* **34 MENOPAUSE SYMPTOMS**
	+ **COMMON SYMPTOMS**
		1. [Hot Flashes](http://www.34-menopause-symptoms.com/#hot_flashes)
		2. [Night Sweats](http://www.34-menopause-symptoms.com/#night_sweats)
		3. [Irregular Periods](http://www.34-menopause-symptoms.com/#irregular_periods)
		4. [Loss of Libido](http://www.34-menopause-symptoms.com/#loss_of_libido)
		5. [Vaginal Dryness](http://www.34-menopause-symptoms.com/#vaginal_dryness)
		6. [Mood Swings](http://www.34-menopause-symptoms.com/#mood_swings)

**CHANGES**

* + 1. [Fatigue](http://www.34-menopause-symptoms.com/#fatigue)
		2. [Hair Loss](http://www.34-menopause-symptoms.com/#hair_loss)
		3. [Sleep Disorders](http://www.34-menopause-symptoms.com/#sleep_disorders)
		4. [Difficulty Concentrating](http://www.34-menopause-symptoms.com/#difficulty_concentrating)
		5. [Memory Lapses](http://www.34-menopause-symptoms.com/#memory_lapses)
		6. [Dizziness](http://www.34-menopause-symptoms.com/#dizziness_during_menopause)
		7. [Weight Gain](http://www.34-menopause-symptoms.com/#weight_gain_during_menopause)
		8. [Incontinence](http://www.34-menopause-symptoms.com/#incontinence)
		9. [Bloating](http://www.34-menopause-symptoms.com/#bloating)
		10. [Allergies](http://www.34-menopause-symptoms.com/#allergies)
		11. [Brittle Nails](http://www.34-menopause-symptoms.com/#brittle_nails)
		12. [Changes in Odor](http://www.34-menopause-symptoms.com/#changes_in_body_odor)
		13. [Irregular Heartbeat](http://www.34-menopause-symptoms.com/#irregular_heartbeat)
		14. [Depression](http://www.34-menopause-symptoms.com/#depression)
		15. [Anxiety](http://www.34-menopause-symptoms.com/#anxiety)
		16. [Irritability](http://www.34-menopause-symptoms.com/#irritability)
		17. [Panic Disorder](http://www.34-menopause-symptoms.com/#panic_disorder)

**PAINS**

* + 1. [Breast Pain](http://www.34-menopause-symptoms.com/#breast_pain)
		2. [Headaches](http://www.34-menopause-symptoms.com/#headaches)
		3. [Joint Pain](http://www.34-menopause-symptoms.com/#joint_pain)
		4. [Burning Tongue](http://www.34-menopause-symptoms.com/#burning_tongue)
		5. [Electric Shocks](http://www.34-menopause-symptoms.com/#electric_shocks)
		6. [Digestive Problems](http://www.34-menopause-symptoms.com/#digestive_problems)
		7. [Gum Problems](http://www.34-menopause-symptoms.com/#gum_problems)
		8. [Muscle Tension](http://www.34-menopause-symptoms.com/#muscle_tension)
		9. [Itchy Skin](http://www.34-menopause-symptoms.com/#itchy_skin)
		10. [Tingling Extremities](http://www.34-menopause-symptoms.com/#tingling_extremities)

**OTHERS**

* + 1. [Osteoporosis](http://www.34-menopause-symptoms.com/#osteoporosis)

**22 Treatments:**

1. **Lifestyle changes:** according to a Yale University study, changes have been shown to ease hot flushes, including:

* maintaining a healthy weight
* stopping smoking
* creating a cooler environment,
* wearing light and layered clothing
* using fans when needed

2. **Relaxation:** group relaxation therapy can work, according to a Swedish study. Postmenopausal women with seven or more moderate-to-severe hot flushes a day had either relaxation therapy or no treatment. After 12 weeks, those who had the therapy, the number of hot flushes dropped by five a day compared to 1.9 in the other group.

3. **Exercise:** Results of a trial at Minnesota University showed that aerobic exercise three times a week for three months led to improvements in sleep quality, insomnia, and depression, but not in hot flushes.

4**. Yoga**: a study at the University of California San Francisco showed that eight weekly 90-minute sessions led to an average drop in hot flushes each week of 30.8 per cent. The researchers say bigger trials are now needed.

5. **Pine bark:** according to a Japanese study, a supplement based on pine bark eased almost all menopausal symptoms, but was particularly effective against hot flushes, night sweats, and insomnia.

6. **St John’s wort:** a study, at the University Hospital of Quebec, found that after three months of treatment, women taking it had significantly better quality of life and fewer sleep problems than those taking placebo.

7. **Black cohosh:** some studies have found it effective, while others have not. A study funded by the US National Institutes of Health found it to be no better than a placebo for relieving hot flushes. However a Swiss study based on more than 400 women showed it was effective and one in four German gynaecologists also considered it effective.

8. **Acupuncture:**the ancient Chinese therapy can reduces the severity of symptoms of hot flushes according to a study at Stanford University, where postmenopausal women with moderate to severe hot flushes were given nine sessions of acupuncture or placebo needles. Acupuncture resulted in a significantly greater decrease in the severity, but not the frequency, of hot flushes. Other studies have found no effects.

9. **Evening primrose oil:** some research shows that the third most popular natural remedy used by menopausal women is effective, but a report in the British Medical Journal found that gamolenic acid – a major compound in primrose oil - offered no benefit over placebo in treating menopausal flushing. But a study at Shahid Beheshti University of Medical Sciences in Iran with the same number of women, found primrose oil to be superior to placebo with a 42 per cent improvement in severity of symptoms.

10. **Hops:**a number of symptoms, including hot flushes, were eased among women taking an extract of hop flowers daily compared to those who had a placebo preparation. The research at Ghent University Hospital in Belgium found that the drop in hot flushes was significant after six weeks.

11. **Soy:** some trials show it is helpful, while others have found it ineffective. Its use is based on the idea that soy contains compounds called isoflavones which have some small oestrogen-like effect. A study at the University of Minnesota concluded, "Consumption of 30 mg/day of soy isoflavones reduces hot flushes by up to 50 per cent."

12. **Folic acid:** improvement in hot flushes was reported by 65 per cent of the women taking the [folic acid](https://www.saga.co.uk/magazine/health-wellbeing/treatments/vitamins-minerals/vitamin-b9-folic-acid-folate), (but also by 16 per cent of the placebo group!) in a study at the University of Alexandria. Two weeks after stopping the tablets, hot flushes recurred in all women who had showed an improvement. It’s thought folic acid may have an effect on the brain chemical serototin which has been implicated in hot flushes.

Can you delay the menopause through diet?

13. **Fish:**regular fish eaters are up to 40 per cent less likely to go through an early menopause, according to research at Demirel University Medical School, Turkey. In a group of women with an average age of 52, fish eating delayed menopause the most, while lifelong sun exposure increased the risk of early menopause the most.

14. **Red wine:** women who drink red wine have a lower risk of an early start to the perimenopause, the two to eight years leading up to the menopause itself, according to Harvard University research based on around 500 women aged 36 to 45, who were monitored for more than five years. One theory is that it is down to a non-alcoholic compounds in red wine, resveratrol, which has oestrogen-like actions.

15. **Milk:**results of a 20-year study of 46,000 women shows that the more low fat dairy products a woman consumed the later her menopause. The Harvard University researchers say that cow’s milk contains a number of compounds that appear to increase the amount of oestrogen and progesterone circulating in a woman’s body which might be responsible for the delaying effects. Low-fat dairy products contain more of these compounds which may help to explain why the same effects were not seen for full-fat dairy items.

What you need to know about complementary and alternative medicines for menopause symptoms

Talk to your doctor before using complementary and alternative medicines. Natural doesn’t always mean safe; some herbal therapies can be dangerous, and can interact adversely with prescription medications, yet in a study of users by Exeter University researchers, more than half of the women had not told their doctors about their use of complementary and alternative medicine.’

Before ruling out conventional treatments, it’s worth discussing HRT as well as other prescription medications with your doctor so you can weigh up the relative pros and cons of the different treatments and decide what’s best for you personally.

Medical treatments for menopause symptoms

16. **HRT:** Hormone replacement therapy is effective in treating hot flushes and night sweats, vaginal symptoms and urinary tract infections, such as cystitis. In the long-term, it can also reduce the risk of osteoporosis. It’s available as a cream or gel, a tablet, a skin patch or an implant.  Possible side include weight gain, tender breasts, nausea, headaches and mood changes. According to NHS Choices, HRT slightly increases the risk of developing breast cancer, endometrial cancer, ovarian cancer and stroke. The balance of benefits and possible risks will be different for each individual woman, so it's worth having a full discussion of the pros and cons with your GP before making a decision about treatment.

17. **Testosterone gel**: research at the Karolinska Hospital in Sweden shows that a gel rubbed on the skin boosts libido in post menopausal women.

18. **Antidepressants:**one study, based on more than 2,000 women, showed that compared with placebo, selective serotonin reuptake inhibitors (or SSRIs) such as Prozac were associated with a significant drop in frequency of hot flushes, and in their intensity. A second study showed that symptoms rapidly returned in more than a third of women after therapy was stopped.

19. **Tibolone:** a man-made hormone that works in the same way as HRT, it is effective in treating hot flushes and night sweats and it can also help prevent fractures of the spine. It may also improve sexual problems, such as a decreased sex drive. It has some risks, however, including a small increased risk of breast cancer, cancer of the womb and stroke. It is not suitable for women over 60.

20. **Clonidine:** a drug originally developed to treat high blood pressure, it has been found to reduce hot flushes and night sweats in some menopausal women.

21. **Gabapentin:** an anti-convulsant, used for treating seizures and pain associated with shingles, it has been shown to reduce symptoms according to a Wayne State University School of Medicine report, but it is not known how. A study involving 59 women found a reduction of hot flush frequency of 45 per cent compared to 29 per cent for placebo treatment.

22. **Neck cooler:**the Menopod, a handheld device with a small metal cold plate has been designed to stop hot flushes before they really start. It is held against the back of the neck at the first sign of symptoms, and is designed to re-set the body's natural heat controls whose malfunctioning is thought to be involved in hot flushes.

**There are two main types of HRT:**

* combined HRT (oestrogen and progestogen) – for women with menopausal symptoms who still have their womb (oestrogen taken on its own can otherwise increase your risk of [womb cancer](http://www.nhs.uk/conditions/Cancer-of-the-uterus/Pages/Introduction.aspx))
* oestrogen-only HRT – for women who have had their womb removed in a [hysterectomy](http://www.nhs.uk/conditions/hysterectomy/Pages/Introduction.aspx)

HRT is available as tablets, skin patches, a gel to rub into the skin or implants.

HRT is extremely effective at relieving menopausal symptoms, especially hot flushes and night sweats, but there are a number of side effects, including breast tenderness, [headaches](http://www.nhs.uk/conditions/Headache/Pages/Introduction.aspx) and vaginal bleeding. It's also associated with an increased risk of [blood clots](http://www.nhs.uk/conditions/thrombosis/pages/introduction.aspx) and [breast cancer](http://www.nhs.uk/conditions/Cancer-of-the-breast-female/Pages/Introduction.aspx) in some women.

HRT is not advisable for some women, such as those who have had certain types of breast cancer or are at high risk of getting breast cancer.

* **How to ensure you are experiencing menopause/diagnosis**

You may be offered a blood test but only if:

The blood test measures a hormone called FSH (follicle-stimulating hormone). FSH is found in higher levels in menopause.You should not be offered this test if you are taking a contraceptive containing oestrogen and progestogen or high-dose progestogen because the contraceptive changes your natural FSH levels.