

A PERSONAL GUIDE TO MEN@PAUSE FOR BLACK WOMEN



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A Personal Guide To Menopause for Black Women

By Dr. Itunuoluwa Johnson-Sogbetun

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Menopause – the uncharted territory that every woman eventually finds herself navigating. It's like entering a new chapter in the book of life, and trust me, it's filled with some unexpected plot twists and a few chuckles along the way.

It is a journey that's as unique and individual as you are. Fortunately for you, you've just picked up a guide that will take you through the exciting and sometimes bewildering world of menopause. This guide will not only focus on the biological aspects of menopause but also explore it holistically, putting at the forefront your entire well-being.

I bet you didn't know that as a Black woman, menopause affects you differently than it does other races. Well, through this guide, I will also shed light on those distinctions and guide you through this unique aspect of your menopausal journey.

I'm **Dr. Itunuoluwa Johnson-Sogbetun**, and together, we're going to explore the fascinating terrain of this chapter in your life. So, to begin, I'd like you to ponder on what you know about menopause and what questions you have always had because they are about to be answered.

Introduction



Before we begin, here's what you should know about me

I am Dr. Itunuoluwa Johnson-Sogbetun, or you can simply call me Dr. Sho. With over a decade of clinical experience as a portfolio General Practitioner (Consultant in Family Medicine) based in the UK, I've always believed in the profound connection between our biological, psychological, and social well-being. It's this holistic approach that guides me as I work with my patients to empower them, enabling them to live their healthiest lives both physically and mentally.

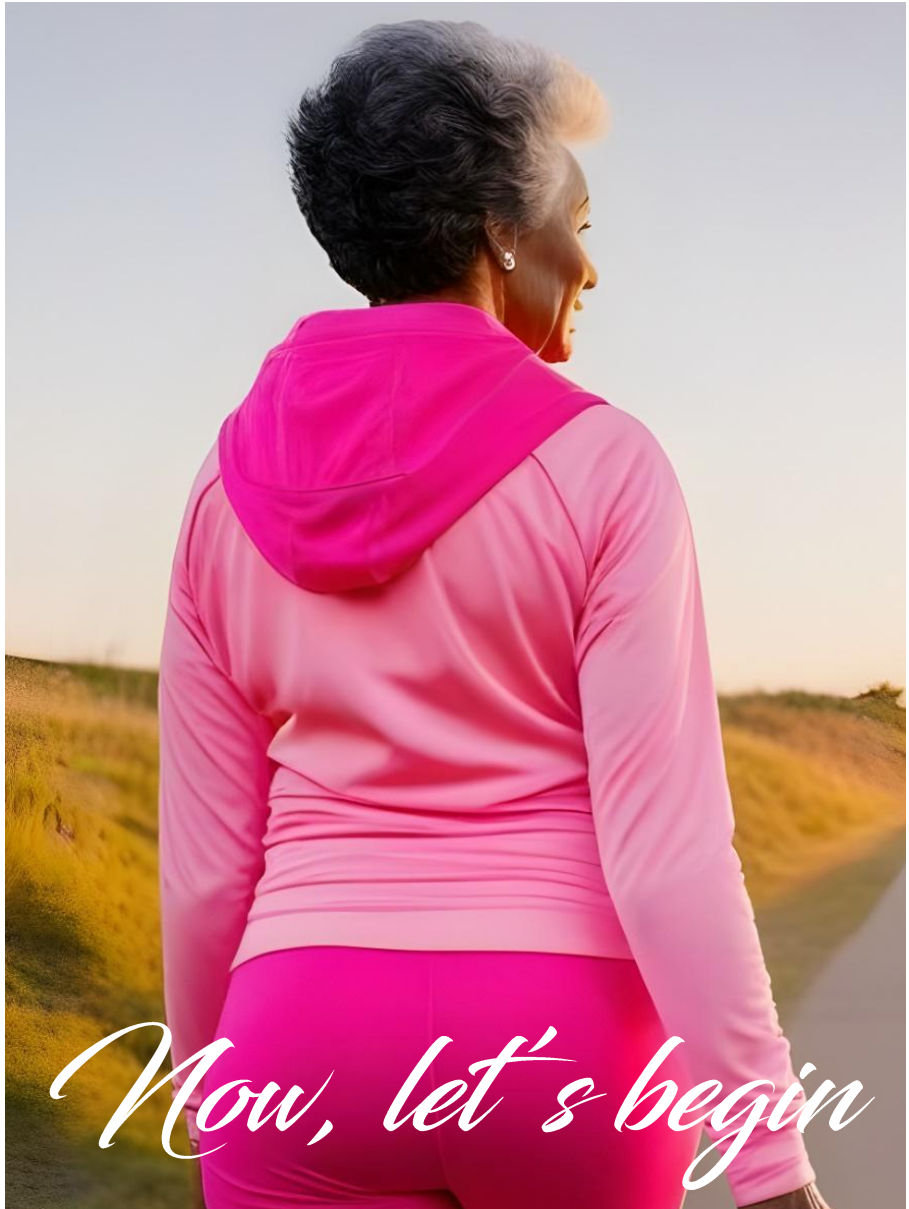
My passion lies in women's health, sexual and reproductive health, and menopause care. Over the years, I've also undergone comprehensive training in general internal medicine, which includes areas like dermatology, diabetes & endocrinology, oncology, and elderly patient care. I'm privileged to deliver high-quality, personalised care to my patients, both within the National Health Service and in the Private sector.

I'm an active member of the British Menopause Society and the Primary Care Women's Health Forum. Moreover, I'm proud to sit on the Rock My Menopause Committee, actively contributing to women's health and menopause initiatives.

In my quest for equality and diversity in healthcare, I serve on the RCGP Northwest London Faculty Board, where I lead the Equality, Diversity, and Inclusion strategy. Together with the Board, we're dedicated to improving health equality for patients and creating opportunities for GPs from underrepresented groups to advance their medical careers.

Outside my clinical work, I also wear the hat of a GP tutor and examiner at Queen Mary's University of London Medical School, where I'm committed to nurturing the next generation of healthcare professionals.

In addition to my professional commitments, I'm a wife and a mother, which has given me unique insight into health challenges. My life experiences closely resonate with those of the patients I serve, positioning me to truly understand their issues. I collaborate closely with my patients, developing personalised, shared-care strategies to address their unique health needs.



Now, let's begin

Understanding The Basics

What Is Menopause and Perimenopause?

Menopause is a biological event for women worldwide, happening in all cultures and societies. While the timing and experiences can differ, it's essentially when a woman's menstrual periods naturally stop for at least 12 consecutive months.

Perimenopause is the bridge leading to menopause, marked by hormonal shifts that bring about irregular periods and a medley of menopausal symptoms



Menopause In Black Women

What Is Distinctive About Menopause In Black Women?

Based on research from the Study of Women's Health Across the Nation (SWAN) in the US, here are some statistics you should know:

- Black women experience menopause at an earlier age, around 49.3 years, while White women typically go through it around 51 years of age.
- Black women endure menopausal symptoms for a longer period, about 10 years, in comparison to White women who experience them for around 6.5 years.
- Black women are three times more likely to encounter premature menopause, which happens before the age of 40.

According to the British Menopause Society, the statistics for Afro-Caribbean women in the UK are similar to those from the SWAN study:

- The average age of natural menopause is 49.6 years, and these women experience a longer menopause transition.
- These women experience the most frequent and long-lasting symptoms, such as hot flushes and night sweats, which tend to be more severe than in other groups.
- Sleep problems are common, including shorter sleep, frequent waking during the night, and feeling less rested overall.
- Weight gain and mental health challenges are often more noticeable during menopause for these women.
- Despite dealing with severe symptoms, many women may feel hesitant to seek help.

The natural age of menopause among Black women living in Africa and the Caribbean has not been extensively studied. From the data available, the average of menopause in Africa is reported as 48 years. However, studies show some variability, with averages ranging from 48 years in Ghana and Kenya, 48-49 years in South Africa, to 48-

52 years in Nigeria. In the Caribbean, the average age of menopause is reported to be around 47 years.

These differences are influenced by a combination of factors, including:

- Genetics which is the blueprint you receive from your parents but also epigenetics which is how the conditions you are in can cause changes to the expression of your genes.
- Historical racial injustices, giving rise to structural racism, have left lasting effects that impact healthcare bias and discrimination. For example, research has been primarily carried out on predominantly white people and the findings don't always align with the health needs of black people.
- Cultural Factors which can impact how we view ourselves and our health needs
- Limited access to healthcare, including culturally sensitive care tailored to the unique needs of Black women.
- Hostile work and social environments and misogynistic discrimination that contribute to stress.

So basically, these differences are genetic but also environmental which includes the lasting impact of unfair treatment, unequal healthcare access, cultural influences and the everyday stress you might face. They all play a role in how Black women experience menopause.

What is the mental load Black women carry and does it have anything to do with menopause?

Understanding the mental load that Black women carry is vital as we explore how it intersects with the experience of menopause. The

journey through life is often complicated by a variety of factors, and for many Black women, these factors can be particularly challenging. Let's explore what contributes to this mental load and how it connects to the world of menopause. From historical struggles to societal expectations, these elements play a significant role in shaping the menopausal experience for us.



- **Misogyny:** This refers to the unfair treatment of women. For Black women, this can be even more challenging during menopause because we tend to face both gender and racial discrimination.
- **The Weight of History:** As Black women, we have a history of fighting for our rights, which can be inspiring but also heavy to carry. During menopause, it's important to honour this history while focusing on personal growth.

- **Family and Cultural Expectations:** Sometimes, family and culture have strong rules about what Black women should do. This can add to the challenges of menopause, as we might struggle to meet these expectations while also taking care of ourselves.
- **Perceived Potential and Unfair Comparisons:** Black women may feel pressured to meet high standards, and unfair comparisons can make it harder. Menopause is a time for personal growth, but these pressures can hold us back.
- **Hidden Traumas:** Some painful experiences, like miscarriage, infertility, or divorce, can affect Black women during menopause. These experiences can add to the emotional and mental challenges we face.
- **Unexpected Singlehood and the Anxiety Driven by the Female Biological Clock:** A less discussed but difficult challenge can be unanticipated singlehood which can heighten anxiety stemming from the female biological clock, influencing the experiences of Black women during menopause. These overlapping factors often lead to intricate emotional and social repercussions, such as heightened isolation and an increased need for stronger support systems at this stage of life.
- **The De-sexualization of Older Women:** Society sometimes thinks older women are not attractive or are past their prime. This stereotype can be tough during menopause, but it is not

at all true. Older women are just as beautiful, and this time of life can unearth a new and amazing understanding of our bodies and our sexuality. We should feel good about ourselves and maximise the benefits that come with this phase.

- **Socioeconomic Challenges:** Money issues, like healthcare costs or work problems, can be hard for Black women. Managing these while dealing with menopausal symptoms can be very tough.

These are all part of the mental load Black women carry. Understanding this helps provide better support and guidance during menopause, making it a time of growth and well-being. It's a lot to juggle, but we're here to help you navigate it all.

What Causes Menopause?

- **Natural Decline in Reproductive Hormones:** As a woman approaches her 40s, the ovaries start making less of two essential hormones, oestrogen and progesterone, which control the menstrual cycle. At the same time, fertility decreases, and eventually, the ovaries stop producing eggs, leading to the end of period also known as menopause. The gradual process of decline is what we think of as perimenopause.
- **Ovaries Removal Surgery (Oophorectomy):** Once a woman has had her ovaries surgically removed, it's like going through menopause in the fast lane. These small organs play a big role

in regulating the monthly cycle by producing oestrogen and progesterone. When they're gone, menopause begins immediately. Because the hormonal changes happen suddenly, rather than gradually over several years, the signs and symptoms can be quite intense.

- **Chemotherapy and Radiation Treatment:** Sometimes, treatments like chemotherapy and radiation can affect the ovaries. These treatments are often aimed at dealing with health issues around the ovaries or the nearby organs like the uterus, intestines, or bladder. Unfortunately, an unintended side effect can be an early onset of menopause.
- **Primary Ovarian Insufficiency:** In about 1% of women, menopause arrives before the age of 40, which is called premature menopause. Sometimes, it's due to a condition called primary ovarian insufficiency. This condition can have various causes, like genetics or autoimmune disorders such as systemic lupus erythematosus (SLE), which can interfere with the ovaries' ability to produce enough reproductive hormones. However, in many cases, the exact cause of premature menopause remains unknown. Black women are more likely to have primary ovarian insufficiency than white women and this has implications for future health risks.

What are the signs and symptoms of menopause?

- Irregular periods
- Vaginal dryness leading to painful sex.
- Temperature dysregulation which causes women to feel inappropriately hot or cold leading to:
 - Hot flushes (characterised by a sudden feeling of heat in the upper part or all of the body).
 - Chills (usually accompanies the hot flushes).
 - Night sweats.
- Sleep problems.
- Mood changes.
- Brain fog and concentration problems.
- Weight gain and slowed metabolism.
- Loss of skin elasticity.
- Drier skin & hair.
- Breast changes.
- Joint aches and pains.

What are the complications of menopause?

It's essential to know that while menopause is a natural process, some complications can occur due to the body's changing hormones. Here are a few of them:

- **Heart and Blood Vessel Diseases:** Oestrogen is vital for the heart and blood vessels. It keeps them in tip-top shape and

helps prevent cholesterol from building up in the arteries. But when menopause arrives and oestrogen levels drop, it can put the heart at a bit more risk.

- **Bone Density Loss (Osteoporosis):** Oestrogen also acts as a shield for the bones. With lower oestrogen levels, bones can become a little fragile and prone to fractures. Think of it like your bones losing their armour.
- **Brain Changes (Cognitive Decline and Dementia):** After menopause, some women are more likely to notice changes in their memory and thinking abilities. We're not entirely sure why, but it might have something to do with the drop in oestrogen. Scientists are still figuring this out.
- **Vaginal and Urinary Issues:** With less oestrogen, the tissues in the vagina and urethra can lose their elasticity. This is also known as Genito-urinary syndrome of the menopause. One may experience vaginal dryness, frequent, abrupt, strong urges to urinate, followed by an involuntary leak of urine (urge incontinence), or release of urine with coughing, laughing or, lifting (stress incontinence). There's also a higher chance of urinary tract infections.
- **Sexual Dysfunction:** Lower oestrogen can lead to dryness in the vagina, making sex uncomfortable and possibly causing some bleeding during sexual intercourse. Many women also report a lower desire for intimacy. But remember, you're not alone, and there are ways to tackle these challenges.

- **Bleeding Changes in Perimenopause:** The monthly cycle can get unpredictable during perimenopause. It can range from lighter and less frequent to heavier and more unpredictable. This can be quite a hassle, causing distress and interfering with daily life. Some women even experience more pain and low energy due to low haemoglobin levels.

What are the menopause treatment options?

NON-HORMONAL TREATMENT OPTIONS

- **Antidepressants**

Some women experience mood swings or depression during menopause, and that can be a normal response to hormonal changes. But in some cases, it can impact daily functioning and in those cases, antidepressant medications can help especially if a woman does not want or cannot have hormonal treatments. These medications can help balance your mood, help with other menopause symptoms like hot flashes, and improve your emotional well-being during menopause.

When considering the use of antidepressant medications during menopause, if you have a history of breast cancer and are taking tamoxifen, a medication used to reduce the risk of breast cancer recurrence, there are certain precautions to

note. Avoid SSRIs (Selective Serotonin Reuptake Inhibitors) like paroxetine and fluoxetine, as well as SNRIs (Serotonin-Norepinephrine Reuptake Inhibitors) like bupropion and duloxetine, as they may interfere with tamoxifen. Instead, consider safer options like SSRIs such as sertraline and citalopram or other SNRI antidepressants, like venlafaxine. These are less likely to impact tamoxifen's effectiveness.

- **Gabapentin or Pregabalin:** These can help manage menopausal symptoms especially hot flushes and night sweats by stabilising nerve activity and reducing the intensity and frequency of these symptoms. Side effects: weight gain, sleepiness, dizziness and dry mouth.
- **Oxybutynin:** Oxybutynin is a medication primarily used to treat overactive bladder and urinary incontinence. However, it can also be prescribed off-label to manage menopausal symptoms such as hot flushes and night sweats. Oxybutynin works by reducing the activity of certain nerves, which can help decrease the frequency and severity of hot flushes. Side effects: dry mouth, dry eyes, headaches and stomach pain.
- **Clonidine:** Although previously used to treat hypertension, Clonidine works by affecting certain neurotransmitters in the brain, which helps regulate body temperature and reduce the frequency and severity of hot flushes associated with menopause. Adverse effects are dizziness, sedation, difficulty with sleeping, and constipation. Women with low blood pressure should not use Clonidine.

- **Fezolinetant:** Fezolinetant is a new treatment for managing menopause symptoms like hot flushes and night sweats. Unlike traditional treatments that use hormones like oestrogen, Fezolinetant works by blocking certain signals in the brain that cause these symptoms. During menopause, hormone changes can confuse the body's temperature regulation, leading to hot flushes. Fezolinetant helps to balance this by stopping the brain from sending the wrong signals, reducing how often and how severe the hot flushes are.
- **Cognitive Behaviour Therapy:** Cognitive Behavioral Therapy (CBT) is a form of psychological treatment that has been found effective for a range of issues, including menopause symptoms. It focuses on identifying and changing negative thought patterns and behaviours. For menopause, CBT can help manage symptoms such as hot flushes, mood swings, and sleep disturbances by teaching coping strategies, relaxation techniques, and ways to reframe negative thoughts. It often involves structured sessions with a therapist but can also be done via self-help online programs or workbooks and can be a valuable part of a comprehensive approach to managing menopause symptoms.

SUPPLEMENTS AND HERBAL OPTIONS

Some women turn to natural remedies like red clover, Black cohosh, soy, and other supplements to ease their menopause

symptoms. These are like the herbs and vitamins you might use to feel better when you have a cold.

However, it's important to know that there isn't enough scientific evidence to prove that these remedies work for everyone, and there can be issues with knowing the right amount to take or potential interactions with other medications you might be on. Also, because these herbal remedies are not usually regulated, it's difficult to be confident about the strength needed or even the purity of the medication itself. So, this is an area where you will need to do your research or consult a clinician with expertise in herbal medication before taking them. It is also very important to let your regular medical team know if you are taking herbal medication.

HORMONAL TREATMENT OPTIONS

- **Tibolone:** Tibolone is a synthetic steroid hormone used as a form of hormone replacement therapy (HRT) in postmenopausal women. Despite being a form of HRT, tibolone is often considered separately due to the distinct way it works. It acts differently from traditional HRT by selectively activating oestrogen receptors in various tissues, potentially reducing some associated risks. It can help alleviate menopausal symptoms such as hot flushes, vaginal dryness, and decreased libido by mimicking the effects of oestrogen, progesterone, and testosterone in the body.

Additionally, tibolone may help prevent bone loss and reduce the risk of fractures associated with osteoporosis.

- **Vaginal oestrogen:** Another helpful option for managing some of the specific symptoms of menopause, particularly in the genital area. It's called Vaginal Oestrogen. This is mainly used to address the Genitourinary Syndrome of Menopause.

What's unique about Vaginal Oestrogen is that it's localised to the genital area. This means it's designed to target and relieve the symptoms where you need it the most. The good news is that it's considered very low risk. When you use Vaginal Oestrogen, only tiny amounts of it enter your bloodstream, so it's generally safe for long-term use. So, if you're dealing with vaginal discomfort and urinary symptoms, this option might be a great fit for you.

- **Hormone Replacement Therapy:** By now, you should be familiar with the discomforting symptoms of menopause. Hot flushes, mood swings, sleep disturbances – they can disrupt your daily life. But here's the good news: Hormone Replacement Therapy (HRT).

HRT can be the answer to many, if not all, of these bothersome symptoms. We'll explore it more as you read further because it's an effective way to manage the symptoms of menopause for many women.

Hormone Replacement Therapy (HRT)



Hormone Replacement Therapy (HRT) is a treatment that helps alleviate the discomforts of menopause. In simple terms, it involves "replacing the hormones" that your body may be lacking. HRT is a highly effective way to address challenging menopausal symptoms.

We know that perimenopausal and menopausal symptoms are primarily caused by a deficiency in the hormone oestrogen. HRT primarily involves replacing oestrogen. The type of oestrogen used is known as estradiol, and it's natural and identical to the oestrogen your body produces. Estradiol is derived from yams and comes in

various forms, such as tablets, patches, gels, and sprays. This form of HRT, known as systemic HRT, can be via the skin (transdermal) or taken orally and addresses symptoms throughout the body. In contrast, there's another type of HRT called vaginal HRT (vaginal oestrogen -discussed earlier), which is localised to the genital area. It's mainly used to treat genitourinary syndrome of the menopause.

To balance the effects of oestrogen on the womb lining, HRT typically includes progesterone for women with a womb or womb lining tissue elsewhere as in a condition called endometriosis. My favourite options for this are Intrauterine System (IUS) like Mirena which can also provide contraceptive protection during perimenopause, or a body-identical progesterone called Utrogestan that can be a great alternative for women who don't want a coil. Utrogestan does not provide contraceptive cover, but it can help with sleep and is best taken at night! There are also tablet or patch options available, although most of them contain synthetic progestones but this can be a useful option for some women.

Based on current clinical evidence and guidelines, Testosterone is prescribed as part of HRT primarily for low sex drive. Some women have reported additional benefits, particularly increased energy levels and reduced fatigue, though this remains anecdotal and lacks clinical evidence for now. We typically ensure the oestrogen HRT dosage is optimal before considering testosterone. Testosterone requires regular blood test monitoring to keep levels within the normal female range, as excessive levels can be harmful and cause unwanted side effects.

It's important to note that HRT is not a form of contraception. Perimenopausal women should continue using contraception until they have not had a period for over one year if they are older than 50, and over two years if they are younger than 50. This ensures protection against unintended pregnancies during the perimenopausal transition.

What are the benefits of HRT?

1. **Relief from Menopausal Symptoms:** HRT effectively reduces common menopausal issues like hot flashes, night sweats, and vaginal dryness, providing much-needed relief.



2. **Improved Bone Health:** HRT helps maintain strong bones, lowering the risk of osteoporosis and fractures in the long run.

3. **Heart Health:** In some cases, HRT can support heart health by keeping cholesterol levels in check and reducing the risk of heart disease, promoting overall well-being.

4. **Mood Stabilisation:** HRT is a valuable tool for managing mood swings and irritability related to menopause, potentially improving emotional well-being.

5. **Relief from Genitourinary Symptoms:** HRT effectively alleviates issues like vaginal dryness, discomfort during intercourse, and urinary symptoms associated with menopause, enhancing your comfort and well-being.
6. **Ongoing Research on Dementia Protection:** Researchers are still studying whether HRT can help protect against dementia, which is an exciting development in women's health.

What are the risks of HRT?

For most women, the benefits of Hormone Replacement Therapy (HRT) far outweigh the potential risks especially when we consider that these risks are quite low. However, it's crucial to understand these risks straightforwardly to dispel common misunderstandings about HRT.



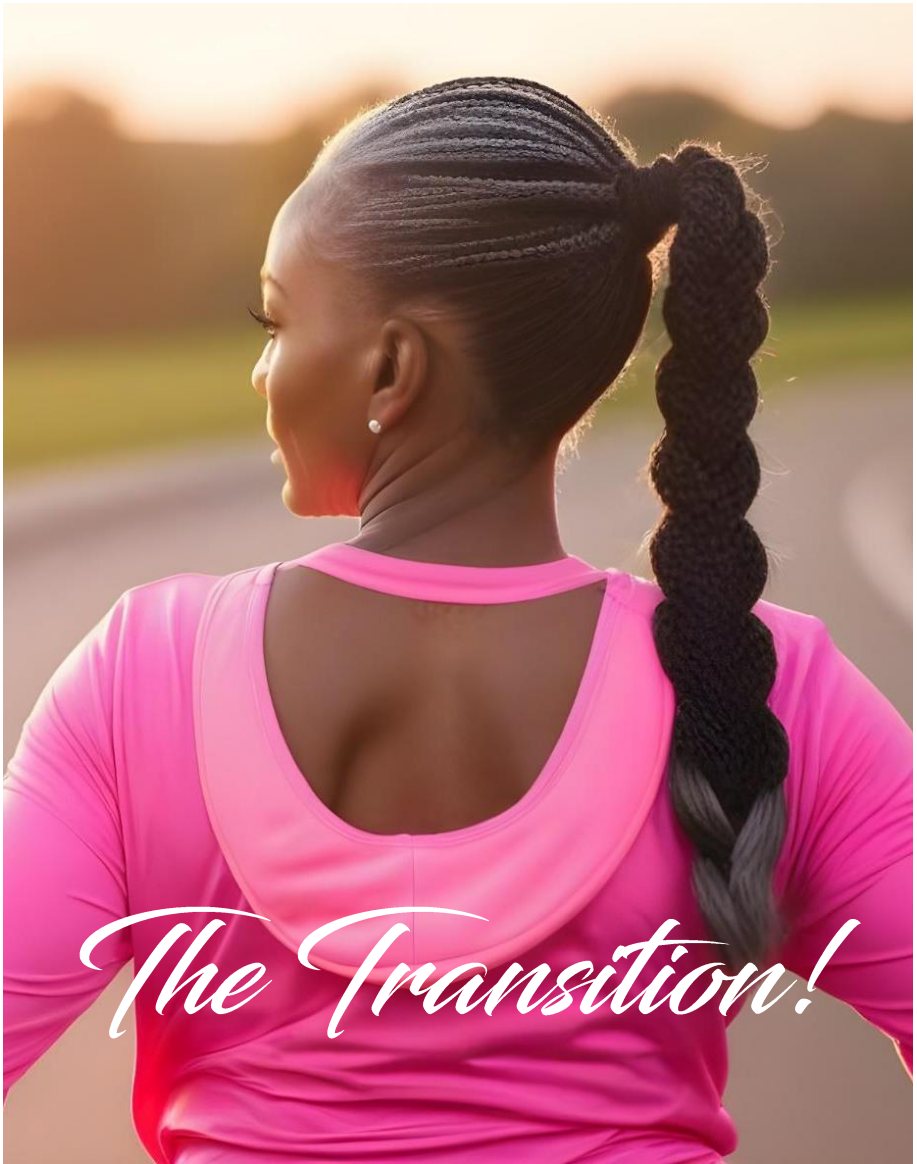
- **Breast Cancer Risk:** This risk is relatively low. Among 1,000 women using oestrogen plus progesterone HRT for over five years, there might be approximately 5 to 10 extra cases of breast cancer.
- **Blood Clot Formation:** Notably, the risk of blood clots is associated with oral oestrogen HRT, not the commonly used

transdermal forms. There is NO added risk with transdermal forms. With oral HRT, there could be about 20 to 30 extra cases of blood clots in 1,000 women within the first year of use, but this risk is also relatively low.

- **Heart Disease Risk:** HRT's relationship with heart disease is complex. While it can protect against heart disease during a specific time frame (the "window of opportunity"), initiating HRT after this window, typically after the age of 60, may result in about 5 to 10 additional cases of heart disease in 1,000 older women. Though there's a slight increase, it's still considered low.
- **Womb Cancer:** In 1,000 women using oestrogen-only HRT, there might be approximately 5 to 10 additional cases of womb cancer, in women with a womb or womb lining tissue. However, this risk significantly decreases when progesterone is added, which is why combined HRT is recommended for women with a womb or womb lining tissue.
- **Stroke:** HRT may be associated with around 5 additional cases of stroke in 1,000 women, especially in older women, with the risk being more significant during the first year of use but this risk is significantly reduced with transdermal HRT.
- **Ovarian Cancer:** Long-term use of HRT might result in about 1 to 3 additional cases of ovarian cancer in 1,000 women.

Remember, individual risks can vary, but it's important to emphasise that these risks are generally low. The decision to use HRT should be

made in consultation with a healthcare provider, considering a woman's specific health and medical history. This ensures an informed choice tailored to individual needs and circumstances, while acknowledging the overall low risk associated with HRT.



How can I make the transition into menopause easier?

There are some steps to help make this transition a smoother and healthier ride. They include:



- 1. Staying Active:** Research suggests that dedicating 30 to 45 minutes each day to physical activity is great for your heart, helping prevent heart disease, the world's top killer. Exercise also reduces hot flashes, boosts your mood, and helps maintain a healthy weight. Don't forget strength-building exercises for your muscles, joints, and bones, and consider activities like Pilates, Yoga, and Taichi to stay flexible and stress-free. If you're short on time, simply sitting less and walking more is a solid start. You can even turn physical activity into social time with friends and family or set aside dedicated "me time."
- 2. Managing Your Mental Load:** Assessing your mental load during menopause is crucial. Even if you're as capable as ever, recognizing your limits is essential. It means understanding that taking on too much can lead to stress and burnout. Honouring your capacity involves setting boundaries and not

overextending yourself. Prioritising self-care is key. Self-care isn't selfish; it's about ensuring you have the mental and emotional resources to handle menopause effectively. Activities like meditation, spending time with loved ones, and seeking professional support when needed can help you relax and rejuvenate. Recognizing your limits and embracing self-care is a sign of wisdom and self-compassion. It empowers you to face menopause with resilience and grace, reducing mental strain and enhancing overall well-being.

3. **Quitting Smoking:** Smoking is like playing with fire when it comes to your health, and menopause is no exception. By quitting smoking, you can significantly reduce your risk of developing various cancers, particularly lung cancer. It's a proactive step towards a healthier heart and lower chances of heart disease, a risk that can be further complicated during menopause. Quitting smoking also reduces the risk of stroke and diabetes, making it a smart move to protect your overall well-being during this life transition.
4. **Eating Well:** A healthy diet is your secret weapon for a smoother menopause journey. It ensures you receive the essential nutrients needed to cope with the changes that menopause brings. Additionally, a balanced diet can help you maintain a healthy weight, which, during menopause, can be a bit tricky due to shifts in metabolism. Eating well not only supports your heart and overall health but also aids in managing your weight, reducing the risk of heart disease and joint issues. Furthermore, your bone health benefits from a diet rich in calcium and vitamin D, as they play a crucial role

in maintaining strong bones and lowering the risk of fractures.

5. **Taking Supplements:** Sometimes, you need a little extra help when it comes to vitamins and minerals. For instance, vitamin D is like a sunshine boost for your well-being. However, if sunlight exposure is limited, a daily 1000IU vitamin D supplement ensures your body gets what it needs for bone health and overall wellness. Similarly, if your diet lacks adequate calcium, considering a calcium supplement is a wise choice. Calcium is vital for strong bones and muscle function, serving as an insurance policy for your skeletal health.
6. **Staying Cool:** Hot flushes can be an unwelcome experience during menopause. Carrying a portable fan may seem simple, but it can make a big difference. These handy gadgets provide quick relief by cooling you down when a hot flash strikes, making them a practical tool to manage these sudden heat surges.
7. **Strengthening Your Pelvic Muscles:** Your pelvic muscles play a crucial role in supporting your bladder and other organs. Kegel exercises can help keep them strong, reducing the risk of urinary incontinence and promoting overall pelvic health. These exercises are like a fitness routine for the muscles down there, helping you maintain control and comfort.
8. **Watching Your Diet:** What you eat can impact your menopause experience. Some foods can worsen hot flushes and other symptoms, so it's essential to be mindful. Spicy,

fatty, and processed foods can trigger or intensify hot flushes and night sweats, making it wise to reduce your intake. In addition, alcohol and caffeine are beverages that can disrupt your sleep and exacerbate mood swings. Moderate consumption or seeking alternatives can help maintain your well-being during menopause.

9. **Changing Your Perspective:** Believe it or not, your outlook on menopause matters. Approaching it with a negative mindset can lead to more frequent and severe symptoms. On the other hand, embracing menopause as a natural transition can make the journey smoother. A positive attitude can reduce stress and enhance your overall experience, allowing you to embrace this new phase of life with open arms and optimism.

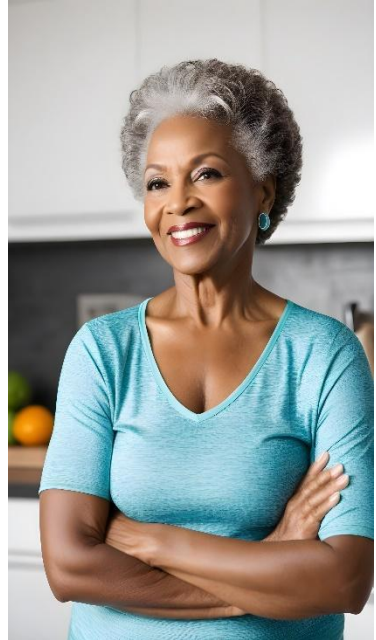


When should I see a doctor?

- **Quality of Life Symptoms:** If menopausal symptoms are making your daily life a bit more challenging, it might be time to chat with a doctor.
- **Early Menopause:** Experiencing menopause before your 40s (also known as premature menopause) is a good reason to see a doctor. This is because of the increased risk of health complications and in this group treatment with hormone replacement therapy is highly recommended.
- **Treatment Options:** When it comes to managing menopausal symptoms, having a conversation with a doctor is a smart move. They can offer their expertise and advice, ensuring you make informed choices tailored to your unique needs and preferences. It's all about finding the best solution for you.

How do I care for my general health in this period?

- **Heart Health:** It's essential to keep an eye on your heart health. You can do this by regularly checking your blood pressure, HbA1c (a blood sugar measure), and cholesterol levels. These numbers give you an idea of the risks that can impact your heart health.
- **Bone Health:** Strong bones are crucial. A doctor can assess your bone health using something called the FRAX score and if needed a bone density scan called a DEXA scan. To keep your bones strong, make sure you're getting enough calcium and vitamin D in your diet.
- **Joint Health:** Your joints need some love too. To keep them in good shape, try exercises that focus on strength, flexibility, and balance. These exercises help your joints stay healthy and pain-free. Glucosamine, Chondroitin and Turmeric may help but there is no strong medical evidence for this.
- **Brain Health:** Your brain matters! To keep it sharp, eat foods rich in omega-3 fatty acids (like fish), make sure you get enough sleep and stay active. These habits are like workouts for your brain.



- **Mental Health:** Taking care of your emotional well-being is essential. If you're carrying emotional pain or trauma, consider talking to a therapist. They can help you work through these feelings and find peace.
- **Breast Health:** For your breasts, it's a good idea to do monthly self-exams. This helps you get to know your body and spot any changes early. And don't forget to schedule regular mammograms to make sure everything's okay.
- **Cervical Health:** Keeping an eye on your cervical health is vital too. Make sure to attend regular cervical screenings. These screenings help catch any potential issues early on, so you can stay healthy.
- **Vaginal & Urinary Health:** For localised relief, you can consider localised oestrogen therapy. It's a way to target and address specific symptoms.
 - **Vaginal Dryness:** To combat vaginal dryness, you can use moisturisers (like "Yes" and "Replens") and lubricants for sex (such as "Yes" or "Sylk"). These products can help ease discomfort and enhance your comfort.
 - **Urinary Symptoms:** If you're experiencing discomfort or increased frequency in urination due to menopause, localised vaginal oestrogen and pelvic floor exercises could help but make sure to see a doctor to help you find ways to manage these symptoms.

- **Avoid Harsh Soaps:** Opt for gentle cleansing by using emollients like Dermol 500, E45, Cetaphil, etc instead of harsh soaps. This helps maintain the delicate balance of your intimate areas.
- **Regular Monitoring:** To ensure your well-being during post-menopause, keep up with annual or biannual check-ups. This practice helps you stay on top of your health and address any concerns promptly.



Congratulations on Your Journey to Understanding Menopause

Well done for educating yourself and taking charge of your health. Now that you've armed yourself with essential knowledge about menopause, it's vital to recognise that support is a vital part of effectively managing menopause and perimenopause symptoms.

Seeking help is more than just a step; it's a significant move towards better well-being. It's a way to enhance your current quality of life by addressing health changes proactively. It sets the stage for a healthier, more fulfilling future. Professional guidance acts as your trusted guide, offering valuable insights and a range of treatment options. It's like having an expert companion on your journey who helps you make informed choices for your health.

Remember, you're not alone on this journey, and I am ready to support and help you navigate the exciting, sometimes challenging, and ultimately transformative terrain of menopause.

You can reach me through my website at www.drshocares.com

Menopause Word Search

K	O	O	J	V	H	W	H	J	M
M	S	V	J	A	K	Q	O	O	E
E	E	A	R	G	M	E	R	E	N
N	X	R	E	I	D	G	M	S	T
O	L	I	A	N	N	S	O	T	A
P	J	E	O	A	T	S	N	R	L
A	H	S	M	S	L	D	E	O	L
U	H	O	E	D	O	L	E	G	O
S	W	T	Z	U	B	K	O	E	A
E	X	E	R	C	I	S	E	N	D
X	F	E	R	T	I	L	I	T	Y
G	P	E	R	I	O	D	S	B	I

Words to find: HORMONE, MENTAL LOAD, EXERCISE, OESTROGEN, VAGINA, MENOPAUSE, TEST, PERIODS, SEX, OVARIES, FERTILITY, WOMAN

Too old to strength train? Absolutely not!

During menopause, maintaining your physical strength is crucial for overall health. Let's explore why strength training is beneficial and discover a few effective exercises to keep you strong and feeling great.

The Benefits of Strength Training:

- **Strong Bones:** Prevent bone loss and maintain bone density.
- **Muscle Maintenance:** Counteract muscle loss and increase metabolism.
- **Joint Support:** Strengthen muscles to protect your joints.

Effective Exercises:

- **Squats:** Work your legs and core by standing up and sitting down.
- **Push-Ups:** Build upper body strength by pushing up from the floor.
- **Lunges:** Strengthen leg muscles by stepping forward and back.
- **Planks:** Improve core stability by holding a straight-body position.
- **Bicep Curls:** Tone your arms with controlled weight lifting.

Getting Started:

- Consult your healthcare professional before beginning if you have any concerns.
- Begin with light weights or resistance bands.
- Aim for two to three strength-training sessions per week to maintain your strength and well-being.



Embrace Your Inner Beauty

Menopause is a time to embrace your inner and outer beauty. These affirmations can help you feel confident and sexy in your skin:

"I am confident and beautiful just the way I am."

"My body is a work of art, and I cherish every curve and line."

"I radiate sensuality and allure."

"I deserve love and pleasure in my life."

"I am in control of my desires and unapologetically embrace them."

"I am a vibrant and confident woman."

"I love and appreciate my body for all that it is."

Repeat these affirmations daily to boost your self-esteem and confidence during this empowering stage of life.

Daily Menopause Checklist

Morning:

Morning Affirmations: Start your day with positive affirmations to boost your self-esteem and confidence.

Hydrate: Drink a glass of water to kickstart your hydration.

Healthy Breakfast: Fuel your body with a balanced breakfast that includes whole grains, fruits, and lean protein.

Supplements: Take any menopause-specific supplements or medications as recommended by your healthcare provider.

Throughout the Day:

Stay Hydrated: Continue to drink water throughout the day to stay well-hydrated.

Mindful Breaks: Take short, mindful breaks during the day to reduce stress and improve focus.

Healthy Snacks: Opt for nutritious snacks like fruits, nuts, or yoghurt to maintain energy levels.

Stress Management: Incorporate stress-reduction techniques, such as deep breathing or meditation, during the day.

Evening:

Balanced Dinner: Enjoy a well-balanced dinner that includes vegetables, lean protein, and whole grains.

Exercise: Engage in a short exercise routine, whether it's strength training, yoga, or a brisk walk.

Self-Care: Allocate time for self-care activities like a warm bath, reading, or relaxation exercises.

Sleep Routine: Establish a calming bedtime routine to promote quality sleep. Ensure you're getting 7-9 hours of rest.

Before Bed:

Gratitude Journal: Reflect on your day and jot down a few things you're grateful for.

Evening Affirmations: End your day with affirmations that promote self-love and positivity.

Nighttime Hydration: Have a small glass of water to stay hydrated while sleeping.

Menopause is a transformative journey, and this checklist can help you focus on self-care, maintain a healthy lifestyle, and manage the changes that come with this stage of life.

Menopause Symptom Checker

Please rate on a scale 0-5 from no symptoms to very severe symptoms

Symptom Category	Symptom	Date	Date	Date
Menstrual Changes (Only for perimenopausal women)	Irregular periods			
	Changes in menstrual flow			
	Skipped periods			
Vasomotor Symptoms	Hot flushes			
	Night sweats			
Sleep Disturbances	Difficulty falling asleep			
	Trouble staying asleep			
	Restless sleep			
Emotional and Mood disturbances	Mood swings			
	Irritability			
	Anxiety			

	Feeling persistently sad			
Vaginal changes	Vaginal dryness			
	Discomfort during intercourse			
Sexual Health	Loss of libido (sex drive)			
	Changes in sexual satisfaction			
Physical changes	Weight gain			
	Changes in hair texture or thickness			
	Changes in skin elasticity or moisture			
Cognitive Changes	Difficulty concentrating			
	Memory lapses or Forgetfulness			
	Mental fatigue			

You can use this table to tick the symptoms you are experiencing, making it a straightforward tool for monitoring over time ideally every three to six

months particularly following an intervention, and communicating your menopausal symptoms with healthcare providers.

I AM CONFIDENT AND BEAUTIFUL JUST THE WAY I AM

Lined area for writing.

MY BODY IS A WORK OF ART, AND I CHERISH EVERY CURVE AND LINE

[illegible]

This image shows a full page of blank white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for writing or drawing. There are no margins, text, or other markings on the paper.

I AM IN CONTROL OF MY DESIRES AND UNAPOLOGETICALLY EMBRACE THEM

I AM A VIBRANT AND CONFIDENT WOMAN

I LOVE AND APPRECIATE MY BODY FOR ALL THAT IT IS