



HIDDEN PROBLEMS OF THE MENOPAUSE



Consultant Gynaecologist Mr Tim Duncan, talks to Debbie Thorpe of Spire Norwich Hospital about problems, and hidden problems, which may arise as a consequence of the menopause. Both women and men should take note.

Mr Tim Duncan gets straight to the point: “Firstly, what do we mean when we use the phrase ‘hidden problems’? Everyone knows that the menopause is a time of significant change in a woman’s body and that women can suffer from hot flushes and night sweats. Some are also aware that an early menopause places a woman at a higher risk of osteoporosis, or ‘brittle bone disease’. What many don’t know is that there are many common problems that are worsened by the changes of the menopause. In addition, there are some symptoms that women simply don’t attribute to it.

“The menopause is a natural process involved in getting older, but just because it is a natural phenomenon does not mean that it can’t produce problems and issues that affect quality of life. Surprisingly, although the majority of women will experience some degree of menopausal symptoms, many are reluctant to discuss these issues. This masks the true burden to women’s health as they enter middle age. So it is important that women are aware of the potential impact of the menopause and are empowered to seek help from a medical professional, if needed.”

So, why do I just feel different? Many of the changes that the menopause brings affect the functions of the nervous system and will be beyond your conscious control.

Mood changes with the menopause

Some of the changes are similar to those that can happen in the normal menstrual cycle, mood can lower to the point where depression may be diagnosed.

Memory and the speed of thinking

These also decline with the menopause. A sure sign is the sudden appearance of notes and reminders around the home of a recently menopausal woman.

Tiredness

Women going through the early menopausal years, known as ‘the change’, are often tired during the day because their sleep is disturbed. They may not be aware of waking through the night but the depth of their sleep is often disturbed by many episodes of hot flushes. This means some women get less of the better quality REM sleep.

Do I look different?

The simple answer is “yes”. Our skin becomes coarser and less elastic as we get older, often resulting in the appearance of lines and wrinkles. Another change in all women is the fact that the distribution of fat around the body changes, leading to the impression of weight gain.

In the pre-menopausal woman, the hormone oestrogen produced by the ovaries helps maintain the female body shape. When the ovaries stop working after the menopause the fall in oestrogen levels results in the fat from your breasts and bottom gradually moving to your tummy.

I feel less like sex

Again, stresses Mr Duncan, this is a common problem. “So many things can influence a woman’s desire for sex,” he says. “It is a sad reality that there are many women in society who have concerns about their sexual desire but who feel there is nothing that can be done and consequently don’t seek help. We all know that stress, relationships, finances, general health and the overall home environment can affect our desires. The previously mentioned changes in sensation and appearance can all conspire to make a woman feel less feminine. Research has clearly shown that if a woman feels less feminine she will have a reduced desire for sex.”

“Oestrogen has many important actions on the vagina. It helps to keep the delicate vaginal lining lubricated, supported and stretchy, all features that help to keep sex enjoyable and pain free. After the menopause the loss of these effects can lead to painful sex, cystitis and in some cases soreness and bleeding. Research has again shown that if sex becomes painful during the menopausal years this will slowly but steadily reduce a woman’s libido.”

What can be done?

Hormone replacement therapy

Hormone replacement therapy (or HRT) can address many issues very well. “There have been many scare stories in the media referring to the risks that taking HRT can bring,” says Mr Duncan. “However, recent studies have demonstrated that use of HRT in the early menopausal years can have profound health benefits. It is



Women going through the early menopausal years are often tired because their sleep is disturbed by hot flushes, resulting in less of the better quality REM sleep
Picture: GETTY IMAGES

only when HRT use is extended into later menopausal life that significant increases in the risk of heart disease, breast cancer and stroke are seen.

“So if you are considering HRT it is important you discuss how it can help you with an experienced healthcare professional. If you are suitable for HRT only they will be able to make sure that you take the right preparation for the right duration.”

Self help

You can help too, for example stopping smoking, weight control and taking regular exercise can significantly improve many aspects of the menopause, including osteoporosis and body shape.

Non-Hormonal Medication

“Mood changes are often treated with antidepressant drugs,” says Mr Duncan. “These are usually effective but are considered by many as over-treatment, often attracting unwanted side effects. Good quality counselling and/or addressing other problems contributing to low mood may be all that is required. In some individuals that have a medical need to avoid HRT then antidepressant medicine can have benefits in relation to mood and hot sweats.”

Mr Tim Duncan has significant experience of helping women deal with the demands and stresses that come with this challenging phase in life. “Through a systematic and detailed assessment of an individual’s needs, significant enhancement of quality of life can be achieved. I believe life after the menopause should be an enjoyable, rewarding and fulfilling time in a woman’s life.”

ASK THE SPECIALIST

Mr George Smith,
Consultant
Orthopaedic
Surgeon explains
bunions.



I’m a 43-year-old lady and both my big toes have slowly deformed at such an angle that they now push into my second toes, and very painful growths have formed. I’m told these are bunions. I’ve been wearing orthotics in my shoes for some years, but the condition if anything is getting worse. Would it help if I had the bunions removed surgically?

What you describe certainly sound like bunions. The medical term for a bunion is hallux valgus. It’s a bony growth on the knuckle of the big toe which allows the big toe to drift towards the lesser toes. Unfortunately, this often causes further deformities to develop in the lesser toes. The condition can result from wearing tight or ill-fitting shoes over many years, and it does tend to run in families – with ladies being more susceptible than men.

You mention that you are using orthotics – typically a contoured insole worn in the shoe to help realign the bones in your foot. If you haven’t had your orthotics reviewed for a while I would suggest that you return to your podiatrist to check that they fit correctly. Many patients also find relief from wearing bunion pads and wide-fitting shoes.

If you have tried all these without success surgical treatment may be an option. Surgery for a bunion should only be considered if your symptoms are severe and cause considerable discomfort.

The exact procedure will vary depending on the type and size of the bunion. Typically it involves making a small incision, removing the bunion and re-aligning the big toe. The bones will be stabilised using screws. At the end of the operation the incision will be closed with stitches and the foot will be bandaged. To protect the toe it will be necessary to wear a special post-operative shoe for the first six weeks.

If your bunion is causing significant discomfort contact Spire Norwich Hospital and arrange a private appointment with Mr George Smith on 01603 255614 or request a referral from your GP.

Keep questions brief and send them to Ask the Specialist, Helen Harper, Spire Norwich Hospital, Old Watton Road, Colney, Norwich NR4 7TD. Questions will be handled with discretion and you will remain anonymous. Specialists cannot enter into direct correspondence.



Picture: GETTY IMAGES

As a final thought Mr Duncan suggests: “The menopause is a time of great change in a woman’s body. Some of the hidden issues discussed are embarrassing and women may be reluctant to raise them with their GP. If you take home one message from this article it is that quite often something can be done to help. Try not to be too worried – we’ve probably heard it before and the treatment may be more straightforward than you think.”

For further information about gynaecological concerns arrange an appointment with your family doctor or call 01603 255614 to make a private appointment with Consultant Gynaecologist Mr Tim Duncan.

The content of this page is provided for general information only. It should not be treated as a substitute for the professional medical advice of your doctor or other healthcare professional.

WHERE TO START

If you don’t know where to start... start with an expert
FREE Gynaecology Open Evening: The menopause, at Spire Norwich Hospital
Thursday, June 29, 2019
To receive your free ticket (limited numbers), please call Debbie Thorpe or Esther Haynes on 01603 255515 leaving your name and telephone number.

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