Bristol Menopause
& Wellwoman Clinic

Understanding POI

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Premature Ovarian Insufficiency (POI)

Primary ovarian insufficiency (POI) is a condition where the ovaries stop functioning normally before the age of 40. This results in reduced production of important hormones like oestrogen and leads to irregular menstrual cycles, and early menopause symptoms.

POI affects around atleast 1 in 100 women under 40 and may significantly impact fertility, emotional wellbeing, and long-term health.

Unlike natural menopause, which usually happens around age 50, POI can occur much earlier, sometimes in the teens or twenties, making early recognition and support especially important.

Causes of POI

POI can have many different causes, though in many cases no specific reason is found. Known causes include:

- **Genetic factors**, such as Turner syndrome, Fragile X syndrome, or specific gene mutations
- **Autoimmune disorders** where the immune system mistakenly attacks ovarian tissue (e.g. autoimmune thyroid disease, Addison's disease)
- **Medical treatments** like chemotherapy, radiotherapy, or surgery that damage the ovaries
- **Viral infections**, such as mumps, though this is rare
- **Idiopathic cases**, where no identifiable cause is found

Symptoms of POI

The symptoms of POI are similar to those of natural menopause, but they occur earlier and can vary widely in how they are experienced.

Common symptoms include:

- Irregular or missed periods
- Hot flushes and night sweats
- Vaginal dryness or discomfort during sex
- Low mood, anxiety, or mood swings
- Poor sleep and fatigue
- Reduced libido
- Memory or concentration issues ("brain fog")
- Difficulty getting pregnant

Because these symptoms can be mistaken for other conditions, early medical evaluation is key.

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Diagnosis of POI

Diagnosis involves reviewing your symptoms and carrying out blood tests to assess hormone levels. Tests may include:

- Follicle-stimulating hormone (FSH): Elevated FSH levels on two occasions (6 weeks apart) can indicate POI
- Oestrogen and AMH levels: Low oestrogen and Anti-Müllerian Hormone suggest reduced ovarian reserve
- Pelvic ultrasound: Is sometimes used to examine ovarian size and presence of follicles
- Thyroid function tests: May be taken to check for related autoimmune conditions

Treatment Options

While POI cannot be reversed, treatment focuses on relieving symptoms, supporting fertility (if desired), and reducing the risk of long-term complications from low hormone levels.

Hormone Replacement Therapy (HRT)
HRT is often recommended up to the age of natural menopause and can include:

- Oestrogen therapy to relieve symptoms like hot flushes and vaginal dryness and protect against bone loss and heart disease
- Combination therapy with progesterone for women with a uterus to reduce the risk of endometrial cancer

Lifestyle Adjustments
Maintaining a healthy lifestyle can support your overall wellbeing and reduce symptom severity:

- Eat a balanced diet rich in calcium and vitamin D to support bone health
- Engage in regular weight-bearing exercise, such as walking, yoga, or resistance training
- Stop smoking and limit alcohol and caffeine, which can worsen symptoms
- Practice stress reduction techniques like meditation or deep breathing
- Improve sleep hygiene by following a regular bedtime and limiting screen time before bed

Fertility and POI

POI significantly reduces fertility due to the reduced number and function of eggs. However, some women may still occasionally ovulate and contraception may still be required.

Women wanting to conceive may require support with fertility options. This may include:

- Fertility counselling to understand your options and support emotional wellbeing
- In vitro fertilisation (IVF) using donor eggs, which is often the most effective route to pregnancy for women with POI

Emotional Support and Mental Wellbeing

Receiving a diagnosis of POI at a young age can be emotionally challenging. It's common to feel grief, frustration, or worry about future fertility and health.

Support is available:
Counselling can help you manage emotional responses and plan for the future
Support groups provide a sense of connection and shared understanding with others who have POI.

Discussing your diagnosis with trusted friends and family can also help reduce feelings of isolation

Long-Term Health Considerations

Oestrogen plays a protective role in several body systems. Without treatment, women with POI may be at increased risk of:

- Osteoporosis, due to decreased bone density
- Cardiovascular disease, as oestrogen helps maintain heart and blood vessel health

Ongoing medical monitoring, including bone density scans and cardiovascular risk assessments, is important.

Living Well with POI

Although POI presents unique challenges, many women go on to lead full and healthy lives with appropriate treatment, lifestyle changes, and support.

Understanding your diagnosis, exploring your options, and working closely with your healthcare team can empower you to manage the condition effectively.

5-10 of women with POI will conceive naturally.

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