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## **More than just hot flushes**

Aging is gender specific: increasingly, the needs of women have been found to differ from those of men, particularly after menopause. Midlife and the onset of the menopause is a phase of considerable stress for women as they are confronted with the loss of their youth, reproductive function and familiar menstrual cycles. Additional concerns may include children leaving home, ill health and death of parents and partners and career changes. Bothersome physical symptoms of the menopause include hot flushes, night sweats, insomnia, mood swings and vaginal dryness.

### **Menopause and Hot flushes**

Menopause is defined as the permanent cessation of menstruation after 12 consecutive months resulting from loss of ovarian activity. Perimenopause refers to the menopause transition years; both the time leading up to menopause and the first year after menopause.

Women, doctors and society associate the increasing frequency and severity of hot flushes with the onset of menopause. Additionally, the decline in ovarian hormones combined with declining ovarian reserve may be the mechanisms that can explain sexual dysfunction, disturbed sleep, enhanced bone turnover and low bone mineral density.

The treatment of gender-specific conditions such as climacteric symptoms holds the potential to provide a better aging experience for many women. With modern medicine it is possible to prevent or slow the progression of devastating degenerative conditions, particularly at the time of menopause.

Studies show that the use of hormone replacement therapy, even when initiated years after the onset of menopause, can improve health-related quality of life. Despite almost universal recognition that estrogen therapy is an effective approach to relieve symptoms resulting from natural or surgical menopause, the

perceived and actual risks associated with hormonal therapies remain the main reason why women choose not to use them.

### **Menopause and Heart attack**

Soon after menopause women face an increased risk of heart attack; this is attributed to the combined actions of aging and ovarian hormone depletion. Moreover, oophorectomy in both premenopausal and postmenopausal women is linked to an increased risk of cardiovascular disease and is the major cause of death for women.

The impact of hormone therapy (HT) on cardiovascular disease remains an area of major interest. It is an accepted fact that estrogens improve blood vessel function and many studies have shown a significant decrease in major coronary events in postmenopausal women receiving HT. However, if most women and doctors believe that the most profound impact of menopause is a sensation of extreme heat and cold, it will not be treated as a critical health concern. Consequently, there exists a widespread notion that there is little need for HT treatment.

Despite considerable evidence to the contrary, the prevailing belief that the risks of hormone therapy outweigh the benefits dissuade many doctors from counselling their patients on the most effective treatment in a fair, balanced and accurate manner.

### **Hormone Replacement Therapy may reduce risk of heart attack**

Hormone Replacement Therapy (HRT) is intended to alleviate, treat and prevent conditions such as cardiovascular disease and osteoporosis. It can be started whenever the woman feels ready. The most important issue is that the woman is ready for the therapy; her doctor will be able to tailor the therapy specifically to her and the regimen and the route of administration can be explored.

Developing breast cancer is the major concern of many women when considering hormone therapy. Recently, the FDA approved the prescription of Raloxifene for decreasing the breast cancer risk in postmenopausal women.

Supplements have been studied for their effect on the symptoms of menopause; red clover extract reduces osteoporosis and cardiovascular risk and is also beneficial to patients suffering from hyperglycemia, hypertension, dyslipidemia and obesity. Diet supplements like calcium with vitamin D, multivitamin formula for postmenopause and antioxidants can also be considered.

Complimentary Alternative Methods can be used together with hormone therapy: yoga and aerobic physical exercise have been shown to have positive benefits on health.

The NAMS (North American Menopause Society) issues a positional statement on hormone replacement therapy every year and this can be obtained from their web site. It acts a guideline for women requiring HRT and doctors dispensing it and is a good starting point for any women interested in hormone therapy. With this information, one can make an informed decision on hormone therapy before seeking a doctor's help in finding the right combination of hormones and regimen.

Women should feel that they can lead a healthy life even if their ovarian function has ceased. It is only through informed and expert guidance that they can attain the healthiest condition possible at this time in their life. Menopause is a natural event; a time when a woman has to re-evaluate herself, both physically and mentally, and consider how best to enjoy the benefits that she has built up in her youth.