



MENOPAUSE

Updates and Treatment Options
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Goals for today

1

Understand what menopause is

2

Work to decrease stigma associated with menopause

3

Discuss updates related to menopause

4

Understand treatment options

Menopause

- A **natural, normal** process of aging
- Not a disease or disorder
- The stage when the ovaries completely stop producing reproductive hormones
- There are no monthly periods for consecutive twelve months
- When does menopause occur?
 - Most women experience menopause around age 51
 - A small number early as age 40 or as late as late 50s
 - Rarely, menopause occurs after age 60
 - <40, considered to be abnormal or premature menopause

- Also known as menopause transition
- Usually lasts around 7 years leading up to menopause
- Most often begins between ages 45-55
- Change in menstrual cycles and hot flashes

Perimenopause

Anna's story

- Anna is 52. She's excited to be starting a new phase of her life as her children leave home and she has more spare time for her other interests. She's looking forward to traveling and taking a pottery class.
- But recent health changes have been getting in the way of her plans. Anna has been having irregular menstrual periods for the past few months. Now, she's having **hot flashes** and **trouble sleeping**. The hot flashes, which cause her body and face to heat up quickly and uncomfortably, are waking her up several times a night. Anna is tired and irritable from **lack of sleep** and fed up with the hot flashes. She is ready to **talk with her doctor** about finding some relief.



Causes of menopause?

Natural decrease in the production of estrogen and progesterone (reproductive hormones that regulate menstrual cycles)

Complete hysterectomy (surgery)- when uterus and ovaries are removed and can cause menopause

Menopause can be caused due to chemotherapy or radiation therapy in patients with cancer

Premature Menopause- ovaries fail to produce normal levels of reproductive hormones

Symptoms

Vary from person to person

Irregular menstrual cycles

Heavy bleeding might occur for a day or two

Excessive sweating during night

Hot flashes

Vaginal dryness, itching and pain during sexual intercourse

Frequent urinary tract infections

Mood swings

Fatigue

Weight gain due to uneven fat distribution



Anna: a case study

- Anna has seen her PCP and they inform her that she is experiencing perimenopausal symptoms
- Anna asks, “How do you know? Is there a test to be sure?”

How is menopause diagnosed?

- The absence of menstrual periods for a year confirms menopause
- **UPDATE:** Hormone variations are common, and it is difficult to diagnose menopause based on hormonal levels
- Your provider may not order lab tests like they once did
- For certain circumstances, your doctor may recommend blood tests to check your level of:
 - Follicle-stimulating hormone (FSH) and estrogen (estradiol), because your FSH levels increase, and estradiol levels decrease as menopause occurs
 - Thyroid-stimulating hormone (TSH), because an underactive thyroid (hypothyroidism) can cause symptoms similar to those of menopause

Anna: a case study

- Anna understands what her PCP has told her but wants more information about how to control her symptoms
- She remembers her mother being on “hormones” a long time, but she knows there are risks too
- She asks, “What can I do now?”



What are updated treatment options?

- Nutrition
- Self-care
- Hormone therapy
- Other medications:
 - Anti-depressants
 - Anti-convulsants

Nutrition: Eat this, not that

“EAT THIS” LIST

- Calcium rich foods such as milk, fish, broccoli, and legumes
- Lean protein, poultry, eggs, leafy green vegetables, nuts
- Fiber from whole-grain breads, cereals, pasta, rice, fresh fruits, and vegetables
- Fruits and vegetables
- Drink plenty of water

“NOT THAT” LIST

- High-fat foods found in fatty meats, whole milk, ice cream, and cheese
- Limit sugar and salt intake
- Avoid spicy foods, caffeine and alcohol



Self-care

- Always talk to your provider before starting any lifestyle change
- Healthy diet and exercise may help relieve the symptoms
- Practice yoga - helps in regulating your body rhythm
- Meditation and mindfulness
- Strengthening pelvic floor muscles with Kegel exercises
 - Pelvic floor physical therapy



UPDATES- Hormone therapy



- Hormone therapy is an effective treatment option for relieving menopausal hot flashes, but there are risks
- If you still have your uterus, you'll need progestin in addition to estrogen
- Estrogen also helps prevent bone loss
- ***RISKS*** - Long-term use of hormone therapy may have some cardiovascular and breast cancer risks so short course therapy is recommended if this therapy is needed
- Vaginal estrogen helps to relieve vaginal dryness
 - Vaginal cream, tablet, or ring
 - Helps with painful intercourse, and some urinary symptoms

Updated medication options



- Low-dose antidepressants:
 - Help to control mood swings and hot flashes
 - Usually recommended if the symptoms interfere with daily life
 - Great alternative to hormone therapy
 - Fluoxetine (Prozac), Paroxetine (Paxil), Sertraline (Zoloft), Venlafaxine (Effexor)
- Anticonvulsants: Helps to reduce extreme hot flashes. Given only if necessary
 - Gabapentin

Natural Treatments



- Many natural treatments and supplements are available
- Some can interact with other medications or may be unsafe to take with certain medical conditions
- Check with your PCP prior to starting any treatment

Anna: a case study

- Anna has now been a year without her menstrual cycle and knows that she is postmenopausal
- She is having different symptoms which include vaginal dryness and urinary incontinence
- Anna goes to her provider for help

Postmenopausal complications

Heart and blood vessel
(cardiovascular) disease

Osteoporosis- bone density loss

Urinary incontinence

Sexual function- vaginal dryness and
libido decrease

Weight gain- slowing metabolism

See your GYN or PCP to screen for and
monitor for these conditions

Anna: a case study



- Anna has started on vaginal estrogen therapy
- She knows that menopause is a normal part of aging
- She has started yoga and she changed her diet
- Anna feels empowered because she is managing her menopause symptoms



QUESTIONS AND ANSWERS

Feel free to put your questions in the
chat or unmute to ask

ParTNers Health & Wellness Center Reminders

- The ParTNers Health & Wellness Center

- Downtown Nashville on the 3rd floor of the WRS TN Tower
- State and higher education employees enrolled in the State Group Health Insurance Plan
- Parking available!! (with an appointment)

- The center provides the following healthcare services to eligible employees (in person visits or video telehealth available):

- Sick and injury visits
- Biometric screening and preventive screenings/physicals
- Allergy shots and certain immunizations
- Chronic condition management
- Employee assistance counseling services
- Onsite health coaching



Reach out!

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