

COPING WITH MENOPAUSE:

Not all WOMEN experiences menopause in the same way. For some, menopause can bring on an array of uncomfortable symptoms. Others may experience few if any discomforts. This information has been prepared to help you manage the most common changes associated with the midlife transition.

Relieving Hot Flashes/Night Sweats

- Identify and avoid your hot flash triggers. Common triggers include stress, caffeine, alcohol, spicy foods, tight clothing, heat, and cigarette smoke. Anxiety can trigger hot flashes and hot flashes can trigger anxiety.
- Keep the bedroom cool. Use fans during the day. Wear light layers of clothes with natural fibers.
- Exercise daily. Walking, hiking, swimming, dancing, yoga, and bicycling (with a helmet!) are good choices. Try not to exercise too close to bedtime, this can make it harder, not easier, to get a good night's sleep.
- Add soy protein, from food (tofu, soy milk, soybeans), not supplements, to your daily diet in place of animal protein.
- Despite heavy sales, marketing and promises, Estroven, Promensil, isoflavone and a myriad of other soy-enriched tablets have not been shown to help menopausal symptoms any better than placebo (sugar pills).
- Black cohosh (Remifemin and a host of other menopause supplements) can be used (cautiously) for hot flashes. This was approved by German Commission E for only six months of use. There have been reports of liver toxicity with black cohosh use. Also, avoid kava kava, valerian root, and beware that most herbal products are not regulated in the U.S. and some have been associated with liver toxicity.
- Antidepressants like Paxil (paroxetine, also sold under the FDA name Brisdelle), Effexor (venlafaxine), and Pristiq (desvenlafaxine) can help reduce hot flashes. So can Neurontin (gabapentin). All have risks and benefits.
- Hormone therapy (HT) is the most effective treatment for hot flashes and is FDA-approved for the management of menopausal symptoms. Any form of hormones, including 'bioidentical' hormones, have risks as well as benefits. This is why these medications require a prescription from a physician or other licensed medical care provider.

Sleep Hygiene

- Go to sleep and wake up at the same time every day, even on holidays and weekends.
- Use the bed for sleep and sexual activity only, not for reading, watching television, or working. Do not have a TV in the bedroom.
- Minimize device screen time, cell phone, iPad, etc., starting two hours before bedtime.
- Read something kind of boring, like non-fiction or a cookbook, before bedtime.

- Avoid napping during the day.
- If sleep does not begin within 20 to 30 minutes, leave the bed and return when drowsy.
- Keep the room quiet, cool, and dark.
- Use earplugs to decrease ambient noise.
- Avoid caffeine within six hours of bedtime.
- Avoid alcohol and smoking at least two hours before bedtime.
- Establish relaxation pre-sleep rituals, such as a warm bath or reading.
- Exercise earlier in the day, not before bedtime.
- Consider the use of an app or device (white noise, relaxing sounds or speech).
- Read "[Getting a Good Night's Sleep](#)" by Dr. Nancy Foldvary.
- Magnesium: consider magnesium glycinate (120mg) or magnesium citrate (CALM-350mg), one dose at bedtime. Mag Oxide is not as well absorbed, possibly causes GI side effects. Magnesium L-threonate, a “designer” magnesium, very expensive and heavily promoted for brain health, is not much better than less costly alternatives.

Coping with Mood Swings, Fears, Anxiety and Depression

- Find a self-calming skill to practice, such as yoga, meditation, mindfulness.
- Avoid sedatives, sleep-aids, or tranquilizers if possible
- Consider prescription anti-depressants.
- Engage in a creative outlet that fosters a sense of achievement.
- Stay connected with your family and community; nurture your friendships.
- Consider joining an online (or real world) support group.
- CBT – cognitive behavior therapy can be very helpful.
- Hormone therapy – in many cases people starting hormones are able to get off their sleeping pills, anti-depressants and tranquilizers!

Relieving Vaginal Dryness and Painful Intercourse

- For everyday moisture, try vaginal moisturizers like Replens, KY Liquibeads or Silk-E or natural oils like coconut or vitamin E. These are not for sex.
- For sexual activity, use lubricants like Uberlube, Astroglide, KY-Liquid. Newer products are Hyaluronic Acid based: Revaree, Good Clean Love BioNourish Ultra Moisturizing Vaginal Gel, HYALO GYN®
- Local prescription estrogen treatments for the vagina/urethra include estradiol cream, estradiol vaginal tablets, or Estring vaginal ring (can be moderately costly). Other medications such as vaginal Imvexxy or IntraRosa or oral Osphena (60mg) are effective but can be very costly.
- For some patients, topical estradiol cream and/or testosterone cream applied to the vulva are helpful.
- Topical lidocaine cream prior to sex can be helpful if there is severe pain at the opening (5% lidocaine cream – on amazon).

Sexual Vibrancy

- App: <https://meetrosy.com/>. "Access a wealth of knowledge from medical experts at your fingertips in fun, easily digestible videos that mirror the experience on your favorite social media platforms."
- OMGYes is a subscription site with in-depth sexual wellness education for women of all ages.
- Various sex toys are available online.
- Find a Sex Therapist - Society for Sex Therapy and Research (SSTAR) or American Association of Sexuality Educators, Counselors and Therapists (AASECT).

Preventing Osteoporosis

- Bone health is rarely emphasized when teaching people about what's best for their health and nutrition. Bone mass should be built up as best as possible starting in your twenties and thirties. Tell your kids and your friends how extremely important it is to develop good bone mass when they're young. Bone mass starts to decrease after age 35!
- Many factors affect bone mass such as diet, genetics, physical activities, substance use or abuse, medications, and body size, shape and height. Some of these are not modifiable but many are.
- Calcium and vitamin D can slow bone loss and may decrease fractures. Consume 600-1,200 milligrams of calcium a day in divided doses. Ideally get as much calcium as you can from food, not pills. Good sources of calcium are calcium supplements, like Tums, some low-fat dairy products; green leafy vegetables such as broccoli, kale and spinach greens; almonds; and plant milks like soy, almond, oat milk (for plant milks read the label, make sure it says calcium-fortified). Calcium CITRATE (like Citracal-D or CalTrate) is well absorbed with or without food/stomach acid and is the preferred calcium supplement in women on stomach acid blockers and women with a history of kidney stones.
- Vitamin D aids in the absorption of calcium and stimulates bone formation. Consume at least 2,000 IU international units of vitamin D a day and up to 5,000 IU daily if you have been found to be low on a blood test. (what is a "normal" serum level of Vitamin D? There is not an agreed-upon answer. MD's usually say anything above 20 is good. Labs will flag any level below 30 as abnormal. Gurus and "Functional" clinics want you to be at 50, even 70! Note that levels of 100 can be toxic. Too much of a good thing is not always good.)
- Alcohol and smoking are terrible for bone health. Drinking cola, which has phosphates, pulls calcium out of the body. Vegan diets are often low in calcium. People with eating disorders are at high risk for osteoporosis at a young age. Medical diseases such as celiac, malabsorption (Crohn's), hyperthyroidism, or excess cortisol can increase the risk of osteoporosis. Medications such as steroids, acid-blockers, and some anti-depressants have been correlated with bone loss.
- Exercises that increase bone mass are the ones that make the muscles work against gravity. Walking is not as helpful for bone as previously thought. Muscle-building exercise may reduce bone loss and fractures and improve balance. High impact activities like jumping, carrying a load (walking uphill, walking while wearing weights-called

rucking), have been shown to be far more effective activities for bone health than aerobic activities like swimming, walking, and running.

- The Bone Health & Osteoporosis Foundation (BHOFF) is the leading health organization dedicated to preventing osteoporosis and broken bones, promoting strong bones for life. VISIT: <https://www.bonehealthandosteoporosis.org/>

Preventing Heart Disease (Lowering your risk)

- Eat a variety of vegetables, fruits and whole grains, including soy foods (NOT supplements). Minimize ultra-processed carbs, minimize sugar or pure starchy foods like pasta, potatoes, breads, and other baked goods. NO SUGARY DRINKS. Avoid fructose and agave, these are low glycemic but poison for the liver.
- Consume foods rich in omega 3 fats such as flaxseed, fish, tuna, salmon, and walnuts and almonds at least twice a week. Learn about good fats and bad fats, there is new information that might surprise you. Eggs are good for you for example!
- Vegan diets can lower heart disease, depending on what you eat. Tortillas, potato chips and french fries might be vegan but are not healthy.
- Ideally get at least 30-60 minutes of moderate exercise every day! 150 minutes per week is promoted as a goal, this is the MINIMUM you need for good heart health. 300 minutes per week is far better.
- Engage in activities that result in a sustained or intermittent increase in heart rate: gardening, walking, dancing, stair climbing, roller blading, any aerobic exercise. The activity period does not need to be continuous. Consider getting a sensor to monitor your activity and strive to walk at least 10,000 steps a day. Typically about 2,000 to 2,200 steps is one mile.
- Do NOT smoke. Even 1-2 cigarettes a day increases your risk.
- Avoid being sedentary during the day. This can be as bad for your heart long-term as smoking a pack a day.
- Maintain a healthy weight. Know your BMI (body mass index) and strive to keep it in the normal range (19-25).
- Control or manage high blood pressure. Even numbers over 130/80 should be managed or treated.
- Diabetes prevention and control is important as diabetes is a 'heart disease equivalent'.
- Learn about insulin resistance. Elevated fasting Triglycerides can be due to insulin resistance. You can have a normal HbA1c and still potentially be insulin resistant.
- If Cholesterol is high, meaning high LDL and low HDL, then lowering this has been shown to reduce the risk of heart disease.
- Consider having a HS-CRP (high sensitivity C-Reactive Protein) blood test for further cardiac risk assessment if you have borderline elevations in the blood lipids/fats.
- Consider a CAC test (coronary artery calcium score).
- Ask for an advanced lipid panel. Check your LDL particle size and number, check for apoB and LpA.

- Take vitamin supplements under physician guidance. Choose ones that contain antioxidants including vitamins E and C and B complex like Centrum Silver. Avoid B-carotene supplements. If menopause, do NOT take vitamins with extra iron. It can accumulate in the body and damage organs like the heart or liver.
- Take one baby aspirin daily ONLY if approved by your physician based on your risk for heart disease.

STEPS TO IMPROVE URINARY LEAKAGE (URINARY INCONTINENCE):

- Drink modest (not large) amounts of fluids: 4-6 glasses of 8 ounces in 24 hrs is fine unless you are perspiring heavily due to exercise, weather, or maybe hot flashes (see HF advice above). Too many people drink too much water daily, leading to excessive trips to the restroom to eliminate the unnecessary extra water ingested.
- Stop drinking fluids after dinner.
- Empty the bladder regularly, almost on a schedule. Don't wait until the last minute. Start every 2-3 hours. If you stay dry, increase the time between urinations. If you leak, decrease the time between trips to the restroom.
- Do Kegel exercises. Try to follow the 5-5-5 rule. Hold the Kegel muscle for 5 seconds, do 5 in a row, repeat this 5 times a day. Do not do Kegels when emptying the bladder. It can “confuse” the complex bio-neuro-muscular process known as micturition (“peeing”).
- Keep a voiding log. During a typical day write down fluid intake, when you urinate, any accidents and when they occur (after coughing, sneezing, laughing, because you were not able to reach the bathroom in time, etc.). Ask the doctor to review it with you.
- Avoid bladder irritants such as smoking, caffeine, acidic foods or juices (tomatoes!), spicy foods.
- If you decide to try a medicine, take it regularly as prescribed. Specialized medications can help the bladder relax and hold urine better.
- Try to avoid constipation, avoid coughing if possible, minimize jumping or carrying heavy loads.
- For stress urinary leakage (with laugh, cough, sneeze), there is an over-the-counter disposable vaginal device, that is inserted like a tampon but is not absorbent, called Poise Impressa. It can be worn for up to 8 hours per day and is available over the counter. www.impressa.com.
- Urologists have many additional strategies, and we can discuss a referral as needed.