




# Menopause

Menopause is a physiologic transition experienced by all women at midlife. Symptoms can have a variable impact on quality of life, but can be severe and disabling. Registrars manage fewer menopause-related problems than established GPs, with about 3.5% of consultations with women aged 45-64 years menopause-related. Due to the changing goalposts of evidence and guidelines over the past couple of decades, managing the menopause is a topic of confusion for many GPs, registrars included. Recent Australian research has demonstrated that registrars find management of patients with menopausal symptoms challenging, especially male registrars who see fewer such patients.

<p><b>TEACHING AND LEARNING AREAS</b></p> 	<ul style="list-style-type: none"> <li>• Definition of menopause and typical phases</li> <li>• Common physical, psychological and psychosexual symptoms</li> <li>• Assessment of peri-menopausal patients, including the appropriate use of investigations</li> <li>• Treatment options - non-pharmacological, CAMS and pharmacological</li> <li>• <a href="#">Menopausal Hormone Therapy (MHT)</a> – risks, benefits, types, use etc.</li> </ul>						
<p><b>PRE-SESSION ACTIVITIES</b></p>	<ul style="list-style-type: none"> <li>• Review the <a href="#">Menopause health professional tool</a> from Jean Hailes – an excellent overview</li> </ul>						
<p><b>TEACHING TIPS AND TRAPS</b></p> 	<ul style="list-style-type: none"> <li>• Only 20% of peri-menopausal women will seek the help of their GP, so opportunistic enquiry is important</li> <li>• Exclude thyroid disease, diabetes, iron deficiency and drug side effects as causes of menopausal-like symptoms</li> <li>• Exclude gynaecological pathology in patients with peri-menopausal menorrhagia</li> <li>• Menopausal management is a good opportunity for assessment of CV risk, emotional wellbeing, and other age-appropriate screening</li> <li>• Depression and anxiety are common in peri-menopausal women</li> <li>• Don't forget about contraception!</li> <li>• Hormonal testing to diagnose menopause is unreliable and unnecessary in most cases</li> <li>• Combined oestrogen/progestogen therapy, but not oestrogen alone, increases the risk of breast cancer after 3-5 years of use - the decision to continue combined MHT after this time should be made after reviewing risks, benefits, and symptoms</li> </ul>						
<p><b>RESOURCES</b></p> 	<table border="1"> <tbody> <tr> <td data-bbox="327 1666 438 1839"><b>Read</b></td> <td data-bbox="438 1666 1498 1839"> <ul style="list-style-type: none"> <li>• AFP article (2011) - <a href="#">Menopausal transition</a></li> <li>• <a href="#">Bioidentical Hormones</a> - Jean Hailes</li> <li>• 2016 AAFP article – <a href="#">Hormone Therapy and Other Treatments for Symptoms of Menopause</a></li> <li>• 2010 Aust Prescriber article – <a href="#">Managing menopausal symptoms</a></li> </ul> </td> </tr> <tr> <td data-bbox="327 1839 438 1973"><b>Listen</b></td> <td data-bbox="438 1839 1498 1973"> <ul style="list-style-type: none"> <li>• <a href="#">Tackling the Taboos of Menopause</a> – Comedian Jean Kitson on ABC Radio Conversations with Richard Fidler</li> <li>• <a href="#">Sex and the Perimenopause</a> - RACGP AFP Podcast</li> </ul> </td> </tr> <tr> <td data-bbox="327 1973 438 2033"><b>Watch</b></td> <td data-bbox="438 1973 1498 2033"> <ul style="list-style-type: none"> <li>• <a href="#">Managing menopause</a> - Jean Hailes webinar</li> </ul> </td> </tr> </tbody> </table>	<b>Read</b>	<ul style="list-style-type: none"> <li>• AFP article (2011) - <a href="#">Menopausal transition</a></li> <li>• <a href="#">Bioidentical Hormones</a> - Jean Hailes</li> <li>• 2016 AAFP article – <a href="#">Hormone Therapy and Other Treatments for Symptoms of Menopause</a></li> <li>• 2010 Aust Prescriber article – <a href="#">Managing menopausal symptoms</a></li> </ul>	<b>Listen</b>	<ul style="list-style-type: none"> <li>• <a href="#">Tackling the Taboos of Menopause</a> – Comedian Jean Kitson on ABC Radio Conversations with Richard Fidler</li> <li>• <a href="#">Sex and the Perimenopause</a> - RACGP AFP Podcast</li> </ul>	<b>Watch</b>	<ul style="list-style-type: none"> <li>• <a href="#">Managing menopause</a> - Jean Hailes webinar</li> </ul>
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<p><b>FOLLOW UP &amp; EXTENSION ACTIVITIES</b></p>	<p>Undertake an ALM on <a href="#">Managing Menopause: Weighing up the evidence</a></p>						



# Menopause

## Clinical Reasoning Challenge

Fran is a 48 year old cleaner who presents with a 9 month history of 'disabling' hot flushes and vaginal dryness. Her periods have been irregular over the past couple of years and her last period was about 12 months ago. She is otherwise generally healthy and is a non-smoker.

QUESTION 1. What additional symptoms should be sought to support a diagnosis of menopause?

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QUESTION 2. Examination is unremarkable. Fran had blood tests 12 months previously as part of a 45-49 yo health check, including BSL, lipids, TSH and iron studies. All were reported as normal.

What further investigations are indicated at this stage? List as many as required.

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QUESTION 3. What broad management strategies would you initially implement in managing Fran's presentation?

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## ANSWERS

### QUESTION 1

What additional symptoms should be sought to support a diagnosis of menopause?

- Night sweats
- Muscle/joint pains
- Anxiety
- Irritability
- Disturbance in quality of sleep
- Lessened concentration
- Fatigue
- Crawling sensations on skin
- Low libido

### QUESTION 2

Examination is unremarkable. Fran had blood tests 12 months previously as part of a 45-49 yo health check, including BSL, lipids, TSH and iron studies. All were reported as normal.

What further investigations are indicated at this stage? List as many as required.

- Nil
- Hormonal testing to diagnose menopause is unreliable and unnecessary in most cases

### QUESTION 3

What broad management strategies would you initially implement in managing Fran's presentation?

- Education
- Lifestyle measures e.g. reduce weight, reduce alcohol, increase activity, reduce caffeine, healthy diet
- Symptomatic measures e.g. vaginal lubricants
- Non-hormone treatment e.g. SSRIs
- CAMS e.g. black cohosh
- Menopausal hormone treatment – topical and systemic