

NATURAL MENOPAUSE



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Prepared for Prime Time by Susan Moger

INTRODUCTION

Every woman experiences a menopause. Most women do not have severe or disruptive symptoms. However, every woman should be aware of what is happening to her. The more informed she is, the better able she will be to make decisions concerning her health. The more information she has the less fearful she will be and the more she shares her experiences with other women, the less alone she will feel.

Menopause is a biological occurrence, but it must be viewed in a broader context. Women experience menopause usually between ages 45-55, and it is precisely at that time when other mid-life events (crises) also occur.

Menopause suffers, in part, from being a taboo subject. Women often are not comfortable talking about menopause to their physicians, partner, family or friends. However, over the last few years women are becoming more aware of their bodies and their health, and want to become more informed health care consumers. Hopefully this booklet will help.

WHAT'S HAPPENING?

Just as menstruating is part of puberty, so menopause is one part of the climacteric. The climacteric covers a span of approximately fifteen years. During those years our hormones are in a state of delicate imbalance and change. The level of fluctuation of our hormones is so slight that most of us do not know the level is changing at all. It is not until a dramatic symptom occurs like a hot flash or a changing period (heavier or lighter or a month skipped) that we are at all aware that something is different. The hormone that most greatly affects us during the climacteric is estrogen. It is the lowering estrogen level that causes our periods to end (menopause) and vaso-motor symptoms to occur like hot flashes and night sweats. Estrogen also influences skin elasticity (dryness of the vagina and facial wrinkles).

Menopause does not happen overnight. It is one part of a normal biological process that spans many years.

MYTHS, REALITIES AND FACTS

The stereotype of a menopausal woman is not pleasant. Society holds true many factors which are in fact myths insofar as there is no *direct* link between menopause and any of these conditions.

MYTHS

- excessive weight gain
- excess facial hair
- depression
- nervous breakdown
- insanity
- sexual maladjustments (not feeling sexy, not being able to enjoy sex, not being able to have orgasms).

There are symptoms which many women have.

SYMPTOMS

- hot flashes
- night sweats
-) three most common symptoms
- dryness of the vagina
- headaches
- palpitations
- lapses of memory

- and others

The following facts are important to know.

SHOULD I TAKE ESTROGEN?

It has been common during the last fifteen to twenty years for a doctor to prescribe estrogen for a woman who is complaining of menopausal symptoms. The estrogen the doctor gives augments and tries to stabilize the changing estrogen level the woman is experiencing due to being in the climacteric. During the last few years (mainly due to the advent of the birth control pill) research has been done on the use of estrogen.

Many women today are very concerned about whether or not to take estrogen and if they do decide to use it they wonder how long they should take it.

The purpose of this booklet is to make you better informed so you can make your own decisions. In thinking about this highly complex issue consider the following:

- the medical community is at odds in deciding if in fact postmenopausal women using estrogen are at higher risk in getting certain cause kinds of cancer.
- each woman is the best judge of what is right for her.
- no two women experience the same menopause.
- know and trust your doctor.
- ask questions.
- talk to friends.
- read the books mentioned in the bibliography in this booklet.
- if you decide to take estrogen: make sure your doctor frequently monitors your health (regular examinations and pap smears).
- do not accept estrogen for an indefinite period of time.
- know why you are taking it.
- women have found relief from menopausal symptoms by using other preparations, particularly vitamins. Information on that is in some of the books listed in the bibliography.

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CHANGING MID-LIFE ROLES

When a woman enters the menopause she is undeniably confronted with the fact that she is getting older and can no longer have children. While some women look forward to and are accepting of the end of their childbearing years as giving them freedom from birth control and time for themselves, other women react strongly to the termination of their reproductive function as being the end of their productive life. If a woman has had children, they are usually preparing to leave home as the woman enters her climacteric. She might find the relationship with her partner is not all she would like it to be. She often has a lot of time to herself and when she looks at herself she might not be happy with what she sees.

Mid-life for both sexes should be a time of reassessment; a time when we can accept changes in our family structure and in ourselves. A time when we can let go of how it was and embrace what we would like it to be. However, the world in which we live puts little value on getting older. Women especially are bombarded with advertising literature encouraging them to look the way they did when they were in their early twenties. A double standard of aging is very apparent. A man is rewarded for his graying hair and craggy face — a woman is often made to feel ashamed of the very same features. If a man choses to radically change his lifestyle he is thought to be inventive or at least capable of making such a decision in his best interest. A woman doing the same thing in mid-life is often ridiculed and labelled as being in "that time of her life". The list of comparisons is unfortunately very long.

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Many women, regardless of their marital status, find themselves lonely and unhappy as they enter their middle years. They are experiencing one or more important losses in their lives — the loss of a partner through death or divorce, the loss of a parent, the loss of their ability to have children, the loss of youth.

It is important to realise the menopause is just one in a series of life processes that women experience in their middle years. These processes are all inter-relating and as such midlife can be an overwhelmingly tumultuous time that seems to happen overnight.

But it doesn't happen overnight and because of that we can deal with the changes we each have happen to us, one at a time. By accepting our aging we accept ourselves. Use the changes you experience to your own best advantage. Mid-life isn't the end of life, it is a cross-roads and you can chose where you are going.

LIFESTYLE

Lifestyle means how you live. What you eat, how you keep fit, how you handle stress — how you care for yourself. Take advantage of the transition that middle years offer you to evaluate your lifestyle and consider making some changes.

Many women enter mid-life overweight, not due to menopause, but because they are not eating properly. Our nutritional requirements change as we age. It is our responsibility to look at how and what we eat, with a view toward moderation and change. It is also up to each of us to establish a daily exercise program. Our bodies need to be active. There are books in the bibliography that offer specific information on nutrition and exercise.

START YOUR OWN MENOPAUSE DISCUSSION GROUP

It is very important for women in mid-life to come together — to join forces — talk and share what is happening to them. It is particularly helpful to do this around the topic and time of menopause. A menopause group can be a few women meeting in each others' homes or it can become more formalized by working in cooperation with a local church, community college, recreational centre or public health office. Items for discussion can be similar to those mentioned in this booklet.

GLOSSARY

Menopause: the end of menstrual periods.

Climacteric: is considered to be the entire syndrome of changes occurring in a middle aged individual's life in terms of not only physical, but also socio-cultural and psychological factors.

Hormones: are substances released by the endocrine glands such as the thyroid, pituitary, pancreas, adrenal, ovaries, testes, etc. These normal secretions regulate vital functions such as respiration, heart beat, sexual activity, etc.

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A Project for Women in their Middle Years

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