

# MANAGING MENOPAUSE



The Ultimate  
Menopause Handbook

## Table of Contents

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<b>What Is Menopause .....</b>	<b>1</b>
<b>Premature Menopause .....</b>	<b>1</b>
<b>The Three Stages of Menopause.....</b>	<b>2</b>
<b>Symptoms Of Perimenopause .....</b>	<b>3</b>
<b>Symptoms Of Menopause .....</b>	<b>5</b>
<b>Hot Flashes.....</b>	<b>6</b>
<b>Mood Swings and Depression .....</b>	<b>9</b>
<b>Fatigue .....</b>	<b>12</b>
<b>Stress .....</b>	<b>14</b>
<b>Vaginal Dryness .....</b>	<b>15</b>
<b>Insomnia .....</b>	<b>18</b>
<b>Weight Gain .....</b>	<b>21</b>
<b>Memory Loss And Brain Fog.....</b>	<b>23</b>
<b>Why Does Brain Fog Occur?.....</b>	<b>24</b>
<b>Treating Brain Fog .....</b>	<b>24</b>
<b>Hormonal Changes In Menopause .....</b>	<b>27</b>
<b>Bone Density .....</b>	<b>27</b>
<b>Loss Of Libido .....</b>	<b>27</b>
<b>Hormone Replacement Therapy .....</b>	<b>29</b>
<b>Types Of HRT.....</b>	<b>30</b>
<b>Risks Of HRT .....</b>	<b>31</b>
<b>Side Effects Of Hormone Replacement Therapy .....</b>	<b>32</b>
<b>Weighing The Pros And Cons Of HRT .....</b>	<b>33</b>

<b>Sexual Problems Associated With Menopause.....</b>	<b>34</b>
<b>Health Risks Following Menopause .....</b>	<b>35</b>
<b>Heart Disease .....</b>	<b>35</b>
<b>Osteoporosis .....</b>	<b>35</b>
<b>Stroke .....</b>	<b>36</b>
<b>Peripheral Vascular Disease .....</b>	<b>36</b>
<b>Breast Cancer .....</b>	<b>36</b>
<b>Dementia or Alzheimer’s Disease.....</b>	<b>36</b>
<b>Will This Ever End? .....</b>	<b>37</b>
<b>Finding Support and Getting Help.....</b>	<b>38</b>
<b>Conclusion .....</b>	<b>39</b>

Disclaimer: This publication is for informational purposes only and is not intended as medical advice. Medical advice should always be obtained from a qualified medical professional for any health conditions or symptoms associated with them. Every possible effort has been made in preparing and researching this material. We make no warranties with respect to the accuracy, applicability of its contents or any omissions.

# What Is Menopause

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Menopause is the period of time in a woman's life in which her menstrual periods stop and she is no longer fertile. The average age of menopause is about 51 years but it can last anywhere from age 40 to 59 years of age. Menopause is usually preceded by "perimenopause" by a few years.

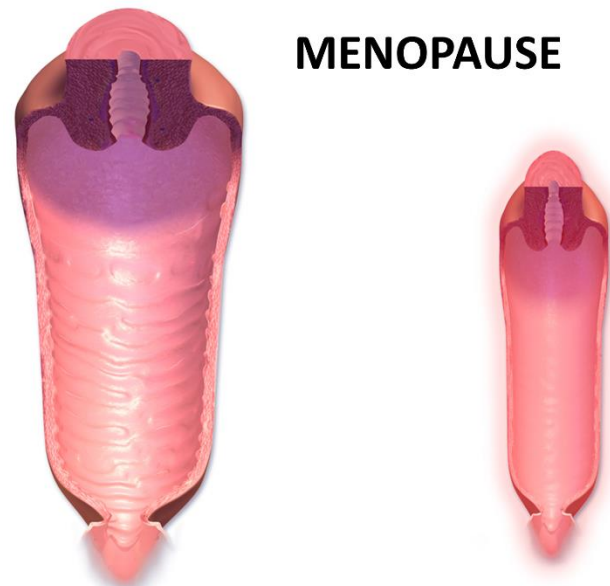
In perimenopause, the hormone levels of estrogen and progesterone normally produced by the ovaries begin to decrease. The periods become irregular but do not stop altogether. Women can get symptoms of menopause during perimenopause (hot flashes, night sweats, and mood changes, to name a few) but they aren't as frequent as when a woman reaches menopause.

## Premature Menopause

Premature menopause is sometimes referred to as premature ovarian failure or primary ovarian insufficiency. This is when the ovaries begin to fail prior to the age of 40. The ovaries do not produce enough estrogen and ovulation occurs sporadically or not at all. This results in early infertility, which is difficult to treat.

The term "premature menopause" is often used interchangeably with premature ovarian failure but they are not exactly the same thing.

Women in premature menopause actually stop having their period prior to age 40, while women with premature ovarian failure can still have some ovulations and will have irregular periods, often lasting several years. The treatment for premature ovarian failure is estrogen replacement therapy, which help the symptoms but does not treat the infertility.



# The Three Stages of Menopause

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There are actually three stages a woman goes through as part of the menopausal process. These include the following:

- **Perimenopause.** This is when the ovaries begin to decrease their production of estrogen. There will be some symptoms of hot flashes and other menopausal symptoms but the woman will have occasional periods. Mood swings are common in perimenopause. Many women enter perimenopause sometime in their 40s while other women do not have this stage at all.
- **Menopause.** This is when the periods finally stop. The woman is said to be in menopause when she has not had a period for at least 12 months. There are often symptoms, including mood swings, hot flashes, and night sweats. Menopause can last for 1-3 years.
- **Post-menopause.** This is when the periods have finally stopped and the ovaries are no longer producing much estrogen at all. Usually the symptoms taper off but many women continue to have dry vaginal mucosa and are at an increased risk for osteoporosis and heart disease.
- **Contact Diana Walker, Healthy Lifestyles Consultant for natural solutions for PMS and Menopause** Email: [sunridermom@gmail.com](mailto:sunridermom@gmail.com)
- **I recommend:** <http://www.diana1.com/beauty-pearl>

# Symptoms Of Perimenopause

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As mentioned, some women will not have any symptoms in perimenopause, while others will have noticeable symptoms. Common symptoms of perimenopause include the following:

- Hot flashes and night sweats. These are feelings of increased bodily warmth and flushing of the face. They can occur at any time of the day or night and can be uncomfortable. If they happen at night, the woman can experience night sweats, in which she wakes up drenched in sweat.
- Irregular periods. The ovaries may still ovulate but they do so in no predictable pattern. This can result in periods that are shorter than normal or periods that are longer than normal. The menstrual flow may be very heavy, especially if the period is short. Sometimes periods are skipped altogether, causing the woman to worry that she might be pregnant.
- Mood swings. Some women in perimenopause will suffer from an increased risk of depression or irritability during this stage. Sleep may be elusive as night sweats and hot flashes can happen during the night.
- Bladder difficulties. The urethral tissue is responsive to estrogen and when estrogen decreases, the urethral tissue also shrinks. This can lead to incontinence of urine. It can also lead to painful intercourse because the cervix no longer produces increased cervical mucus during sex.
- Decreases in libido. A woman in perimenopause can have a decrease in sexual desire. She may not want to have sex as much as she did before. Sometimes, this is not a problem as the couple becomes adjusted to the change in sexual activity and desire, however other couples may not be as lucky and this situation leads to tension and problems in the relationship.
- Decreased ability to get pregnant. The rate of ovulation goes down during perimenopause so the woman has a reduction in the ability to get pregnant. Pregnancy can still happen, however, so if you do not want to get pregnant, you should still continue to use some form of birth control until menopause occurs.

- Osteopenia. The strength of the bones depends on high circulating levels of estrogen. As estrogen levels decline, the bone mass decreases and there is a risk for osteoporosis that can increase a woman's risk of having bone fractures.

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# Symptoms Of Menopause

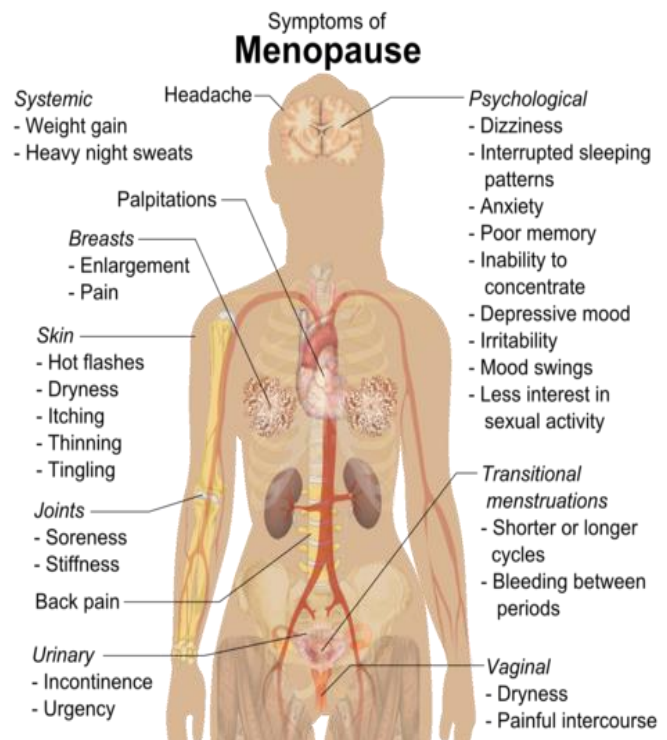
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As menopause approaches and the periods stop, the symptoms resulting from low estrogen levels become obvious. Common symptoms of menopause include the following:

- Stoppage of periods. The periods will begin to become irregular and will eventually stop. When you haven't had a period for 12 months in a row, it means you have likely reached menopause.

- Increased hot flashes. The hot flashes may be similar to those in perimenopause but can be more frequent and more intense. Most hot flashes last as little as 30 seconds or as much as 10 minutes before you feel better. About 2/3 of all women will experience hot flashes as a part of their menopausal symptoms.

- Vaginal dryness. Without the protective effect of estrogen and progesterone, the cervix and vagina do not secrete as much fluid. This can result in pain on intercourse as well as an increased risk of yeast infections, bladder infections, and vaginal itching. It is best treated with a water-based lubricating gel such as KY jelly.
- Sleeping difficulties. While in menopause, sleep can be difficult. You may have difficulty getting to sleep at night or may wake earlier in the morning, with difficulty in falling back to sleep. Good sleep habits can help prevent this complication.
- Incontinence of Urine. Women in menopause may experience an increase in the urge to urinate or incontinence of urine. Stress incontinence can occur, which is the kind of incontinence that occurs when coughing, lifting heavy objects, or sneezing. Urge



incontinence is the type of incontinence that causes you to have sudden urges to void, sometimes not making it to the toilet before urinating.

- Bladder infections. Women in menopause may have more bladder infections than normal. This is because the lack of estrogen has resulted in atrophy of the urethral lining so that bacteria have a greater chance of traveling up to the bladder, resulting in an infection. Drinking plenty of water can help reduce the chances of getting a bladder infection.
- Decreased sex drive. The lack of male and female hormones in the woman's blood can result in a decreased interest in sex. There may be fewer orgasms or no orgasms at all. This can be treated with prescription medications that help a woman achieve an orgasm.
- Vaginal dryness. The walls of the vagina become thinner because they no longer have estrogen to build up the lining. This can cause pain on intercourse that can be managed with over the counter vaginal lubricants. Estrogen in a vaginal ring can restore some of the vaginal dryness.
- Increased mood swings. Mood swings and depressive symptoms can result from a lack of estrogen. The fluctuations in female hormones affect the brain as well as the rest of the body so that there will be reductions in the neurotransmitters that are necessary to maintain a healthy mood.
- Skin and Hair Changes. Menopause can increase the rate of hair loss so that the hair will be thinner than before menopause. There will be a loss of body fat and collagen so that the skin will become more wrinkled, and will have decreased elasticity and increased dryness.

Menopausal symptoms can last a few months or a few years. They can also last for a few weeks and then go away for many months before starting up again. Most women will have a decrease in menopausal symptoms once they finally go through the menopausal stage.

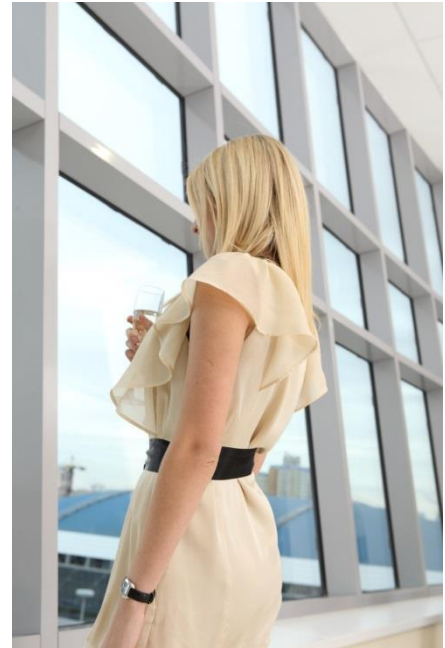
## Hot Flashes

Hot flashes are perhaps the greatest symptom experienced in menopause, statistically by 3.4 of all menopausal women and they are usually the most uncomfortable symptom. As mentioned, they can go on for several years before stopping. Hot flashes can be treated in a couple of ways.

Some women choose to replace the estrogen and progesterone the ovaries are no longer making. Estrogen replacement therapy or ERT is a prescription treatment for hot flashes.

Estrogen is given by patch, vaginal ring, or pill and progesterone can be given by pill. They are usually given together in order to prevent a buildup of the uterine lining that occurs when a woman takes unopposed estrogen.

Progesterone will help decrease the thickness of the uterine lining so that there are either regular periods (when the hormones are taken cyclically) or vaginal spotting if the hormones are taken every day.



Other women use lifestyle changes or natural remedies for the management of hot flashes. These include the following:

- Stay away from warm areas and do not sleep with warm blankets or warm pajamas.
- Avoid hot foods and drinks that can heat up the body and can trigger hot flashes
- Decrease alcohol intake as this can increase the amount of facial flushing you get with hot flashes.
- Decrease the amount of stress you are under
- Quit smoking or do not start smoking during this time of your life.
- Wear several layers of clothing that can be peeled off when you begin to get hot.
- Buy a portable fan so you can fan yourself when you get hot.
- Exercise regularly every day for at least thirty minutes. Try not to exercise right before you sleep as this can affect your ability to get to sleep.
- Decrease stress through the use of biofeedback, meditation, yoga, qi gong, or Tai chi.

These are natural ways of reducing the amount of perceived stress.

- Try this breathing technique when you get a hot flash: take in deep abdominal breaths, in through your nose and out through the mouth. Breathe slowly, only 5-7 times per minute.
- Use a bedside fan to remain cool at night.
- Drink cool water if you wake up with a hot flash or night sweats during your sleep.
- Use a cooling pillow or turn your pillow often so that you don't have to sleep on the hot side of the pillow all night. Keep a cool pack under the pillow so you can flip to a cool pillow during the night.
- Try to lose weight if you are overweight. Women who are obese have more problems with hot flashes than women of normal weight do. You can lose weight through healthy eating and maintaining an exercise program that will help you decrease your hot flashes.
- Acupuncture. A trained acupuncturist can help you reduce the blocked flow of qi energy so as to decrease the number and intensity of hot flashes.
- Try eating soy or taking soy supplements. You can get your soy, which contains isoflavones that mimic estrogen, by eating things like soymilk, tempeh, tofu, or roasted soy nuts. One soy supplement you can take is called Promensil, which can be purchased over the counter, but ask your doctor first.
- Try herbal remedies such as black cohosh. This is an herb that has been found to decrease the incidence of hot flashes in some research studies.

One study showed that exercise decreased the incidence and intensity of hot flashes. The study was done on 21 women who were having menopausal symptoms. Fourteen of the women took part in an exercise program for four months, while the rest did not change their exercise activities. After the study, the women completed a questionnaire that asked them about how many hot flashes they had and how intense the hot flashes were. They also cause hot flashes by placing the participants in a hot water suit and recorded their body responses.

The exercising participants took part in a gym-based exercise program, in which they used a stationary bicycle, a treadmill, a cross trainer and/or a rowing machine. They were asked to exercise initially for thirty minutes, later increasing to 45-minute exercise sessions a day for at least five days a week.

After the 16-week study, the researchers measured the incidence and severity of the hot flashes each woman experienced. They found that, in the women who exercised, the amount of sweating during a hot flash was markedly reduced. There was a decrease in blood flow to the forearms by 7 percent and a decrease in blood flow to the chest by 9 percent. There was also a decrease in blood flow to the brain in those women who exercised.

Women who did not exercise had no difference in the incidence and severity of hot flashes. While the study was small, it did indicate the possibility that exercise could help women with hot flashes.

## Mood Swings and Depression

Women approaching or in menopause are subject to mood swings and increased irritability. Typically, this occurs as a result of radical hormone fluctuations.

Some menopausal women also suffer from depression, the reasons for this are not completely clear but it is believed that the



lack of estrogen affects the amount of brain neurotransmitters responsible for prevention of depression. When the neurotransmitters like serotonin and norepinephrine are decreased, the risk for depression increases.

Women in menopause may need to take prescription antidepressants in order to control depressive symptoms. These include many of the SSRI antidepressants (selective serotonin reuptake inhibitors), which increase the levels of serotonin in the brain and decrease depressive symptoms.

Some of these include Lexapro, Prozac, Paxil, Celexa, and Wellbutrin. Technically, Wellbutrin is a SNRI antidepressant, which means it increases both serotonin and norepinephrine in the brain.

Some women have more anxiety than depression in menopause. Doctors can prescribe short courses of anti-anxiety medications to relieve these uncomfortable symptoms. Anti-anxiety medications include Xanax, Klonopin, and Ativan.

There are numerous natural remedies for mood swings. Some of them include the following:



- Make sure you eat a diet with healthy foods in it. Avoid processed foods and foods containing things like sugar, salt, and high fructose corn syrup.
- Eat smaller portions. If you get food cravings, try eating a small snack instead of loading up on unhealthy foods.
- Take in at least five portions of vegetables per day and at least 2 servings of fruit per day. Eat foods that are high in color as these contain healthful phytonutrients that can improve your mood and cognitive function.
- Eat organic foods whenever they are available. Try to avoid foods that may contain hormones, pesticides, herbicides, and food preservatives.
- When eating fruits, stick to the whole fruits instead of the juice of the fruit. Whole fruits contain fiber, which are good for your bowels.
- Decrease your intake of caffeine. This means eating less caffeine-containing sodas, black tea, and coffee.
- Instead of black tea, switch to healthier green tea or purified water to avoid caffeine intake.
- Eat as many berries as you can. They contain healthful antioxidants, which scavenge for oxygen free radicals and can improve the way your brain works.



- Eat more canola oil and olive oil and stay away from saturated fats (found in meats and dairy products) and trans fats, found in processed foods.
- Eat foods that are high in vitamin C, including citrus fruits, red peppers, and spinach. These contain antioxidants that can increase the dryness of your skin and can cause wrinkling.
- Increase the amount of omega 3 fatty acids in your diet. You can find omega 3 fatty acids by eating higher amounts of canola oil, flaxseed oil, walnuts, and fatty fish.
- Eat foods high in antioxidant and anti-inflammatory capabilities. You can increase the anti-inflammatory effect by adding turmeric, cayenne pepper, garlic, and rosemary to the foods you eat.
- Get more exercise. You can do this by increasing the amount of walking you do, by cycling, swimming, or engaging in any exercise that gets your heart rate going and increases your respiratory rate.
- Stop smoking. Women who smoke often have worse menopausal symptoms when compared to women who do not smoke and will get their menopausal symptoms 2 years earlier than those who don't smoke.
- Avoid perfumes as these can disrupt the balance of chemicals in your body.
- Engage in stress-relieving activities. This can mean enjoying a hobby or taking the time to read a book.
- De-clutter your life so you have fewer things to be stressed out over.
- Try meditation, massage therapy, qi gong, yoga, or tai chi to reduce the perception of stress in your life.
- Try herbal therapy. A practitioner in Traditional Chinese Medicine is trained in the herbs that can reduce menopausal symptoms and can guide you to the right herbs to take, such as black cohosh.



- Try taking bioidentical hormones. These are estrogen and progesterone usually rubbed into the skin, and are identical in chemistry to the actual hormones you'll find in your body. Some practitioners say that these are safer to take than chemically manufactured hormones.
- Support your adrenal glands by taking vitamins that support the glands. Your adrenal glands also make some reproductive hormones so, if they are supported, you will have fewer symptoms of hot flashes, and night sweats.

## Fatigue

Menopause is a time when many women feel run down and fatigued. Part of the problem is the increased perception of stress and another part is the decrease in restful sleep that comes with menopause.

Stress reduction techniques can reduce the fatigue seen in menopause. Exercises like guided imagery, meditation, qi gong, and tai chi can also reduce stress so you have more energy as well as increased mental clarity.



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Fatigue can be managed by having better sleep habits. This will help you go to sleep when you are tired and can keep you sleeping longer. Some good sleep habits include the following:

- Use your bedroom for sleep and sex only. Do not use your bed for watching television.
- Sleep in a dark and quiet environment. Use dark shades if it is still light out when you go to bed.
- Use a white noise machine if there is a lot of ambient noise. This can soothe your nerves and can help you fall asleep more easily.
- Exercise about five hours before going to sleep. Do not exercise right before bedtime as this can be activating and can interfere with falling asleep.
- Do not eat a big meal before bedtime. Eat at least 3 hours before falling asleep so your body has a chance to digest the food you eat before bedtime.
- Do not smoke before sleeping, as this can be overly stimulating.
- Do not drink alcohol just before sleep. While alcohol is technically a depressant, it will not help you fall asleep.

Don't be afraid to take naps during the day. A nap of even twenty minutes can fight fatigue and can get you through the rest of the day. Set an alarm if you are afraid you might nap for too long as this can make it hard to fall asleep at night.

If fatigue is a problem and sleep is difficult, talk to your doctor about a short course of a medication that can help you sleep. There are several sleep preparations that can be prescribed, some of which are not addictive.

## Stress

Stress can increase the frequency and intensity of hot flashes. Anything you can do to reduce your level of stress will help you feel better during this time of your life. If the stress has reached a level to where you are anxious, your doctor can prescribe anti-anxiety medications that will reduce your perception of stress. Some of these anxiolytic agents include Valium, clonazepam, Ativan, and Xanax.

There are natural ways of reducing stress:

- Aerobic exercises like running, jogging, walking, swimming, and cycling can reduce stress. Exercise should ideally be done for thirty minutes a day on most days of the week.
- Anaerobic exercise, such as weight machines and lifting weights can be done about twice a week to increase muscle tone and lessen your stress.
- You can also practice meditation or guided imagery in order to reduce stress. In meditation, you focus on breathing and on progressively relaxing your muscles so you are in a completely relaxed state. This can be done sitting up in a comfortable position or lying down on your bed or on a mat. In guided imagery, you focus on your breath and imagine yourself in a peaceful location, focusing on the sights, sounds, and smells of being in that location. You can take yourself there whenever you feel you are under stress in order to reduce your perception of stress.
- Yoga, tai chi, and QiGong are wonderful mind-body exercises to relieve stress.
- Massage, a spa day, or even a weekend in nature can do wonders to reduce stress levels.
- Some people get rid of their stress by de-stressing their lives. When you do this, you tackle those things that negatively affect the stress in your life. This might mean getting rid of a stressful job, managing a stressful relationship, or handling stressful finances.



- Take up a hobby that reduces the impact of stress on your life.
- Make yourself a priority; make sure to relax several times per day.

## Vaginal Dryness

As mentioned, the decrease in estrogen produced by the ovaries can lead to vaginal dryness. This can result in vaginal and vulvar itching, as well as pain on intercourse. Fortunately, there are things you can do to reduce the symptoms of vaginal dryness in menopause.

The first thing you should do is to discontinue using harsh soap on the inner lips of the vagina. Instead, just use plain water to clean these parts of your genitals. Use white toilet paper that has no scent in it and wash your underwear in soaps that contain no perfumes or dyes.

Don't use any anti-cling sheets in your laundry and don't use fabric softeners when you do laundry, as these can be irritating. Don't use perfumed douches or lotions on the inner lips of the vulva.

There are many lubricants you can purchase over the counter in order to maintain vaginal lubrication. Some of these include the following:

- KY™ jelly
- FemGlide™
- Just Like Me™
- Astroglide™
- Pre-Seed™
- Summer's Eve Lubricant™
- Slippery Stuff™
- Pure Pleasure™
- ID Millennium™

Avoid using petroleum-based lubricants such as petroleum jelly as they do not actually lubricate the vagina and can actually increase the irritation. They can also cause breakage of latex condoms.

There are prescription estrogen-based vaginal products you can get from your doctor. These include the following:

- Estrace vaginal cream
- Vagifem vaginal tablet
- Neo-Estrone cream
- Premarin Cream
- Estring vaginal ring

Any of these vaginal moisturizers can effectively reduce the vaginal dryness and can make intercourse more pleasurable. Try the over the counter preparations first and, if these don't work, go to the prescription products.

The vaginal estrogen creams and tablets are safer than taking oral estrogen because they deliver the estrogen to the vaginal tissues and are not absorbed appreciably by the rest of the body. They can thicken the vaginal mucosa and can increase lubrication.

#### Warming Lubricants

You can also use "warming" vaginal lubricants. These are available over the counter and are designed to increase sexual responsiveness by containing a small amount of capsaicin in the lubricant.

These types of lubricants can be very helpful in increasing sexual responsiveness but some women say that the lubricants will increase irritation of the vaginal tissues.

## Vaginal Moisturizers

Vaginal moisturizers can be used. They are applied on a regular basis to moisturize the vaginal tissue and have effectiveness that lasts about 3-4 days and they work by mimicking the vagina's normal vaginal secretions.

They are usually applied using an applicator and are available over the counter or online. You can use both vaginal moisturizers and vaginal lubricants together to reduce vaginal dryness.

Some women prefer using vaginal estrogen treatments. These involve the use of the products listed above. Estrogen vaginal treatments are known to increase the blood flow to the vagina so that the vagina has increased elasticity and thickness.

They offer lasting relief of vaginal dryness and can be used on a long-term basis. These are available by prescription and take a while to take effect.

## Oral Estrogen Therapy

If you need more relief of menopausal symptoms than just vaginal dryness, you may want to use oral estrogen therapy. These will help all of the symptoms of menopause, including hot flashes, night sweats, mood swing, urinary tract symptoms, and vaginal dryness.

For severe vaginal atrophy, however, the prescription vaginal creams, rings, or tablets are what are primarily recommended.

Local vaginal estrogen therapy is very effective, with about 93 percent of women indicating significant improvement in their symptoms.

Up to 75% of women indicate that the pain on intercourse resolves using this type of therapy. Always use the lowest effective dose and talk to your doctor if you have a history of breast cancer as estrogen therapy may be contraindicated in women who have had breast cancer.

## How To Use Estrogen Vaginal Preparations

If you are using estrogen-containing vaginal cream, you apply small amounts in the range of 0.5 to 1.0 grams in an applicator 2-3 times per week. They should not be used prior to intercourse as the estrogen in the cream can be absorbed in the man's skin with adverse effects.

If you are using the Estring vaginal ring, you insert it into the vagina, where it is worn for three months before replacement. It stays up near the cervix and does not have to be removed prior to having sex. Estring is used exclusively for vaginal dryness and is different from Femring, a type of vaginal estrogen-containing ring that contains higher doses of estrogen for the management of the other symptoms of menopause.

If you are using the vaginal tablet known as Vagifem, you simply use your finger or an applicator to insert the tablet about twice weekly. Vaginal tablets are generally less messy than the estrogen-containing creams.

The type of vaginal estrogen-containing product you use depends on your and your doctor's preferences. Individual responses can occur so you may need to try another product if one product does not seem to be effective. You can use lubricants and moisturizers on top of the estrogen-containing vaginal products, as they do not mix badly with one another.

## Insomnia

More than 1/3 of perimenopausal women will suffer from insomnia. Insomnia is defined as not being able to get to sleep once you have gotten to bed or getting up earlier than you would like to once you have gotten to sleep.

Many women develop symptoms of menopause-related insomnia in their late 30s to early 40s.



Some Of The Causes Of This Include The Following:

- **Changes in Hormones.** During the perimenopausal and menopausal years, the ovaries decrease their production of estrogen and progesterone, which are responsible for inducing sleep. A shift in the ratio of estrogen to progesterone can cause you to have difficulty falling asleep.
- **Hot flashes.** Hot flashes induce a sensation of heat and sweating that can wake you from sleep. It is caused by an upsurge of adrenaline, which interferes with the sleep process.
- **Mood swings.** Menopause can trigger depressive episodes in up to twenty percent of women. Life stressors can add to the difficulty in sleeping. The mood swings are a result of a change in neurotransmitters in the brain that are helpful in helping you get to sleep.
- **Social issues.** Menopause is a time of life changes that can interfere with sleep. It can be a time of relationship difficulties, difficulties with your children, and other midlife crises that make it difficult to relax enough to sleep.

If you are finding it difficult to sleep because of perimenopausal or menopausal symptoms, it is a good time to see your healthcare provider for some help.

There are some things that are completely in your control, such as having good sleep habits, and some things you can get help from your doctor with (such as your hormones).

If you have done everything, you can and still are suffering from sleep deprivation, your doctor may be able to prescribe hormone therapy, or medications that can help you sleep.

Practice the sleep habits as noted above. Keep your room as cool as possible in order to combat hot flashes and make every attempt to go to sleep at the same time at night and wake up at the same time every morning. Keep a cold rag by your bedside so you can cool down after waking up from a hot flash or night sweat.

Hormone replacement therapy can help control the hot flashes and will help you stay asleep at night. This type of therapy should be short term as there is some research evidence to support the idea that hormone replacement therapy is a risk factor for heart disease. For those women who

are in perimenopause, low dose birth control pills can be used instead of hormone replacement therapy.

There are some herbal remedies for sleep, such as valerian root, kava, chamomile and St. John's wort. A calming chamomile tea can be relaxing if taken just before sleep. The others can be taken as a supplement you buy over the counter at a pharmacy or at a health food store. Make sure your healthcare provider knows you are taking these medications.

Prescription sleeping aids can also be used. Besides Ambien, which is specific for sleep, you can try benzodiazepine therapy or non-addictive forms of sleep aids such as trazodone, Vistaril, and melatonin.

Natural forms of sleep induction can be done using acupuncture, acupressure, or shiatsu massage. These are based on the idea that qi energy in the body is being blocked so that it interferes with sleep.

Yoga is an exercise you can do that can help you get a good night's sleep. Other things that work include relaxation therapy and light exercise earlier in the day before you go to sleep.



## Weight Gain

There is a natural tendency to gain weight as a result of menopause for reasons that are not completely clear. It may have something to do with changes in metabolism around the time of menopause. There are, however, things you can do to prevent weight gain associated with menopause.

Increasing physical activity can help improve metabolism and can stave off weight gain linked to menopause. This means engaging in some form of aerobic activity at least 30 minutes a day on 4-5 days of the week. Aerobic activity can be any form of exercise that increases the heart rate and respiratory rate. Common forms of aerobic exercise include brisk walking,

jogging, swimming, and bicycling.

Other women engage in exercises associated with hobbies, such as gardening, tennis, or golf.

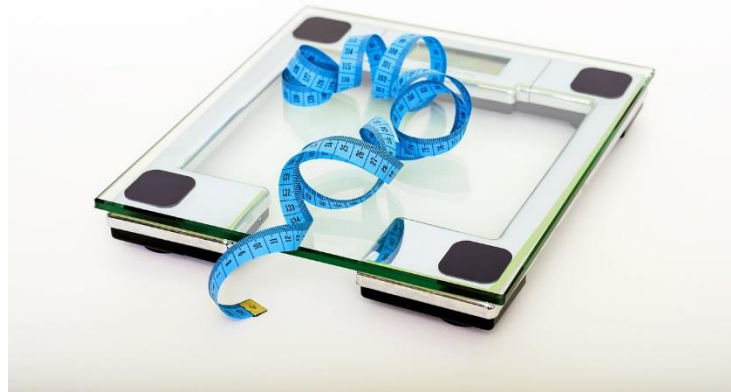
Anaerobic exercise can be done on the days of the week you don't do aerobic exercise. Anaerobic exercise

involves lifting weights or using weight machines at a local gym. Anaerobic exercise does burn some calories but it is really effective in increasing muscle tone and improving muscle mass.

Because muscle tissue has a higher metabolic rate than other tissues of the body, you can burn more calories without having to do anything extra.

Menopause is a time of changing the way you eat if you haven't already begun a program of healthy eating. You need to eat a diet that is moderately low in calories and that contains plenty of vegetables, fruits, legumes, whole grains, fish, and lean meats. You do not necessarily have to count calories unless you are trying to lose weight.

You need to reduce your intake of fatty foods, foods that are high in calories, fast foods, and highly processed foods. These are not healthy for you and can contribute not only to weight gain but also



to an increase in cardiovascular disease and diabetes. If you are already diabetic, you should take on a 2000 calorie a day diabetic diet that ensures your blood sugars stay stable and will help you lose weight.

It is better to prevent weight gain than it is to take the weight off once it has already been gained. The earlier in your life that you adopt healthy practices of eating right and exercising often, the less problem you will have with weight gain associated with menopause.

You should aim to have a body mass index (BMI) of 25 or less. You can calculate your BMI online using an online BMI calculator or chart.

- A BMI of 25 or less is normal.
- A BMI of more than 25 but less than 30 means you are overweight.
- A BMI of between 30 and 40 means that you are obese.
- If your BMI is greater than 40, you are considered to be morbidly obese.

## Memory Loss And Brain Fog

Memory loss is one of the more common symptoms of perimenopause and menopause. In fact, about 60% of women experiencing perimenopause and menopause have some symptoms of memory loss.

In laymen's terms, memory loss in menopause is called "brain fog" and it involves feeling as though you can't remember things as well as you used to and are walking around with a muddled head.

The type of memory loss seen during perimenopause and menopause usually involves forgetting newly acquired verbal information and having difficulty with concentration.

Typical brain fog symptoms include forgetting people's names (particularly new names of people you just met), forgetting tasks in the middle of trying to do them, or forgetting where you left things, such as your car keys.



Fortunately, the problem is not permanent and does not mean you are becoming demented. In fact, research out of the University of California, Los Angeles, was done on this issue in 2009. In the study, greater than 2,000 menopausal women were tracked regarding their memory loss.

It was found that the women's symptoms of learning disability and memory loss returned to normal after menopause had been achieved.

## Why Does Brain Fog Occur?

As is true of many of the symptoms in menopause, hormone fluctuations are usually at fault. When the levels of estrogen fluctuate during the perimenopausal state, women can get various symptoms, including hot flashes, night sweats, decreased mood, vaginal dryness, urinary tract problems, and mood swings.

In addition, women in menopause often do not sleep well. These sleep difficulties are also caused by fluctuations in estrogen levels and contribute to the inability to concentrate and the memory difficulties associated with brain fog.



You need estrogen to sleep well, as well as having the ability to pay attention to things, have good short-term memory, acquire language skills, and keep your mood stable.

The presence of hot flashes in menopause seems to be related to a loss of memory, particularly verbal memory, which involves remembering words. A study out of the University of Illinois, Chicago, in 2008 revealed that moderate to severe hot flashes are an indicator of memory loss.

The study looked at 29 menopausal and perimenopausal women, who had at least moderate to severe vasomotor symptoms (hot flashes). Those women who reported more hot flashes did more poorly on verbal memory testing.

## Treating Brain Fog

There are some things you can do to help improve your memory, including the following:

- Try hormone replacement therapy. While hormone replacement therapy (HRT) is usually given for the treatment of hot flashes, it can also improve memory and concentration. A

study out of UCLA showed that giving HRT to perimenopausal women had a positive impact on memory. Remember that HRT is not without risk, and can increase the risk of female-related cancers and heart disease, especially when given after the age of 60. If you are considering HRT, discuss the pros and cons with your physician to assess the risks and benefits of using this type of therapy.

- Get plenty of sleep. Sleep disturbances are extremely common in menopause. If you can turn that around and get more sleep, you can improve your memory and other brain fog symptoms. In order to sleep better, you may need to practice better sleep habits. This means developing a sleep ritual, such as limiting alcohol and caffeine before sleeping, keeping the room cool and free of distractions, or relaxing in a warm bath before going to bed.
- Eat a healthy diet. Eating better can improve your memory. Foods that contain omega 3 fatty acids (such as is found in cold water, fatty fish) seem to help memory loss caused by menopause. A review study out of UCLA indicated that omega 3 fatty acids could be beneficial in controlling the memory loss and improving memory. You can also get these types of fatty acids in kiwi and walnuts. Folate also helps your brain improve its ability to remember. Folate can be found in the diet by eating plenty of leafy green vegetables or by taking a folate supplement.
- Extremely moderate alcohol intake. This means drinking just 2 glasses of red wine per week. Red wine is especially recommended because of its high concentration of resveratrol, which scavenges for free radicals in the brain. More than 2 glasses a week may have the opposite effect so stick to a two drink per week limit. If you don't drink, try eating turmeric or taking it as a supplement. Turmeric is also high in antioxidants that will help improve brain fog symptoms.

- Ginkgo Biloba. While many believe that ginkgo biloba enhances brain function, it hasn't held up to that claim in the US. Research in Germany, however, has indicated its usefulness for memory loss. It is commonly used in Germany to improve memory and decrease the onset of dementia. Have a discussion with your doctor before taking this herb, as there can be some drug to herb interactions, depending on what medications you are taking.
- Develop your memory. If you feel as though brain fog is a problem, try using memory tips to make sure you don't forget everything. Write things down, break down complex tasks into separate steps, and play games like Sudoku, Scrabble, and crossword puzzles.
- Decrease stress. Menopause can be a time when stressful life events are more likely to occur. You may have to take care of teenage children, balance responsibilities at home and work, or be the caregiver for your elderly parent. If you cannot change these things in your life, try stress-reducing techniques like meditation, yoga, and tai chi to decrease the perception of stress and improve your memory.

Brain fog symptoms doesn't affect all women in menopause but if you are experiencing these symptoms, there are things you can do to combat the problem.

Even if you do nothing, your memory loss symptoms and other brain function activities will eventually return to baseline levels when menopause ends.



# Hormonal Changes In Menopause

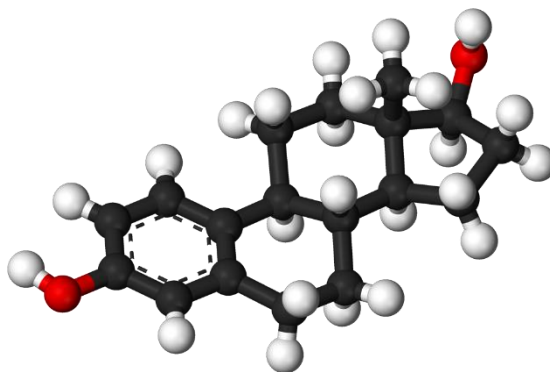
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As perimenopause turns to menopause, the amount of estrogen and progesterone produced by the ovaries declines to low levels. This has a major impact on the body. The protective effect of estrogen against heart disease goes away so that a postmenopausal woman has an increased risk of developing heart disease, including heart attacks, stroke, and peripheral vascular disease.

## Bone Density

If a woman does not take extra calcium or has early menopause, she is at a much higher risk of developing thinning of the bones, known as osteoporosis.

This can lead to bony fractures of the back, wrist, and hip. It often takes very little injury (or no injury at all) to cause these bones to fracture, particularly the vertebra. Fortunately, the bone density of menopausal women can be checked and medications can be provided that will keep the bones strong.



## Loss Of Libido

Women need their hormones to have some type of sexual arousal. Without the estrogen, progesterone, and testosterone produced by the female ovary, libido suffers and you may not feel like having sex in the same way that you did when you were younger.

Sometimes estrogen replacement therapy helps this sort of thing. In some cases, the woman needs to take small amounts of testosterone in order to bring the libido to normal. Talk to your healthcare provider if you think you might benefit from testosterone therapy.

The lack of estrogen affects the skin and connective tissue. The skin becomes drier and you need to apply more moisturizer. The amount of collagen produced by the body goes down as well as the

amount of elastin. This makes the skin have more wrinkles and reduced elasticity. There are many beauty products out there that can increase the collagen levels in the skin.

The lack of estrogen also affects the health of the vaginal tissue. The vaginal lining becomes thinner or atrophies, resulting in very little lubrication. This can cause pain during intercourse and can result in thinning of the urethral tissue so that the woman has an increased risk of bladder infections.

How is this treated?

The use of estrogen-based vaginal creams (and other products) that can improve the moisturization of the vaginal tissue. Oral estrogen replacement therapy can bring the risk of osteoporosis down but, according to some research, will not be protective against heart disease.

SSRI therapy can be used for mood swings and for sleep deprivation. Other medications, such as mood stabilizers can be used to improve the overall state of your mood and emotions.

Medications can be given for sleep and herbal remedies for sleep can be given to combat sleep difficulties in menopause.

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# Hormone Replacement Therapy

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In the 1990s, it was a common practice to give a woman estrogen and progesterone in order to treat hot flashes and other symptoms of menopause. This was until a large study was released that indicated a risk for developing heart disease in women who took this kind of therapy.

The practice of giving hormone replacement therapy declined quite a bit after that but it is still being used today in select cases where menopausal symptoms are severe and the woman recognizes the possible risk of taking the medication. Hormone therapy is a good choice for certain women, depending on their risk factors.

Hormone replacement therapy is also referred to as estrogen replacement therapy or menopausal hormone therapy. It is the practice of giving estrogen and progesterone for the relief of the most common symptoms of menopause and for some, to slow the progress of aging.



Healthcare providers can prescribe hormone replacement therapy (HRT) while a woman is experiencing the symptoms of menopause or after menopause has already occurred.

The main purpose of hormone replacement therapy is to treat the symptoms of menopause, including thinning of the bones, vaginal dryness, hot flashes, and night sweats.

By giving hormone replacement therapy, the doctor is trying to replace the hormones no longer made by the woman's ovaries.

Estrogen is important for the body. Besides being responsible for the menstrual cycle and uterine wall thickness, it has an effect on the strength of the bones, affects how the body makes use of calcium, and increases the amount of HDL ("good") cholesterol in the body.

Progesterone also plays a role in the female reproductive system. It causes the uterine lining to mature and shed at the end of the menstrual cycle.

If a woman takes estrogen alone without progesterone for the management of menopausal symptoms, the risk of endometrial cancer (cancer of the uterus) increases. Progesterone thins the lining of the uterus so that the cells don't proliferate and cause cancerous cells to develop.

## Types Of HRT

There are many ways to receive hormone replacement therapy. You need to talk to your doctor about what kind of therapy is best for you. Here are some choices:

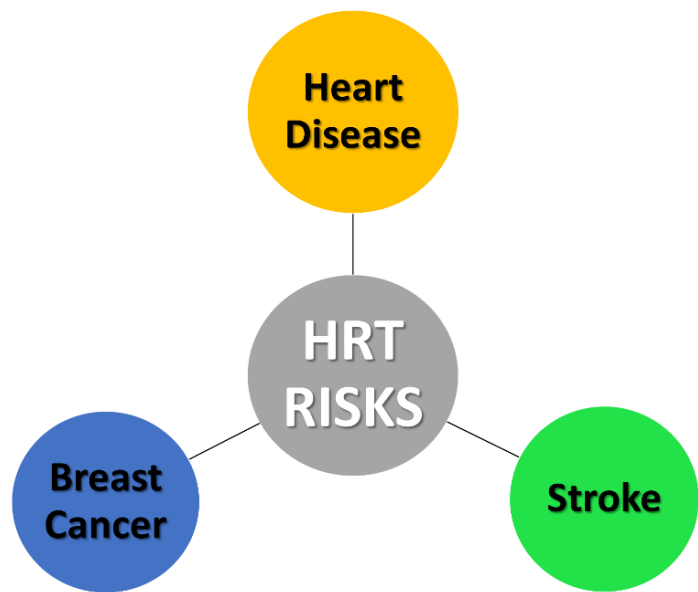
- Estrogen alone. If a woman has already had a hysterectomy, she has no chance of developing uterine cancer so that estrogen can be given alone as a form of hormone replacement therapy. Estrogen can be given in several ways, including a pill you take once daily, a patch you wear for a week at a time, a vaginal ring, a gel you put on your skin, and an estrogen-containing spray. Estrogen alone will control the symptoms of perimenopause and menopause but may increase the risk of developing breast cancer in women who have estrogen-sensitive breast cancer.
- Estrogen and progesterone therapy. This is often referred to as combination therapy. It involves giving both estrogen and a synthetic progesterone, called progestin. The progestin does not do much to reduce the hot flashes alone but is designed for women who still have their uterus in order to prevent uterine cancer.
- Bioidentical hormone therapy. There are compounding pharmacies that make bioidentical hormones given alone or in combination for menopausal symptoms. Bioidentical hormones are the same as the hormones in the female body and must be given as a cream or gel applied to the skin where it is rapidly absorbed.

## Risks Of HRT

As mentioned, there are risks to taking hormone replacement therapy, including increased risks for heart disease, breast cancer, and stroke. In fact, certain types of HRT have a higher risk than others, and the level of risk can vary from woman to woman depending upon her health history and lifestyle.

It is important to discuss both the risks and benefits with your doctor. Typically, the best route is to take the lowest dose and re-evaluate the treatment every six months.

The biggest study on this issue was the Women's Health Initiative, which was a 15-year study that looked at more than 160,000 women who were past menopause.



According to the study, women who took both estrogen and progesterone had an increased chance of developing cardiovascular disease.

In the study, the risks of taking these medications over the long term outweighed any benefits taking the medication had on menopausal symptoms.

There are some women for whom hormone replacement therapy is never appropriate. Talk to your healthcare provider if you have any of these conditions and are considering taking hormone replacement therapy:

- A history of blood clots, such as deep vein thrombosis or pulmonary emboli.
- A history of uterine, endometrial, or breast cancer
- A history of cardiovascular disease
- Problems with liver disease in the past or present
- A previous heart attack
- If you are possibly pregnant
- If you have had a stroke in the past



If you have any of these conditions, the risk of taking hormone replacement therapy may outweigh the benefits of taking the therapy and there may be other medications that will be more beneficial

## Side Effects Of Hormone Replacement Therapy

There are side effects of taking hormone replacement therapy that may be significant enough that you may stop taking the medication or may not wish to start taking it. These include the following:

- Breast tenderness or swelling
- Bloating of the abdomen
- Changes in mood
- Nausea
- Headaches
- Vaginal bleeding

If you have any of these symptoms, talk to your doctor about whether or not hormone replacement therapy is right for you.

## Weighing The Pros And Cons Of HRT

Read all you can about taking hormone replacement therapy and know your past and present medical history. Take this information to your doctor in order to decide if it is safe for you to take this type of therapy.

For some women, especially those with severe symptoms, it may be the only way to control the symptoms. If the symptoms are mild or there are other health issues to consider, hormone replacement may not be the best choice for you.

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# Sexual Problems Associated With Menopause

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A woman's libido is strongly associated with the amount of estrogen, progesterone, and testosterone she has in her body. As the levels of these hormones decrease, the sex drive will also decrease. This can affect her relationship with her sexual partner.

Estrogen is also important in having enough vaginal lubrication, and in the thickness and elasticity of the vaginal lining.

Without estrogen, there can be pain on intercourse associated with dryness of the vaginal mucosa. Fortunately, there are things that can be done.

Hormone replacement therapy given orally or by any of the other acceptable routes can increase the thickness of the vaginal mucosa and can prevent the dryness associated with menopause. For women who do not want to take a formal course of hormone replacement therapy, vaginal estrogen therapy can be provided.



Vaginal estrogen therapy is given by prescription. It can be given in several ways, including creams, tablets, or a vaginal ring inserted into the vagina. These provide local estrogen and do not appreciably increase the amount of estrogen in the bloodstream. They can increase the moisture in the vagina and can decrease pain with intercourse.

For those women who do not want to use hormones, there is a variety of over the counter lubricants and moisturizers that can be used to make intercourse more comfortable. Some are used on a regular basis, while others are used just prior to intercourse in order to lubricate the vaginal tissues.



# Health Risks Following Menopause

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Menopause increases the risk of several diseases.

## Heart Disease

As the estrogen level drops, the protective effect of estrogen on heart disease diminishes so that post-menopausal women begin to have a risk for heart disease that approaches that of men. They often get heart disease later in life when compared to men but, as they age, the risk for heart disease, including heart attack, stroke, and peripheral vascular disease goes up.

## Osteoporosis

Women in menopause also have a risk for developing bone loss. Estrogen is required to keep calcium in the bones and without it, the calcium leaches out of the bones and the bones become thin. Mildly thinning bones is called osteopenia. Severely thinning bones is called osteoporosis.



Without the protective effect of estrogen, osteoporosis can result in vertebral fractures, particularly in the thoracic area. This results in the typical “dowager’s hump” seen in women who have had compression of the vertebrae in the thoracic area of the spine.

The bones of the wrist and hip also thin as a result of lowered estrogen levels. This causes an increased risk of fractures to each of these bones during a fall. When it comes to hip fractures, it is unclear as to whether the hip fractures prior to the fall or as a result of a minor fall. Either way, it can be very debilitating to suffer a fracture associated with osteoporosis, as they tend not to heal very quickly.

## Stroke

Women after menopause have an increased risk of stroke. This is because cholesterol and calcium build up in the carotid arteries. Clots can then form in these arteries, resulting in a stroke.

Medications to reduce cholesterol can be given to women with elevated cholesterol levels, which may reduce the risk of getting a stroke.

## Peripheral Vascular Disease

The same is true of peripheral vascular disease. In peripheral vascular disease, however, the blood vessels affected are the arteries leading to the limbs, particularly the legs. Blood clots can form in the narrowed arteries, resulting in a loss of blood flow to the affected leg and a chance of developing gangrene of the leg. This may be treated by urgently removing the clot and expanding the size of the affected blood vessel.

## Breast Cancer

Women after menopause have a greater risk of developing breast cancer, especially if they take unopposed estrogen for their hot flashes. Up to 1 in 8 women will develop breast cancer sometime in their lives and the risk goes up with age.

Regular mammograms can detect the presence of early breast cancer so that, if breast cancer is detected, it can be treated without having the cancer metastasize to other body areas.

## Dementia or Alzheimer's Disease

Estrogen may have an effect on a woman's cognition. The reasons for this are unclear. Women past menopause are at a greater risk of developing age-related dementia or Alzheimer's disease. Taking hormone replacement therapy may reduce the risk of these diseases from occurring.



## Will This Ever End?

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When you add up the years a woman is in perimenopause and the time she is in menopause, it can add up to as many as ten years with symptoms of hot flashes, night sweats, mood swings, insomnia, and other menopausal symptoms.

Some women have no problems with menopause while others are severely afflicted with symptoms.

The best way to survive these years is to take good care of the body by exercising regularly, getting enough sleep, reducing stress, and eating a healthy diet.

If lifestyle factors are insufficient in controlling menopausal symptoms, things like herbal remedies for hot flashes or hormone replacement therapy may be necessary.

Talk to your healthcare provider about the best way to tackle the menopausal years and to get through the symptoms.

Eventually, the symptoms stop and you become post-menopausal, during which time the hormones are relatively stable, albeit much lower than before menopause.



## Finding Support and Getting Help

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Every woman goes through menopause at some time during her life with the average age being 51 years of age. If you are suffering from severe symptoms, it is time to seek medical attention and to discuss the various ways of coping with menopausal symptoms.

Your healthcare provider may recommend herbal therapies, estrogen replacement therapy, or lifestyle changes in order to cope with the symptoms.

Some hospitals and health care maintenance associations (HMOs) offer support groups to women who are going through menopausal symptoms. If such a group exists, it would be a nice way to get support in order to deal with your symptoms.



You can hear other women's stories and find out different ways of coping with the symptoms you are experiencing.

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## Conclusion

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Menopause and perimenopause are facts of life and represent a major change in a woman's reproductive life and in her life in general. There may be months where the symptoms of menopause are nearly unbearable that are interspersed with months where the symptoms are not so bad.

The good news is that menopause can be conquered by  
any woman with the help of her healthcare professional.

Through the use of lifestyle changes, hormone replacement therapy, and possibly herbal remedies, the symptoms of hot flashes, night sweats, insomnia, vaginal dryness, and mood swings can be overcome.

Be kind to yourself and practice self-care whenever possible, more than you have in your entire life. It is never selfish to make yourself a priority, remember that when you are well, you are more equipped to take care of your loved ones.

Do anything that helps improve your piece of mind, and quality of life.

Each woman's experience with menopause is unique to her. Your menopausal experience may be completely different from your siblings, friends, and neighbors.

This is why it is important to talk to your healthcare provider about your overall health as well as things you might be able to do (or not do) that can make the perimenopausal and menopausal years tolerable and improve your quality of life.

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