advice they need.

Not wanting our readers to be left with questions and worries to add to the stress of everything else going on in your bodies, we put your questions to our very own menopause expert, Kathy Abernethy MClinSci RN. Kathy has a wealth of experience as Chairwoman of BMS, Author of 'Menopause - the one stop guide', and a Menopause specialist nurse.

www.kathyabernethy.com

"TESTOSTERONE IS AN ANDROGEN, OR SEX-RELATED HORMONE"

1. How can I get HRT

I'm 55 and going through the menopause. How can I get HRT?

Answer:

There are various ways to get HRT, you can either go to a private menopausal specialist, depending where you are based, or go to your GP and ask to try some HRT. Obviously your GP will be free, and the private route is normally around £120 for the initial visit plus your prescriptions (if you take the private ones) which are around £45.

2. Testosterone

My question pertains to testosterone replacement for women over 50. It's not for sex drive, it's for working out and abdominal fat that I seem unable to shed. I began perimenopause at 42 and am now 57, almost 58 (May 31, 1960). I am active, do my best to eat healthily and want some hormonal support. I haven't had a period in at least 3 years.

Answer:

Testosterone is usually prescribed for women with lower sexual desire and poor energy. It may improve muscle mass a little but is not given for that purpose. It is also most usually prescribed alongside oestrogen (HRT) as a combination therapy, with progestogen too if needed. As there are no licensed testosterone products, care has to be given to prescribe them within agreed guidelines.

3. Hysterectomy

Ten years ago I had a total hysterectomy. Over the years of hot flushes, night sweats, mood swings, yo-yo weight problems and feeling no longer in control of my own body I have finally come to the end of the tunnel that has no light. I need some help and advice on what to do now. I have been on every type of HRT tablet, patch and gel you can try and every possible combination of natural remedies but here I am still in the same place. So please does anyone have any ideas?

Answer:

I don't have a miracle answer I am afraid, but I do have several questions. Have you seen a specialist? If not ask your GP if there is one near you. A specialist will evaluate your symptoms, make sure nothing is being missed and perhaps consider psychological support too. You do not give your age, but if you are under 45 yrs, you may need doses of HRT that might seem high to women going through natural menopause around 50. Have you had hormone levels checked if on patch or gel, to see if you are a 'poor absorber'? Some women can use as much gel as they are advised and still not get a decent dose through the skin. So my advice is to try and find a menopause specialist near you who can try and unravel what is hormonal, what might be related to other issues and which HRT might work best for you.

"A HYSTERECTOMY IS A SURGERY TO REMOVE A WOMAN'S UTERUS"

"I DON'T HAVE HOT FLUSHES, I
HAVE SHORT PRIVATE VACATIONS IN
TROPICAL-LIKE CONDITIONS"



4. Hot Flushes

I am 49 and am experiencing hot flushes, it's hard to know if I am menopausal as I'm on the marina coil and haven't had a period in over 10 years. My main concern is my severe low mood and irrational mood swings that is affecting myself and the people around me. My doctor has recommended Citalopram which is an antidepressant, but I feel reluctant to go down this path, is there anything that you could recommend.

Answer:

At 49 years and experiencing hot flushes? You are probably in perimenopause, even though the Mirena is masking periods. Low mood and mood swings is sometimes helped by HRT and NICE Guidance in the UK says antidepressants should not be first line for this, unless your doctor thinks you are also depressed or could not use HRT for some reason. Perhaps think about whether you are ready to give HRT a try for this? CBT (Cognitive Behavioural Therapy) might help too.

5. Hot Flashes

I am soon to be 50, at the start of this year I have started to get hot flashes mostly at night. They are not unbearable, but I do have other symptoms of bloating and slight weight gain around the middle which is uncomfortable at times. Since last year I have had the bloating and have had tests done ovary scan etc... which were all fine, my periods were slightly erratic too, my last period was in December which is the longest time I have gone without one, the only other symptom I have is low libido. I am careful with my diet, in fact I am a health coach, so am aware this will help ease symptoms but am wondering how further I can support myself. I have been to the doctor to get my hormones tested they weren't very helpful and suggested I take an antidepressant for the hot flashes! The tests have come back normal. I am considering going privately to a specialist in bio-identical hormones as I like the idea of balancing out my hormones naturally rather than synthetically with HRT. I understand that HRT does have its benefits but have reservations about what it is made from, can you explain what it contains.

Answer:

HRT, which is licensed and regulated in the UK and prescribed both privately and in the NHS, is most usually derived from plant extract. There are one or two products that are produced differently but if you ask for plant-based products, there are plenty to choose from. It will contain oestrogen or progesterone or both. Be careful with the word 'bioidentical;' which means different things to different people. Licensed prescribed HRT is available as bioidentical, so mention that to your doctor if that is what you prefer. Some clinics offer tailor made or 'compounded bioidenticals'. These are unregulated in the UK and whilst they may be fine to use, there is no evidence supporting their safety or efficacy. Such clinics should not be claiming them to be safer than conventional HRT.



6. Depression

I have had a serious time to the point that depression and anxiety have become unbearable what can I do to recover as it is taking away my quality of life.

Answer:

I am sorry to hear this. Depression and anxiety may worsen due to hormonal influences and you really need the opportunity to discuss this with a kind doctor and explore whether you need treatment, either instead of, or as well as, HRT. HRT is not a treatment for depression, although it may improve mood; you may need to look at CBT, or after assessment, modern antidepressants. You may need to treat the depression/anxiety alongside other menopausal symptoms, if you have any. Please do seek help from your GP.

"NEXT MOOD SWING
IN 6 MINUTES

BE AFRAID...
BE VERY AFRAID"

"I HAVE GOT MY
LIFE BACK - IT IS
WONDERFUL!"

Answer:

A Mirena coil is usually a good choice as it controls bleeding really well. If used with HRT it should be replaced after 4-5 years, depending on if you are bleeding or not. If you continue to experience prolonged bleeding with a Mirena that has been in fewer than four years, you need to have a full assessment, including a discussion as to whether you are still on the best HRT for you. Perhaps ask your doctor if you need to see a gynaecologist to review your options.

7. HRT/Bleeding

I am in such a state at the moment. I have the mirena coil... but still bleed... I am on HRT but still bleed... it did stop for over 2 years which was an amazing relief. But now it's back heavier and worse than before... the flushes have calmed but the weakness to move some days is too much to bear... Dr. just doesn't listen... I am exhausted.

7. Herbal Products

Some women consider taking complementary and/or alternative treatments to HRT for their menopause symptoms. However, herbal products do not necessarily mean safe products, and many herbal medicines have unpredictable doses and purity. The MHRA (Medicines and Healthcare Products Regulatory Agency) have developed a certification trademark called Traditional Herbal Registration (THR). This means that these products are considered safe (when used as intended) and have a standardised dose.

There is a huge market of options available and products include red clover, black cohosh and St John's wort. However, many have very limited research or evidence to support their effectiveness and some are associated with significant health risks, especially if you have a history of breast cancer or are taking other prescribed medications. Some preparations of black cohosh, for example, have been shown to be associated with liver toxicity. These products are not currently recommended by the NHS for their use for the treatment of menopausal symptoms. If you do choose the herbal route, please consult an herbalist.



Herbal Home Remedies

Our Rejuvage community have shared their experiences and what products have helped them. Real reviews and practical advice is so valuable so we wanted to share the top tips!



Soy Isoflavones

What is it?

A dietary supplement which contains phytoestrogens called isoflavones. They mimic the activity of the hormone oestrogen in the body.

What's it for?

Hot flushes, night sweats and general menopause relief.

What our audience said

“My gynaecologist recommended Soya Isoflavones, and they worked for me... well my husband is still alive and if it hadn't been for those tablets it might have been a different story!” - Elaine

Menopace

What is it?

An advanced range of menopause supplements and vitabiotics designed by experts to provide effective nutritional support. It's the number one menopause product in the UK and has won eight Boots Vitamin Awards.

What's it for?

All common symptoms of the menopause. Although there is no evidence on some of their products.



Gabapentin

What is it?

Sold under its brand name Neurontin, among many others, it's a medication primarily for epilepsy but has also been shown to significantly improve certain menopause symptoms.

Gabapentin must be prescribed by a specialist.

What's it for?

Hot flushes and insomnia.

What our readers said

"I am taking gabapentin it has been helpful in reducing my hot moments during the night. Also talking to your partner and friends about the difficulties you are facing helps" - Susan

Black Cohosh

What is it?

A medicinal plant well-known as an alternative treatment for hormone-related symptoms. The remedy has been approved as a prescription alternative to HRT in Germany.

What's it for?

Hot flushes, night sweats, disrupted sleep, vaginal dryness, anxiety, mood swings.

What our readers said

"I know it sounds daft but for the hot flashes... Black Cohosh.... Holland and Barrett... I don't do herbal remedies but this stuff is awesome and I wish I'd known about it 5 years ago." - Jenny

Vaginal Moisturiser

What is it?

A non-hormonal treatment for vaginal dryness which provides long-lasting relief via a gradual-releasing applicator.

What's it for?

Vaginal dryness.

What our readers said

“We aren't dead ladies we are merely cocooned waiting to emerge as our true and beautiful butterfly selves! Get that lube out and change your mindset. One brilliant aspect of menopause is sex without contraception! Woo bring on the new me and the younger me pissed off and life becomes more 'Me' orientated!!”
- Trudy

Promensil Cooling Spray

What is it?

A handy handbag size spray that is useful if you suffer from sudden hot flashes. It's a soothing, cooling peppermint oil with menthol. The water-based spray reduces heat in the skin and leaves you less flushed. It also contains glycerine, which attracts moisture and helps keep skin hydrated and soft.

What's it for?

Hot flashes.



Acupuncture

What is it?

A traditional Chinese medicine which involves the practice of applying thin needles to specific points in the body to relieve pain and treat certain diseases.

What's it for?

Hot flushes and anxiety.

What our readers said

“Acupuncture has helped me to a large degree. After my first session, my flushes stopped for months. Gradually they crept in again so had it again and flushes stopped. I still get flushed but they're not as fierce. I am due to go back for more acupuncture which I know will alleviate them greatly. My practitioner combines Reiki with the treatment. It's been invaluable.” – Susie

POM Wonderful 100% Pomegranate Juice

What is it?

Many women find foods with high levels of natural plant oestrogens soothe symptoms of the menopause such as hot flashes and night sweats. It is not a replacement to HRT, but experts often suggest women trying to eat and drink foods that are rich in phytoestrogens and pomegranate contains is one of the richest sources of plant oestrogens plus Vitamin C which is a protective antioxidant.

What's it for?

A natural remedy for hot flushes.

Fish Oil

What is it?

Fish Oil is rich in Omega 3 essential fatty acids, which are very good for lubricating the whole body. The supplement has also been shown to alleviate hot flashes.

What's it for?

A natural remedy which can help treat joint pains and dry skin.

Omega 7 Supplement

What's it for?

Used to enhance softer skin and also helps with intimate dryness.



8. Exercise

Keeping fit and active!

There is evidence that healthy lifestyle changes and behaviours like quitting smoking, weight loss and regular exercise can improve symptoms of the menopause such as hot flushes and night sweats. Many women associate the menopause with a sense of loss and lack of control over your body, but taking control of your lifestyle can make you feel empowered and gain that control back.

Benefits of exercise in menopause

As well as a feeling of gaining control over your body, exercise has many benefits for women. To stay healthy the NHS recommends that adults do a minimum of 150 minutes of exercise each week, including moderate aerobic activity and strengthening exercises.



Preventing weight gain

Women tend to lose muscle mass and gain fat around the middle during menopause, so regular exercise helps prevent this.

Reducing the risk of disease

Exercise during and after menopause can help you maintain a healthy weight which helps prevent many types of cancer, including breast, colon and endometrial cancer. Excess weight can also increase the risk of heart disease and type 2 diabetes.

Strengthening your bones

Exercise can slow bone loss after menopause, lowering the risk of osteoporosis and fractures.

Boosting your mood

Adults who regularly exercise have a lower risk of depression and mental decline.

What exercise should I try?

Moderate cardio/aerobic activity

Aerobic activity helps shed excess pounds and makes use of your large muscle groups while keeping up your heart rate. As you enter menopause estrogen levels, which are thought to protect your heart, drop and women have an increased risk of heart disease.

Your options for cardio are limitless. Almost any moderate activity counts including brisk walking, jogging, biking, swimming or water aerobics. If you're a beginner, start with 10 minutes a day and gradually increase the intensity and duration over time. The aim is to do 30 minutes for 5 days a week and avoid sitting for long periods of time.

If you work out harder, so you are out of breath, then the general rule is you gain double the benefits so only need to workout for half the time. For example, run or skip for 15 mins instead of walking for 30 minutes.





Strength training

Strength training exercises will help to build bone and muscle strength and burn body fat. Osteoporosis risk skyrockets following menopause (estrogen is needed to help lay down bone) which makes strength training is especially important.

At home, you can use dumbbells and resistance tubing, and at the gym try weight machines or hand-held weights. Select a level or weight that is heavy enough to tax your muscles in 12 repetitions and move up from there as you get stronger. To get the benefits, do the repetitions until you are struggling to do more.

Good muscle-strengthening activities include lifting weights, doing exercises using your own body weight (like squats and sit-ups), heavy duty gardening, or lifting lots.

HIIT training

Whilst cardio is great for losing weight, sometimes it isn't enough to keep the weight off. This is especially in post-menopausal women. Workouts that offer short bursts of high-intensity training can be better at building muscle, building strength and helping you lose fat.

Plus, there is no need to go to the gym, with many great HIIT workouts on YouTube that will leave your muscles burning!

Yoga

Menopause can become stressful and stress can constitute to weight gain as well as making your mood worse. Yoga poses and meditation can help calm your anxieties and centre your mind. It can also help alleviate symptoms such as hot flushes, irritability and fatigue, whilst the stretching improves flexibility.

Exercise classes

The social aspect of joining a workout class can be vital for those who feel lacking in a support system. Exercise is a great way to meet people and can become a strong part of your social life. Joining a class like zumba helps burn calories and work muscles all while enjoying uplifting Latin music!

How do I stay motivated?

It's important to be realistic when it comes to exercising. Make your goals specific and attainable. Instead of just vowing to exercise more, set goals such as walking 30 minutes three times a week. By making goals realistic and specific, you will feel more motivated to reach them. Frequently update your goals, and team up with someone to keep you accountable!



9. Menopause at work

Should the support be the same as a pregnant woman?

There is a lot of discussion in the media with regard to the menopause, yet there is still little or no support for menopausal women in the workplace. Should they be catered for in the same way pregnant women are catered for?

How it affects work

The average age that menopause occurs is 51-years-old and the way it affects different women varies. Tiredness, hot flashes, tearfulness, confusion, mood swings and a loss of confidence which can last between a few years and a decade. Obviously if you are at work then these can hinder your work life and that of your colleagues.

Discussing the menopause with colleagues, especially those younger or of the opposite sex can also be embarrassing as there is still a stigma about it and it's not necessary something you want discussed in the office! Every woman will experience it differently so there is no one-size-fits-all solution. Not all women will want to talk about it at work and that is fine. The main thing they need is understanding and flexibility and an awareness that the support is there if needed.



10. Kathy Abernethy Coombe Menopause Clinic

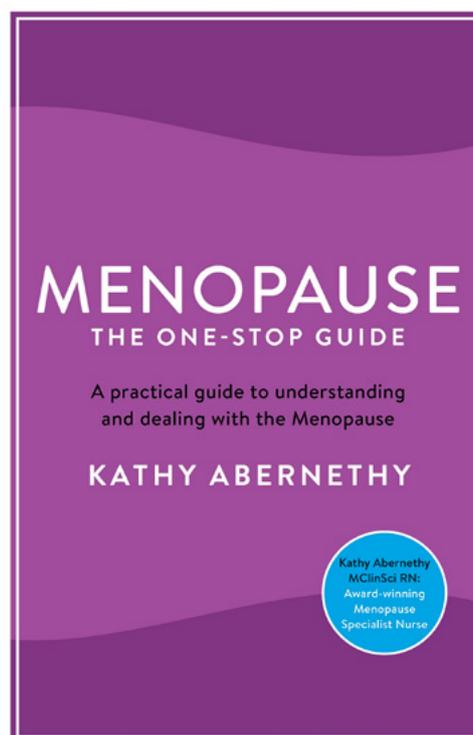
www.privatemenopauseclinics.org

Kathy has extensive clinical expertise as a Menopause Specialist, regularly seeing and advising women on all issues relating to menopausal health. An Independent Prescriber with a master's degree in Community Gynaecology and Reproductive Healthcare, Kathy is Chair of the British Menopause Society, the professional society for healthcare practitioners. Director of 'The Menopause Course' an educational initiative for nurses, designing and running study days, courses and events relating to menopause. Published author in nursing and lay press.

For women, Kathy offers private consultations at a South West London clinic and workplace sessions to improve understanding of the effects of menopause on home and work.

Kathy is a regular speaker to medics, nurses and other health professionals as well as at women's events and is a contributor to books and magazines. She is author of 'Menopause: The One Stop Guide', a guide to dealing with the menopause.

If you have a menopause question, we are happy to help. www.rejuvage.com





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