WHAT IS MENOPAUSE (PERI-MENOPAUSE)?
The word menopause is derived from the Greek words meno (month) and pause (to end). Thus menopause literally means the end of the monthly menstrual bleeding / permanent cessation of menses. Because menses may be irregular for some time before menopause, it is said to have definitely occurred when a woman has not menstruated naturally for twelve months. The absence of periods for 12 months is defined as natural menopause. The age at which menopause results varies fairly significantly being between the ages of 48 and 55 years of age, the average 51-52 years of age. The time leading up to menopause, in which some symptoms begin to be experienced, is known as perimenopause.

CAUSES OR RISK FACTORS
Three different hormones are produced by a woman’s ovaries, namely oestrogen, progesterone and testosterone. All three hormones, play an important role in menstruation, ovulation and pregnancy. During the menopausal transition, the ovaries production of oestrogen and progesterone begin to fluctuate and ultimately declines, ceasing at menopause.

SYMPTOMS
The transition through menopause often presents with noticeable changes that bring with them unique challenges. For most women these changes occur gradually over several years leading up to the last menstrual period. It is during this time that menopausal symptoms may be noticed and may include:

- Hot flushes and night sweats
- Loss of libido
- Weight gain
- Hair loss
- Fatigue
- Insomnia
- Headaches
- Muscle and joint pain
- Irregular menstruation
- Incontinence
- Breast pain
- Dizziness
- Mood swings

It is estimated that around 25% of women experience no noticeable changes during the menopausal transition, while 50% of women experience mild-moderate symptoms, and up to 25% of women will seek help for more severe menopausal symptoms.

DIAGNOSIS
In approximately 75% of women, menopause is fairly apparent and diagnoses is made clinically on the absence of menses and the appearance of symptoms. If menopause needs to be confirmed, for example in younger women, blood tests measuring the levels of certain hormones, namely oestrogen and follicle stimulating hormone (FSH) (which stimulates the ovaries to produce oestrogen and progesterone) may be conducted.
TREATMENT
There are multiple interventions that may help to manage and alleviate menopausal symptoms, including a number of simple lifestyle measures:

Healthy Diet
A healthy diet rich in nutrients is important for the menopausal transition, and can also assist with decreasing hot flushes, improving mood, preventing osteoporosis and reducing blood pressure. Additionally, metabolism slows with age, which means women need to have a balanced diet and participate in more physical activity to avoid weight gain.

- Include plenty of fresh seasonal fruit and vegetables, cereals and wholegrains to your daily diet, along with good sources of protein such as lean meats and fish. Calcium-rich foods are also important, as are those rich in phytoestrogens such as legumes, soy beans and whole grains.

- Be sure to stay hydrated, regularly drinking water throughout the day.

- Cut down on caffeine intake (coffee, tea, cola drinks, energy drinks etc.) as this can trigger flushes in some women.

- Aim for regular alcohol-free-days and limit your intake to a maximum of two standard glasses per day, as alcohol can also trigger hot flushes.

Regular exercise
Regular exercise plays an important role in bone health, muscle tone, cardiovascular health, energy, mood and overall wellbeing. Ideally aim for 30 minutes of moderate level exercise every day.

Vigorous weight-bearing exercise (such as weights, walking or jogging) is associated with reduced bone loss. Aerobic exercise, which raises the heart rate, is beneficial for heart health; and flexibility exercises are useful in maintaining muscle tone and keeping joints mobile.

Stress management
Managing stress levels can benefit general health and also help with symptoms of menopause, particularly psychological and cognitive symptoms. Activities such as yoga, relaxation, mindfulness and regular exercise are good examples of stress management strategies.

Smoking cessation
Cigarette smoking and other unhealthy lifestyle practices such as excess alcohol consumption are associated with a number of health risks and can also exacerbate menopausal symptoms, particularly flushes and night sweats.

Make sex more comfortable
If dryness and thinning of the vaginal lining has made sex uncomfortable, a water based lubricant may be helpful. Local hormone replacement (in the form of a cream or pessary placed in the vagina) can also assist and may be recommended by your doctor.

Hormone Replacement Therapy (HRT)
HRT can help relieve the symptoms of menopause but the decision to use HRT should be guided by a health professional and be based on your individual needs with consideration of your medical history, risks and benefits. It is important that all women using HRT be reviewed once a year by their doctor.

Complementary Medicines
Complementary medicines commonly used by women during menopause include phytoestrogen supplements, black cohosh, natural progesterone, wild yam creams and other herbal medicines. Due to the great variations in products and limited evidence for the use of some of these remedies, it is important to discuss your options with a qualified health practitioner.

Femular® (Ze 450) is an extract of black cohosh that is clinically proven for the relief of menopausal symptoms. Research from a number of clinical trials and observational studies have shown that Femular® can reduce and alleviate symptoms of menopause such as hot flushes, sweating, insomnia, fatigue and irritability. Femular® is completely non-oestrogenic and has been suggested as a primary option in patients with a history or family history of breast cancer. One tablet daily provides a 52% relief of symptoms, and two tablets daily provides a 74% relief of symptoms.

References: