

# Menopause Overview for Primary Care

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**GP with a special interest in Women's Health**

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FSRH Advanced Certificate Menopause Care

FSRH Faculty Registered Trainer

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Besides clinical duties, revenue is generated from:

Lecturing fees, consultancy services, and travel reimbursements from the pharmaceutical sector.

Dr. Davis does not hold any shares in pharmaceutical companies.

# Declarations of interest



# When's coffee?

- 14:45



# What's in it for you?

*In the next 30 minutes you will be able to:*

Recognise menopause symptoms, know what treatments are available

Feel confident to signpost women to resources

Select suitable treatment options for women or refer as necessary



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# The impact of Menopause

- 76% of NHS workforce are female
- 1 in 6 women lost from the workforce
- 2/3 women report psychological symptoms



# How does a woman know when she has reached menopause?

- Perimenopause the roller coaster years
- Menopause is the last menstrual period
- Postmenopause is 12 months of no period
- FSH blood tests only if < 40 or diagnosis unsure



# MOST COMMON MENOPAUSE SYMPTOMS



DRY EYE



IRREGULAR  
MENSTRUATION



REDUCED LIBIDO



SLEEP DISORDERS



FATIGUE



HOT FLUSH



WEIGHT INCREASE



FREQUENT  
URINATION



CHANGES OF MOOD

# Signposting to information

- [Women's Health Concern | Confidential Advice, Reassurance and Education](#)
- [Rock My Menopause - Menopause Information](#)
- [Watch Davina McCall: Sex, Myths and the Menopause | Stream free on Channel 4](#)



# Hormone Replacement Therapy

17 Beta  
oestradiol

Progestogen



To bleed, or not to bleed? Which HRT is most suitable?

Sequential: If  
< 12 months  
since LMP

Continuous if  
> 12 months  
since LMP

# Oral or transdermal HRT ?

Transdermal oestradiol is recommended  
for those with a BMI > 30kg/m<sup>2</sup>

# Benefits and risks of HRT



# HRT benefits balanced with risks

- Symptom relief
- **Benefits > risks for most < 60 years**
- Cardiovascular
- Osteoporosis
- Side effects
- Individualised risks: establish and mitigate
- Breast cancer
- Venous thromboembolic

# Osteoporosis

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## Difference in breast cancer incidence per 1,000 women aged 50-59.

Approximate number of women developing breast cancer over the next five years.

NICE Guideline, Menopause:  
Diagnosis and management  
November 2015

### 23 cases of breast cancer diagnosed in the UK general population



### An additional four cases in women on combined hormone replacement therapy (HRT)



### Four fewer cases in women on oestrogen only Hormone Replacement Therapy (HRT)



### An additional four cases in women on combined hormonal contraceptives (the pill)



### An additional five cases in women who drink 2 or more units of alcohol per day



### Three additional cases in women who are current smokers



### An additional 24 cases in women who are overweight or obese (BMI equal or greater than 30)



### Seven fewer cases in women who take at least 2½ hours moderate exercise per week





# Breast cancer and HRT risks in perspective



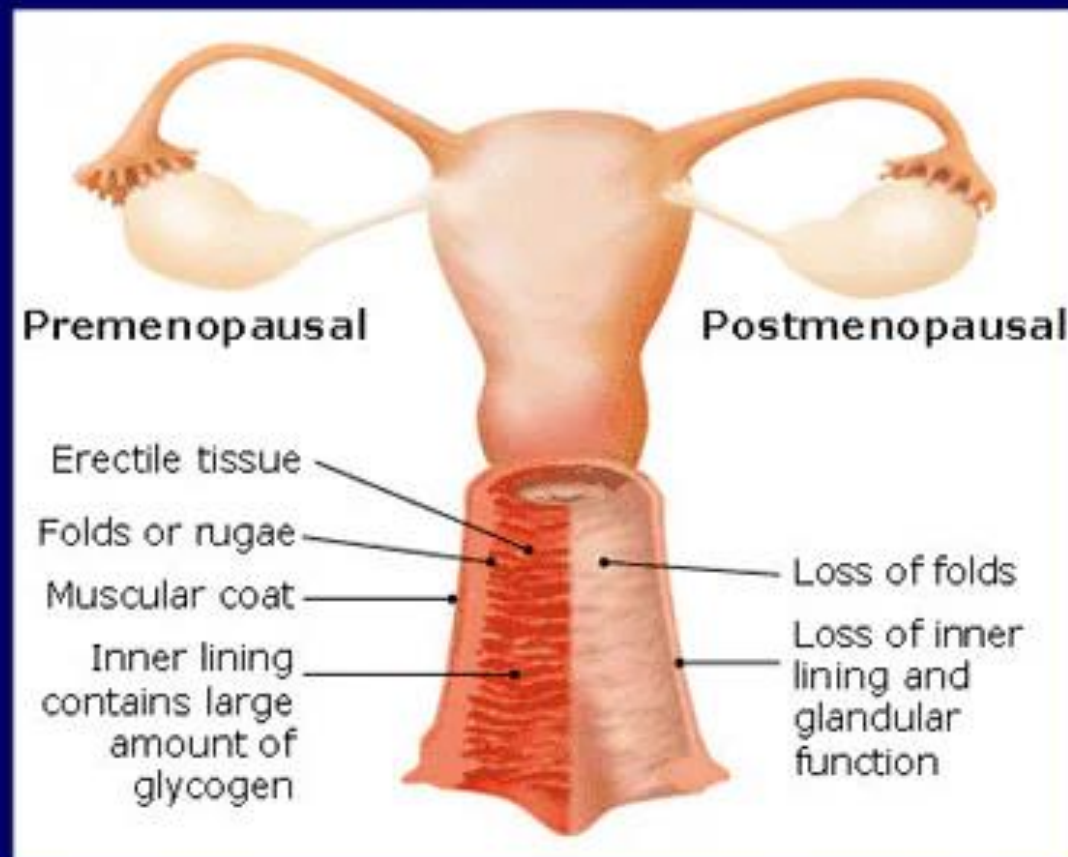
- Leading causes of death: Dementia, Respiratory disease, Heart disease
- No increased risk of dying from breast cancer
- Risks that are fixed:
  - Ageing
  - Female 1:7 incidence
  - Family history 1:20 are genetically linked
- Choices to reduce breast cancer risk
  - Exercise
  - Reduce alcohol consumption
  - Stop smoking
  - Keep weight below 30kg/m<sup>2</sup>

# Contraception for Women Aged Over 40 Years

In general, all women can cease contraception at age 55.

If needed, women over 50 using progestogen-only contraception, including DMPA, can have serum follicle-stimulating hormone (FSH)

## Postmenopausal Changes in the Vaginal Epithelium



# Loss of sexual desire and menopause



# Testosterone

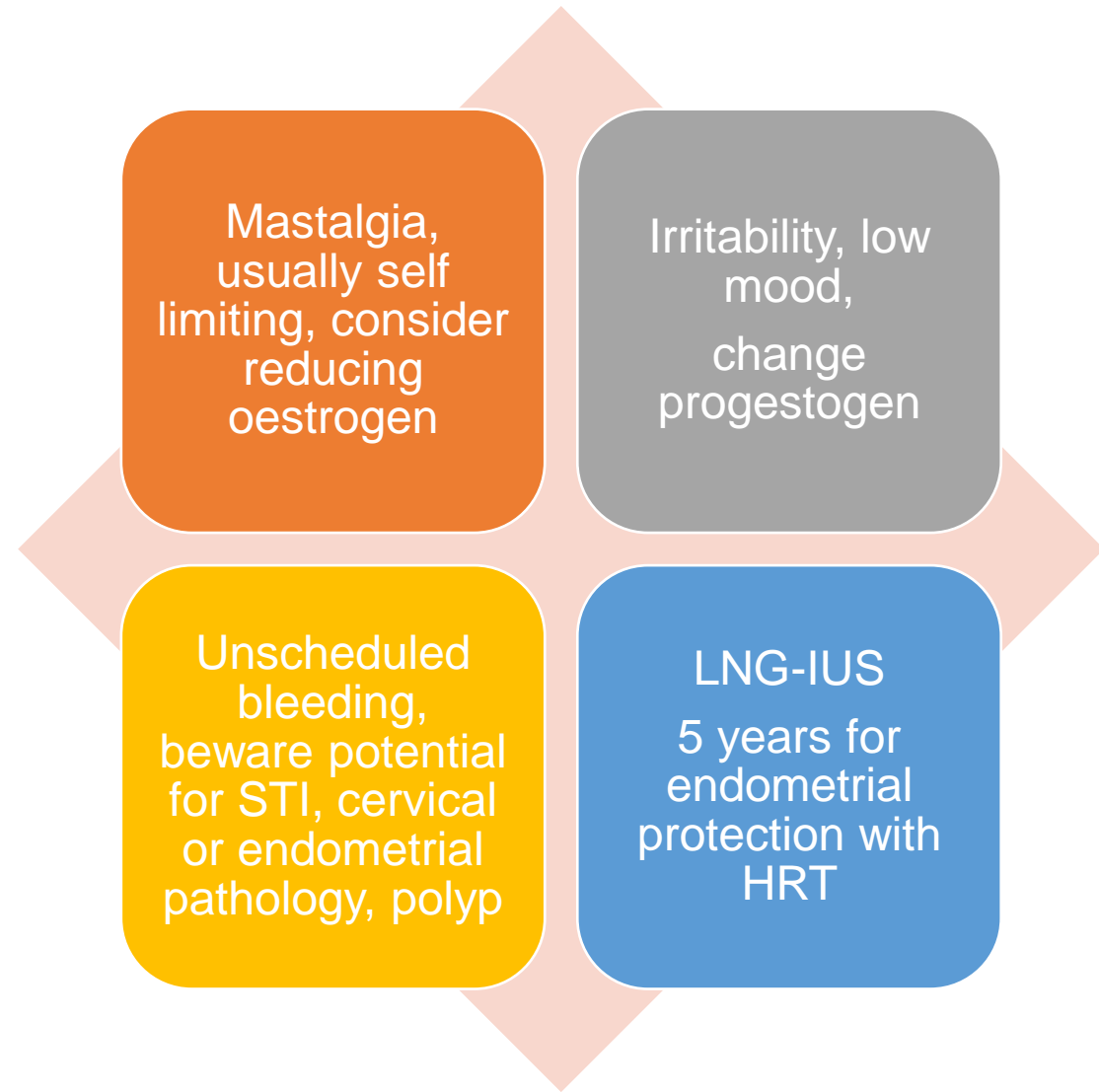
## Myth

- Testosterone will transform your sex life!
- Testosterone is amazing for brain fog!
- Testosterone will help you stay toned!

## Truth

- Testosterone has been shown to be moderately effective in a small number of people
- Sleep, exercise and good cardiovascular health have been shown to help brain fog.
- 150 minutes of moderate intensity exercise per week including strength.

# HRT Troubleshooting



# When to refer to a Menopause Specialist


If a patient wishes an opinion

Complex medical history  
e.g. VTE, Stroke, Epilepsy

Premature Ovarian  
Insufficiency

History of Breast Cancer

List not exhaustive

A large orange circle is positioned on the left side of the slide, partially cut off by the edge. It contains the text 'Further clinical training' in white.

Further  
clinical  
training

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**FSRH** Essentials of Menopause  
Care

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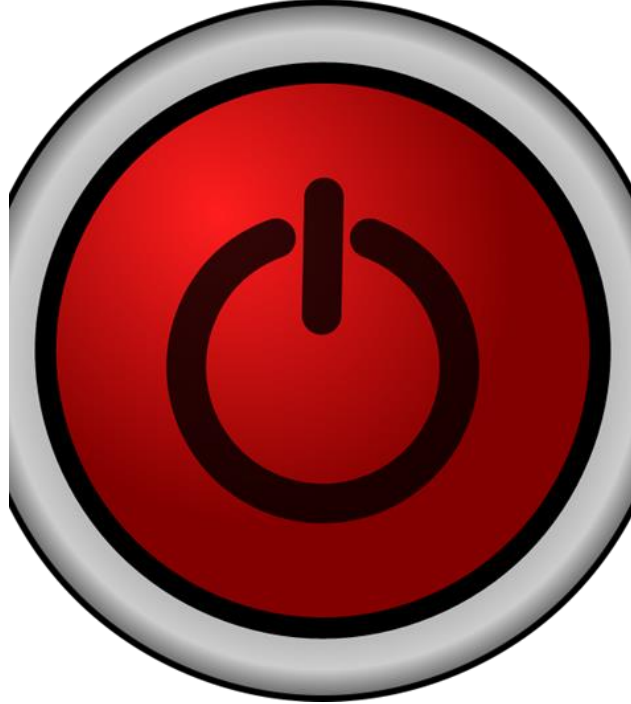
**FSRH** Menopause Care  
Professional Certificate (MCPC)

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**BMS** Principles and Practice of  
Menopause Care

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**BMS** PPMC Advanced  
Certificate in Menopause Care



# Summary

- Menopause has a significant impact on the NHS workforce
- Consider transdermal oestradiol with BMI > 30kg/m<sup>2</sup>
- Individualise benefits and risks and review at least annually
- Changes in sexual desire around menopause are complex and multifaceted



Join me again for:

Introduction to Menopause, Ivybridge, 13<sup>th</sup> May

Menopause Update online workshop 9<sup>th</sup> July

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Thank you for listening