🕐 Education

Menopause

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An overview of menopause

Menopause is the natural end of menstrual periods and marks the end of fertility. Natural menopause occurs when the ovaries stop producing eggs and oestrogen levels are reduced. It is diagnosed 12 months after the last period. The years leading up to that point, when women have hormonal fluctuations and irregular menstrual patterns, are called the menopausal transition or perimenopause.

The menopausal transition most often begins between ages 45 and 55, with the average age being 51 to 52. It usually lasts about four years but can last for over a decade and causes symptoms in about 80% of women. Many factors can influence hormone production, which triggers menopause, including genetics, diet, and lifestyle factors. Although this is a natural process, it can be challenging and produce a range of symptoms.

Other women may experience early menopause because of premature ovarian insufficiency (POI), infection, autoimmune disorders, cancer treatments, hysterectomy, and removal of the ovaries (oophorectomy).

The primary symptoms of menopause are hot flashes and night sweats, which are associated with sleep disturbances and mood disorders. Severe symptoms affect about 20% of women and can significantly impact daily activities and quality of life. The menopausal transition affects each woman uniquely, and the long term may lead to changes in body composition, cardiovascular health, bone density and cancer risk.

Conventional treatments for menopause include hormone replacement therapies, vaginal oestrogen, antidepressants, gabapentin, and medication to reduce blood pressure or prevent osteoporosis. Hormone replacement therapies may be effective in reducing symptoms; however, some may be associated with adverse side effects such as headache, fatigue, nausea/vomiting, vaginal bleeding, breast pain, and increased risk of breast cancer. A wide range of herbal, nutritional and lifestyle interventions can support symptom relief.



Menopausal stages

Reproductive stage	Regular menstrual cycles
Early perimenopause	Variable cycle lengthSymptoms of hormonal changes
Late perimenopause	 Cycles lengthen to three to twelve months apart Variable cycles can last for four years Vasomotor symptoms often begin during this phase
Menopause	Twelve months with no mensesOvaries stop producing eggsAverage age is 51 years
Post menopause	Four or more years with no menses.Increased risk of osteoporosis and cardiovascular disease

Common menopausal symptoms

• Hot flushes	Vaginal dryness
• Night sweats	Painful intercourse
 Insomnia and difficulty sleeping 	• Low libido
 Difficulty concentrating and brain fog 	 Crawling sensations on the skin (called formication)
Impaired memory	• Hair thinning or loss
Anxiety	• Dry skin
Irritability	Headaches and migraines
• Depression	Sore breasts

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Spotlight on hot flashes and night sweats

Hot flashes and night sweats are the most common symptoms of menopause, occurring in more than 70% of women and lasting up to 10 years after menopause. They emerge as oestrogen levels decline. There is also a link between the state of the nervous system, adrenal function, and the hypothalamuspituitary-adrenal (HPA) axis.

The intensity and duration vary widely between women. Some will begin experiencing them in their mid-30s and continue to experience them well after menopause. Other women will not experience them until menopause or at all.

Each hot flash can last from a few seconds to hours. They typically start in the chest area and spread to the upper chest, neck and face. The flushes may feel like a burning, overheating sensation and may spread over the whole body. Feelings of anxiety, heart palpitations and rapid breathing are also common.

Holistic treatment aims

• Support secondary hormone production, relieve menopausal symptoms and support overall heart, metabolic, cognitive and bone health.

Herbal recommendations

• Please consult your health professional for the prescription of herbal, nutritional and lifestyle recommendations.

Vitex agnus-castus (Chaste Tree Berry)

- Used to relieve symptoms associated with female hormonal imbalances in infertility, menstrual disorders, premenstrual disorders, and menopause
- May improve menopausal symptoms including hot flashes, sleep disturbance, anxiety, urinary incontinence, and vaginal dryness
- May be useful for the relief of PMS symptoms in perimenopausal women with irregular cycles
- May benefit withdrawal from hormone replacement therapy

Actaea racemosa previously Cimicifuga racemosa (Black Cohosh)

- May be beneficial for alleviating night sweats and hot flashes.
- Exerts beneficial effects on bone metabolism and may be useful in the prevention of osteoporosis
- Has been associated with liver damage in some people; however, long term (12 months) studies show that it is safe in healthy menopausal women

Glycyrrhiza glabra (Liquorice)

- May relieve severity and reduce incidence of menopausal hot flashes
- Caution: liquorice may increase blood pressure and is contraindicated in liver disease



Leonuris cardiaca (Motherwort)

- Frequently used in traditional Chinese medicine to aid the nervous system and improve menopausal related night sweats, insomnia, anxiety, and sleep
- A heart tonic which may improve heart palpitations, particularly with nervousness

Humulus lupulus (Hops)

- The female flowers have been used traditionally to treat sleep disturbances and menopausal symptoms
- There is some clinical evidence for improving menopausal symptoms including hot flushes, as well as improvement in anxiety, depression, and sexual dysfunction

Salvia officinalis (Sage)

- Widely used to help support temperature balance in t he body, reducing hot flushes, night sweats and excessive sweating
- Supports the nervous system and improves thought, clarity, and nervous exhaustion
- Often taken as a cool tea to relieve menopausal symptoms

Asparagus racemosa (Shatavari)

- A traditional Ayurvedic (Indian) herb used as a general female tonic
- Thought to help with libido and may help menopausal complaints such as hot flashes
- Preliminary evidence suggests it may improve muscle function in postmenopausal women

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Trifolium pratense (Red Clover)

- One of the most widely researched botanicals for menopause
- Clinical studies demonstrate its beneficial effects on menopausal hot flashes, cholesterol levels, vaginal health, and sexual wellbeing

Panax ginseng (Korean ginseng)

- An adaptogenic herb that may improve menopausal symptoms, stress, fatigue, physical exhaustion, sexual function and stamina
- Has been associated with postmenopausal vaginal bleeding (bleeding after menopause)

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Ziziphus jujuba (Ziziphus)

- A frequently used herb in traditional Chinese medicine that aids the nervous system and helps improve night sweats, insomnia, anxiety, and palpitations
- Often used in combination with liquorice for sleep disturbances and mood symptoms in menopause

Angelica sinensis (Dong quai)

- One of the most widely used traditional Chinese herbs for women's health, including period pain, menstrual irregularity and menopause
- May be beneficial for relieving hot flashes, although more clinical trial data is needed

Hypericum perforatum (St John's wort)

• Antidepressant herb which may improve hot flashes, menopausal symptoms, and depression in postmenopausal women

Passiflora incarnatus (Passionflower)

• Limited clinical evidence suggests it may improve menopausal symptoms such as mood, muscular pain, hot flashes, formication, headache and fatigue

Dioscorea villosa (Wild yam)

- Traditionally used to help support menopause via its oestrogenic effect on balancing hormones
- Has been used to support the management of hot flushes associated with low oestrogen, although evidence is lacking
- May reduce high cholesterol, a common occurrence in menopause

Valeriania officinalis (Valerian)

- A medicinal herb with benefits for improving sleep and reducing anxiety
- Can improve the quality of sleep in postmenopausal women
- Can decrease frequency and severity of hot flashes

Silybum marianum (Milk thistle)

- A powerful antioxidant herb with liver-protecting, antiinflammatory and antidiabetic actions
- Stimulates bone mineralisation and may prevent or delay bone loss in postmenopausal women
- Can decrease frequency and severity of hot flashes





Diet and lifestyle recommendations

Dietary inclusions

- Phyto-oestrogens are compounds in foods that act as weak oestrogens in the body and can reduce hot flashes and improve bone and heart health. Sources include:
 - » Soybeans and soy products (tempeh, tofu, soy milk)
 - » Sprouted beans alfalfa, redo clover, mung beans, split peas
 - » Nuts and seeds flaxseeds/linseeds, sunflower seeds
- Calcium and vitamin D-rich foods to support bone health, including:
- » Calcium-rich foods: dairy products, soybeans, tofu, sardines, salmon, egg yolk, green leafy vegetables, tahini, and brazil nuts
- » Vitamin D-rich foods: egg yolk, fatty fish like salmon, tuna and mackerel
- Good quality protein-rich foods to support muscles and bone health include eggs, meat, fish, legumes and dairy products, and protein powders
- A diet rich in fresh fruit, vegetables, whole grains, legumes, nuts, and seafood

Dietary exclusions

- Avoid foods and stimulants that can cause hot flashes, including chilli, spicy foods, caffeine and alcohol
- Limit the intake of refined sugar, foods high in salt and highly processed and fatty foods

Stress reduction

• Yoga, tai chi, deep breathing, vagal nerve stimulation, counselling/psychology, and mindfulness meditation

Exercise

- Incorporating a mix of daily exercise can improve menopausal symptoms and have long term benefits for improving heart and bone health, including:
 - » Low/high-impact exercise (e.g. jogging, running and brisk walking) to improve bone density
 - » Weight or resistance training to strengthen and increase muscle mass and increase balance and coordination
 - » Stretching and balancing to improve mobility and balance and minimise falls

Body temperature regulation

• Slight increases in body temperature can trigger hot flashes. Try to keep cool by dressing in light layers of clothing, opening windows or using a fan or air conditioner, sipping a cold drink, and applying a wet cloth to the skin

Disclaimer: This is not an all-inclusive comprehensive list of information. Consult a qualified healthcare provider before starting any therapy. Application of clinical judgement is necessary.