



Women's Wellbeing

Secrets of the Menopause

A personal guide for women

Introduction written by Dr Hilary Jones



Introduction

The menopause is a time when your body will go through a number of changes that can have a dramatic impact on the way you look and feel about yourself. Some women cope with these changes, whilst for others it can be a distressing time of their lives. Hot flushes, night sweats, loss of libido, uncomfortable or painful love making, or just the realisation that child bearing years are now over can cause many women to feel anxious or depressed.

There are a huge range of treatments available now that can help women to cope with the menopause and I would urge all women to talk to their doctor or menopause nurse about their symptoms and to seek advice on what treatment options may be most suitable for them.

This booklet is part of the Women's Wellbeing campaign which aims to inform women about some of the lesser known symptoms of the menopause. I hope that the information in this booklet, together with additional information which is on the website www.menopause-secrets.co.uk will help you to seek appropriate treatment and to embrace this time of your life .

Dr. Hilary Jones

Symptoms of the menopause

Many symptoms of the menopause – hot flushes, night sweats and worries about osteoporosis – are well recognised and openly discussed. Women’s magazines and daytime chat shows frequently offer helpful advice, from complementary health supplements available from your local supermarket, to hormone replacement therapies from your GP.

There are other symptoms of the menopause, however, that are less well recognised. Half of all women are affected by vaginal dryness after the menopause, for example, but only around 10 per cent of these will seek help¹. It’s true that vaginal dryness is not something that is easy to discuss with your friends over coffee, and it may even take some courage to make an appointment with your doctor. However, treatment for vaginal dryness - as well as for other intimate problems - is not only readily available but simple to use and quickly effective.

Local oestrogen therapy, where oestrogen in the form of vaginal tablets, creams, or vaginal rings, is delivered directly to the vaginal area, can be extremely effective at relieving dryness and can be prescribed by your doctor.

Medical terminology for problems faced by so many women can be confusing. Vaginal dryness, for example, is described as ‘vaginal atrophy’ while other symptoms associated with the menopause are referred to as ‘urogenital’. In this booklet we aim to de-mystify some of the medical terms, explain why you might be experiencing discomfort and help you to seek immediate and appropriate help.

What is the menopause?

The menopause means, literally, the end of a woman's 'menses' or periods. For most women this happens at between 45 and 55 with the average age of the last menstrual period in the UK being around 51.

What happens after the menopause?

After the menopause the ovaries cease to produce the main female hormone, oestrogen, and its absence can produce a wide range of symptoms.

In the short-term many women experience hot flushes and night sweats. In the long-term, lack of oestrogen may cause other problems such as osteoporosis (where bones become thinner and more likely to break).

Most women are aware of these problems and feel comfortable discussing them with their friends, family and – if they are worried – their healthcare providers.

Little known symptoms of the menopause

Some changes that women experience during and after the menopause are less well known, possibly because they cause embarrassment and are not discussed openly. These 'urogenital' problems include vaginal discomfort, problems with pelvic floor muscles and urinary incontinence in the years after the menopause.

Although urogenital problems are very common as well as perfectly normal, many women find it hard to discuss them, even with their closest friends, let alone to ask their doctor or nurse for help. Many women decide to live with a problem rather than face the embarrassment of discussing it and seeking help.

Vaginal dryness

Going through the menopause should not mean an end to a fulfilling sexual relationship. However, vaginal dryness and soreness caused by a lack of oestrogen after the menopause affects around half of women¹. Vaginal dryness, where less moisture is produced by the glands in the vagina, means the vaginal lining is dryer and more likely to be damaged. The skin of the vaginal lips ('vulva') and of the vagina itself also becomes thinner and less elastic.

Nearly a third of women have been unable to have sex due to vaginal discomfort.¹

Over a third of women think that vaginal discomfort during sex is caused by a disease or infection.¹



Vaginal dryness

Sometimes labelled 'vaginal atrophy', vaginal dryness is one of the most common symptoms of the menopause. It can be painful and sore, especially when rubbing against underwear or during sex and it can also mean you are more likely to suffer from vaginal and urinary tract infections. Many women also dislike the outward changes in the appearance of the vulva lips as they lose their plumpness.

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The protective covering of the clitoris is also often affected by the changes in the collagen of the vulval skin, and the clitoris itself can become sore. Sometimes other skin conditions can develop if the dryness is not treated.

Some women find these changes make them uncomfortable but feel too embarrassed to seek help. Instead, they avoid sex altogether. However, if dryness is not treated it can also lead to problems including leaking urine (incontinence).

The lack of oestrogen also affects the kind of discharge produced by the vagina and makes it more alkaline. This change affects the balance of the bacteria that are naturally present in the vagina and can reduce the levels of 'good' bacteria. For some women, this means that they start to produce a watery, discoloured and slightly smelly discharge. This often leads to a burning sensation around the vagina as well as irritation. Some women wrongly assume this to be an attack of thrush and buy over-the-counter remedies which can make the problem much worse. The change in discharge can sometimes make women think they have contracted a sexually transmitted infection (STI).

What you can do about vaginal dryness

Many people cannot bring themselves to go to the doctor to admit that they no longer have sex because it is too painful.

Recognising that vaginal dryness is normal and much more common than you might imagine is the first step to helping yourself.

Talk to your doctor, who will recommend a treatment to suit you. Treatments include tablets, which are inserted directly into the vagina using a disposable applicator similar to a tampon but much smaller. Other options include vaginal cream, which is inserted using a re-usable applicator, or a vaginal silica ring, with a central core containing a low dose of oestrogen, which is inserted into the vagina with the help of your Doctor or nurse. The vaginal ring can be left in place for up to three months.

Over three quarters of women surveyed, who experienced discomfort during sex, said that they did not seek help.¹

Using a cream, vaginal tablet or vaginal ring can start to ease vaginal dryness as early as a week after the first treatment.

It's also a good idea to avoid using soap around the vaginal area – choose a soap-free product such as aqueous cream instead – and use a vaginal lubricant before sexual intercourse if necessary.

Other symptoms of the menopause

Vaginal dryness is not the only symptom of the menopause that can be embarrassing and difficult to discuss. Other problems can be caused by weak muscles in the 'pelvic floor', the area under the pelvis. The muscles and ligaments of the pelvic floor (which should normally support the womb, bladder and other organs like a trampoline) are also oestrogen-sensitive, and changes in skin tissue because there is less oestrogen after the menopause can have a profound effect on the support mechanisms of the pelvic floor.

Pelvic floor

Some women become aware of 'ballooning' or bulging of the walls inside the vagina. Others simply experience a generalised pelvic dragging sensation. This may be caused by weakened muscles in the vagina and can be helped by special exercises.

As they get older many women may find they have problems with their urinary tract. Some suffer from genuine stress incontinence, which is leaking of urine on coughing, sneezing or jumping, for instance. Others experience 'urge' incontinence, where they have difficulty 'holding on' once they sense that they need to empty their bladder. They may also leak and start to pass urine before they can get to the toilet.

What you can do about pelvic floor problems

Many women in their 40s and 50s simply don't tell anyone that they have to wear sanitary protection to be able to exercise or go to the gym.

You can ask your doctor to refer you to a pelvic-floor physiotherapist, who can help you to learn exercises to strengthen your muscles and train your bladder.

More information

More information is available from the following organisations:-

Novo Nordisk Ltd

www.menopause-secrets.co.uk

Menopause Matters

www.menopausematters.co.uk

Women's Health Concern,

PO Box 2126, Marlow, Bucks, SL7 2RY

Helpline: 0845 123 2319

www.womens-health-concern.org

Reference

1. Women's Wellbeing Campaign, Pure Profile on-line survey. 1,000 women over 50 surveyed on menopausal symptoms.

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