



# Bristol Menopause & Wellwoman Clinic

Helping make menopause a positive experience





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## Menopause

This is the change that women go through as their ovaries stop working and usually happens between the ages of 45-55. However, it can happen below this age and is known as an early menopause. If these changes happen below the age of 40 it is known as Premature Ovarian Insufficiency (POI).

The ovaries function is to produce eggs for reproduction and also to release the sex hormones, oestrogen, progesterone and testosterone. Oestrogen is especially important for our skin, bones, vaginal and mental health.

This process does not happen overnight, although menopause is actually defined as the day your periods stop. This is one day in time and does not explain what happens in the lead up to this day or afterwards.

It is the decrease in our Oestrogen that causes so many unpleasant side effects.

### It is a period of transition

## Peri Menopause

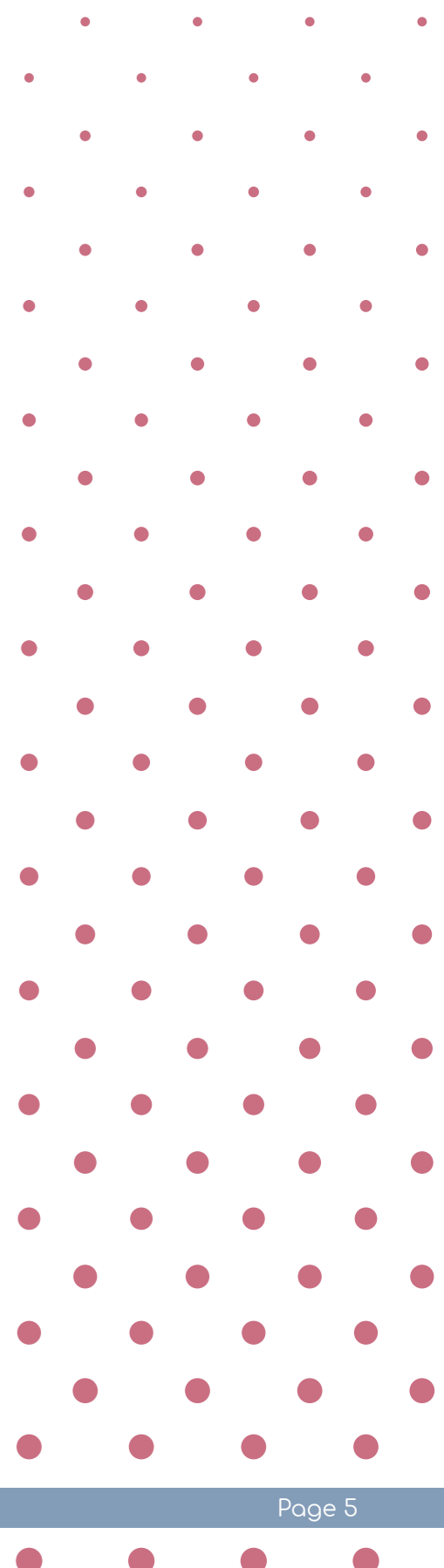
This is the time leading up to the final period and for many women this is when they get the worst symptoms. This is due to the eggs in the ovaries not being produced as often and can lead to irregular periods, heavier bleeding than usual as well as hot flushes and mood swings or increase in anxiety. This usually happens in the 40's but the changes can be seen as early as the 30's.

The average duration of the peri menopause is 4 years but can last anything up to 15 years. Symptoms vary significantly from woman to woman.

## Post Menopause

In women under 50 post menopause is 2 years after their final period has taken place. In women over 50 this is 1 year after their last period. Some women find that their symptoms ease off after this time. However, for others, symptoms last well into their 60's or even 70's but this is thought to affect only 10% of women.

Lower Oestrogen levels cause some long term changes in the body which increase the risk of Osteoporosis, heart disease, bladder problems, and vaginal dryness, and other urogenital problems, as well as increasing the risk of weight gain and insulin resistance.



## Immediate Effects of Oestrogen Deficiency

- Hot flushes
- Night Sweats
- Palpitations
- Headaches
- Loss of confidence
- Depression
- Irritability
- Forgetfulness
- Brain fog
- Panic attacks
- Inability to concentrate

## Medium Term Effects of Oestrogen Deficiency

- Vaginal Dryness
- Dyspareunia (painful intercourse)
- Vaginitis
- Urge/Stress incontinence
- Urinary Frequency
- Pain passing urine
- Urine Infections
- Tissue Atrophy leading to dry skin, itchy skin and muscle aches and joint problems.

## Long Term Effects of Oestrogen Deficiency

- Cardiovascular Disease (Heart Attack, Stroke, Angina)
- Osteoporosis
- Dementia and loss of cognitive function

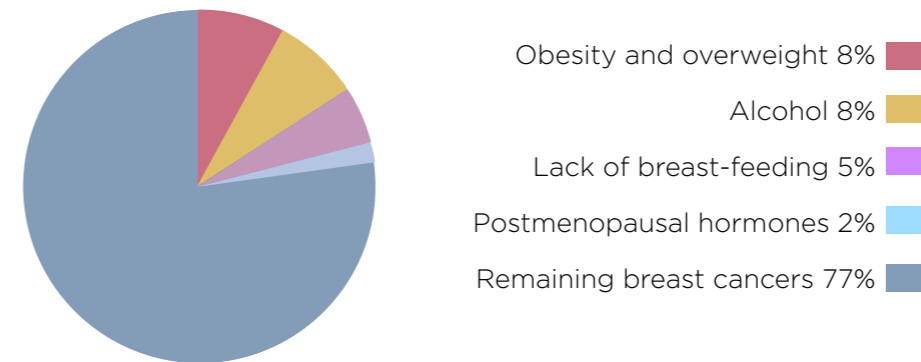


# Managing The Menopause

## Hormonal Replacement Therapy (HRT)

It is estimated that only 10-15% of women in the UK use HRT because following the Women Health Initiative (WHI) study in the early 2000's the results of which scared many people including healthcare professionals, HRT prescribing was stopped. We now understand that much of this study was flawed and we have greater understanding of the role HRT plays during the menopause transition.

### The percentage of breast cancers diagnosed annually in the UK attributable to lifestyle factors



### The biggest killer of women at 60 is actually heart disease

Due to the unpleasant side effects of Oestrogen deficiency (which the menopause is!) and the increased risk in later life of long term poor health, for most women HRT is the obvious answer.

Here at Bristol Menopause we use Body Identical HRT which means it is identical in structure to the hormones we produce in our bodies ourselves.

These are usually:

**Oestradiol** - in the form of gels patches or sprays.

**For certain women it may be necessary to use oral HRT.**

**Micronised Progesterone**

**Testosterone** - Testogel, Tostran or Androfeme.

There is no increased risk of breast cancer in the first 5 years of using Body Identical HRT (or if below the age of 51 no increased risk until 5 years after reaching the age of 51).

## Side Effects

The side effects of these are usually minimal and settle down within a few weeks of use.

The main side effects of taking oestrogen include:

- Bloating
- Breast tenderness or swelling
- Swelling in other parts of the body
- Feeling sick
- Leg cramps
- Vaginal bleeding

The main side effects of taking progestogen include:

- Breast tenderness
- Swelling in other parts of the body
- Headaches
- Mood swings
- Vaginal bleeding
- Acne
- Depression
- Abdominal pain

If these symptoms have not settled by the end of the first month or cycle of use please contact us.

We are all different and react to treatments in different ways. It is not unusual for the first treatment option not to be effective for you. We will therefore work together to try different regimes until we get the best option for you.



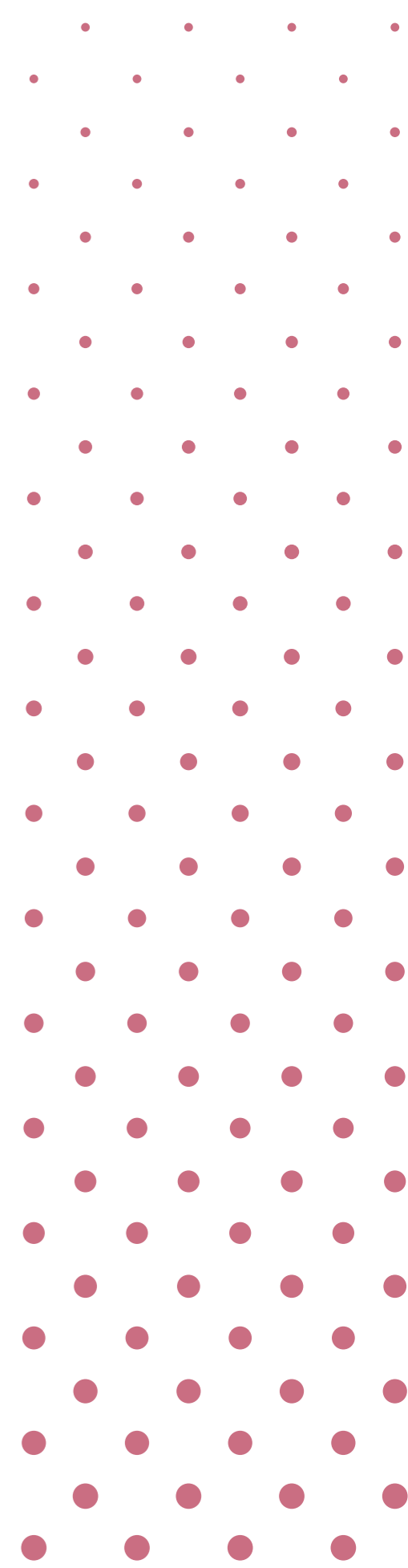
## What HRT and Why?

### Combined (Oestrogen and Progesterone) Natural Menopause

- This is because the Womb lining needs protecting.
- Oestrogen given alone can cause build up and thickening of the womb lining which could lead to Endometrial (womb) cancer.
- The progesterone thins out the lining of the womb and prevents the endometrium thickening.
- If periods are still happening this will be sequential. You need to take TWO Utrogestan for 12 nights of each month. (This will be 15 days after the first day of your period).
- No longer having periods this will be continuous. You need to take ONE Utrogestan every night.
- Sometimes it may be necessary to use a long cycle regime of Oestrogen and progesterone. This means that Utrogestan is taken for 14 days every 13 weeks. It then produces a withdrawal bleed. However, it is not considered enough progesterone to protect the endometrium and so we will only use it if women do not get on with any progesterone preparations.
- There is always the option of the Mirena coil which protects the endometrium and acts as contraception. If you would like more information on the Mirena coil please contact us as we can provide this for you.

### Oestrogen - post hysterectomy (surgical menopause)

- There is no womb lining to protect.
- Replacing Oestrogen alone.
- However, this can be more complicated to manage if ovaries have been removed as well as the majority of hormones have been removed with the ovaries.
- Testosterone Replacement will be necessary.



## Testosterone Replacement

- Testosterone is actually our biggest hormone (34%).
- As we age it slowly reduces.
- As our ovaries stop working efficiently it means that testosterone also drops by up to 50%.
- HRT should be initiated first for 3 months and then if libido remains low, energy levels down and mood low then testosterone should be added.
- Women use a 1/10th of what men are prescribed (5 mg daily as opposed to 50 mg for men).
- Bloods for testosterone levels should be checked before commencing testosterone replacement and 3 months after starting testosterone. Thereafter checks should be yearly.
- We can take bloods for you, so please contact us for more details.

When starting a new HRT regime it is not unusual to get some bleeding in the first 3-6 months. This is due to the change in hormone levels. Please let us know so we can reassure you of the steps to take.

## Healthy Lifestyle Menopause Tips

### Nutrition

A high fibre diet with good quality protein and plenty of water is the ideal diet (Mediterranean).

Carbohydrates should be complex - wholegrain including root vegetables, nuts and seeds.

- Eat the Rainbow - have as many different coloured fruit and veg as you can - it should fill half the plate. This helps the gut biome and having this behaving itself is important in our hormone health.
- Include 1 to 2 servings of beans, lentils or hummus to your daily diet - these contain plenty of fibre and are full of protein and micronutrients.
- To add flavour to your food use a wide selection of herbs and spices these are rich in anti-oxidants.
- Keep processed and sugary foods to a minimum because these can cause blood sugar changes which can increase night sweats and hot flushes as well as increasing the risk of developing diabetes.
- Don't forget oily fish in the form of mackerel, salmon and sardines - but only fresh tuna. Canned tuna does not contain any Omega 3 oils. These are cardio-protective.

A plate of food should look like:

- 1/2 non-starchy, colourful veg
- 1/4 Complex carbohydrates (eg potato, pasta, rice, sweet potatoes)
- 1/4 Protein (eg meat, fish, chicken, tofu)



## Exercise

Exercise can help alleviate and reverse some of the worst physiological side effects of the menopause, some is good, more is better.

Exercise improves sleep, helps maintain a healthy weight and reduces the risk of many diseases.

Exercise can help manage stress and improve your quality of life.

### Exercise - How to get started....

You don't have to be an Olympic athlete to be fit.

Start with 10 minutes of brisk walking twice a day and you are nearly there!

Counting steps is an easy way to get some exercise in - use your Google Health on Android phones and Apple Health on iPhones - even getting 2,500 to 4,000 steps can help.

Try to build up to 7,500 daily.

The best exercises for:

#### Mood

- Yoga
- Jogging
- Exercising with friends
- Dancing

#### Flexibility

- Pilates/ yoga
- Swimming
- Tai chi, judo or karate

#### Strength

- Weightlifting - good for metabolism too
- Resistance training
- Circuits

#### Heart Health

- Jogging/running
- Cycling
- Walking in particular hill walking
- Tennis

**Aim for at least 150 minutes a week.**

## Vitamins and Supplements

**Vitamin B** - Helps with stress management, supports oestrogen production and the nervous system and can help weight management.

**Vitamin D** - A hormone rather than a vitamin that helps in the absorption of calcium, boosts mood and helps immunity. A lack of Vitamin D can lead to hormone imbalance.

**Magnesium** - Activates vitamin D, helps improve mood, improves sleep, calms stress and aids muscle and nerve function.

**Probiotics** - Increase good bacteria in gut, balances mood, increases immunity and can help bloating and mood swings in menopause — can help oestrogen to work better.

**Omega 3 Fats** - Anti-inflammatory effects on heart, bones and the brain. Can help with skin and hair and can help reduce mood swings.

**Zinc** - Can help in weight maintenance.

**Ashwagandha** - Can help reduce stress and anxiety as well as helping improved sleep. There is evidence to show that it can also help reduce hot flushes and night sweats.

**Saffron** - Can help reduce low mood.

**Collagen** - Can help with bone mass density and weight loss as well as supporting skin through menopause.

**Hyaluronic acid with collagen** - Can help reduce the signs of aging.

**These also make a difference to your future health and can be taken with HRT.**

After much research including patient feedback we have developed our own range of menopause supplements. These are multivitamins which removes the need to buy multiple different supplements.

They are a unique combination that uses the optimum dose of each mineral and vitamin to ensure the maximum effectiveness to support your menopausal symptoms.

They contain no bulking or caking agents and they are vegan.

These can be obtained at [menopausebyhazel.com](https://menopausebyhazel.com)

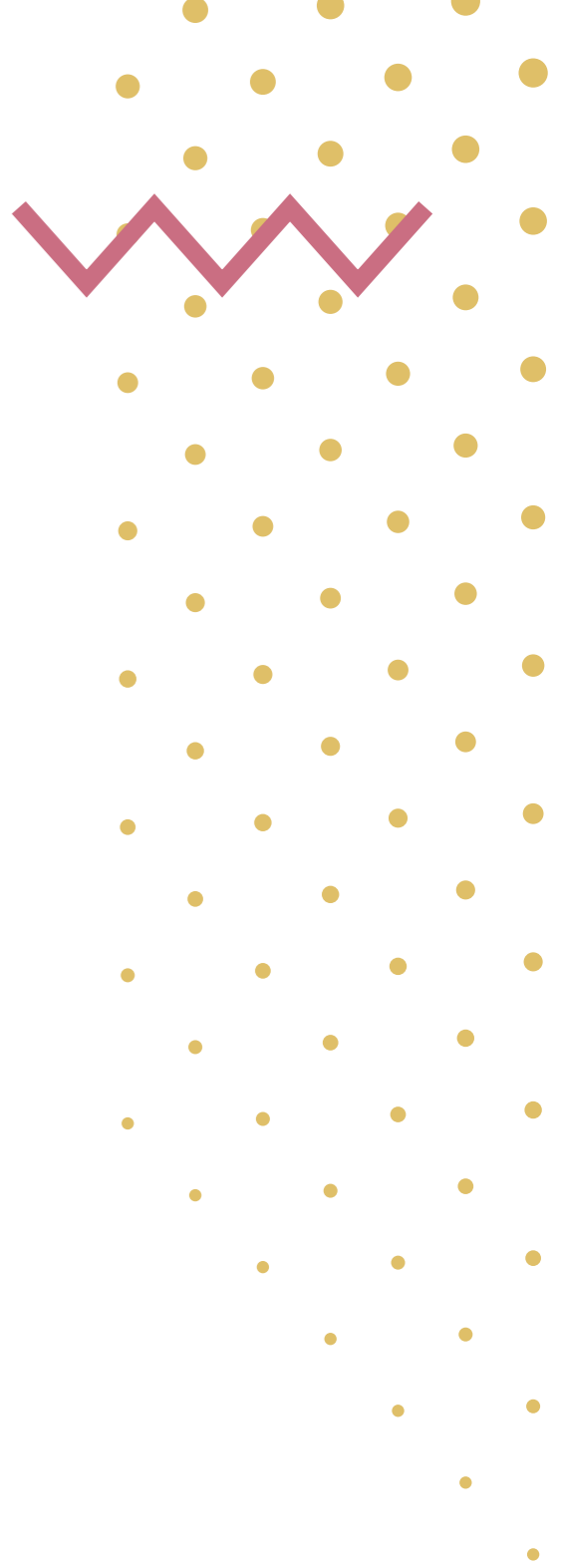






# Your Menopause Symptoms Checklist

	Starting HRT	3 Month Review	6 Month Review	1 Year Review	Testosterone Added
Anxiety					
Low Mood					
Depression					
Mood Swings					
Crying Spells					
Brain Fog					
Poor Memory					
Poor Concentration					
Problems with driving					
Loss of confidence					
Loss of Joy					
Reduced Self Esteem					
Irritability					
Heart Palpitations					
Headaches					
Tinnitus					
Dizziness or feeling faint					
Dry itchy skin					
Dry irritated eyes or ears					
Problems with teeth or gums					
Difficulty sleeping					
Fatigue, lacking energy					
Joint or muscle pain					
Tingling or tightness in fingers or toes					
Hot Flushes, How many daily?					
Night Sweats					
Changes to periods					
Loss of libido					
Vaginal dryness or pain with sexual intercourse					
Getting up to go to toilet in night or needing to go to toilet urgently					
Urine infections					
Thinning Hair					
Restless legs					
Changes to body odour					
Increased or new allergies					
Digestive problems					



Please keep all your Menopause Related Notes and Blood Tests here

[www.bristolmenopause.com](http://www.bristolmenopause.com)

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**The reason for creating this booklet is to help you as you start your menopause journey which is different for every woman. It will also help as a reminder of what we discussed at your consultation and act as a useful resource to help you as your symptoms change.**

**This booklet covers what the menopause is, its different stages, treatment options, lifestyle and supplement advice.**

**This also acts as your on-going menopause diary so please bring it with you to all future appointments.**



**[www.bristolmenopause.com](http://www.bristolmenopause.com)**

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