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THE MENOPAUSE

From the Greek Word meaning pausis (cessation) and the mensis meaning month.

Average age of onset 50-52 years.

Symptoms of the menopause may often precede the final period by years.

A lady is potentially fertile and therefore at risk of pregnancy until one year after her last period.

There is no accurate blood test to predict if indeed a person is menopausal or indeed when the last period might occur.

The Diagnosis is largely based on symptoms i.e. how you feel / change in periods etc.

Classical Symptoms include some or all !! of the following:

Physical - night sweats, hot flushes, irregular and possibly heavier periods, sluggishness, hair and skin changes, joint complaints, bladder complaints.

Emotional - depression, mood swings, anxiety, tiredness, memory loss, concentration loss, loss of sexual drive, pms type symptoms.

Things to consider :

- Diet and exercise
- Contraception
- Health Screening / general medical examination.
- Hormone Replacement Therapy (HRT)

What is HRT and what is the evidence?

Replacing the FALLING levels of the women's own oestrogen hormone with small doses of oestrogen in a tablet / patch .

There has been confusing and controversial evidence over the years in relation to the relationship between Breast cancer risk and HRT.

In essence the current evidence supports the following :

- Use of HRT before the age of 50 carries no additional risk of breast cancer.
- Use of HRT between 50-54 is linked to a small additional risk of breast cancer.
- HRT use over age 54 is linked to an increased risk of breast cancer going from 30/10,000 women who never used it to 38/10,000 women.

HRT and the Circulation :

Women with known angina, previous heart attack etc. should avoid HRT as should those more than 10 years past the menopause.

Women with a very strong family history of Cardio-vascular disease should have some screening tests performed in the menopausal years (Blood pressure , ECG , Cholesterol , Glucose etc)

Women under 60 may in fact derive some cardiac protection from HRT but further studies need to be done.

HRT and Thrombosis (Blood clot)

In the first year or two from starting HRT the risk of getting a clot is slightly elevated.

HRT should be avoided in women with a past history of a clot especially if it occurred around pregnancy or while on the pill.

In Summary - HRT is the most effective medicine for hot flushes and vaginal dryness.

Every woman needs to be assessed individually for her own risk factors before prescribing HRT and the lowest effective dose should be used for the shortest time.

There are many different types of HRT which can be given in various different ways- eg tablet , patch , gel implant etc .

Some preparations cause a monthly bleed and some do not.

HRT Alternatives :

Of note there is a lack of large reliable trials to support the benefit of alternative products to HRT to control menopausal symptoms.

For Hot Flushes :

Black Cohosh , Mexican Yam , Soya etc.

The Pill (COC) , Dixarit , Anti-anxiety medications (SSRIs).

Emotional symptoms :

Antidepressants , behavioural / counselling therapies.

Vaginal Dryness :

KY jelly, KY silk, Lubricants, Replens vaginal moisturiser,

Osteoporosis :

Calcium and Vitamin D, Diet and moderate weight bearing exercise, smoking cessation , Bisphosphonates etc (Ask your Doctor).

It is highly recommended that a women makes the time and invests in her own good health!

A general check up is highly recommended when the menopause arrives in order to discuss the symptom, be examined and assess risk of cardiac disease, osteoporosis etc.

Please remember you may still be fertile right up until one year after your last period - so contraception may still need to be considered.

A GOOD WEBSITE:

www.menopausematters.co.uk

(Information above compiled from data available September 2013)