

Perimenopause

■ *What is perimenopause?*

Menopause is a natural part of aging that signals the ending of a woman's reproductive years. This is the point when a woman has her last menstrual period and her ovaries have stopped releasing eggs and producing most of their estrogen. Menopause is diagnosed when a woman has gone without a period for 12 consecutive months.

Perimenopause encompasses the time in which your body transitions into menopause, plus the first year after your final period. Perimenopause will probably begin sometime in your 40s, but some women notice changes as early as their mid 30s. The average length of perimenopause is four years, but for some women this stage may last only a few months or continue for 10 years.

During perimenopause, the levels of your reproductive hormones – estrogen and progesterone – rise and fall unevenly. Your menstrual cycles may lengthen or shorten, and you begin having menstrual cycles in which you don't ovulate.

■ *What are the signs of perimenopause?*

Perimenopause causes some subtle – and some not-so-subtle – changes in your body. Some things you might experience include:

- **Menstrual irregularities.** The intervals may be longer or shorter, your flow may be scanty to profuse, and you may skip some periods. As ovulation becomes more erratic, the lower levels of progesterone may lead to longer and heavier periods.
- **Hot flashes and sleep problems.** About 75 percent to 85 percent of women experience hot flashes during perimenopause. Their intensity, duration and frequency vary. Sleep problems are often due to hot flashes or night sweats, but sometimes sleep becomes erratic even without them.
- **Mood changes.** Some women experience mood swings, irritability or depression during perimenopause, but the cause of these symptoms may be sleep disruption or other menopausal symptoms more than the hormonal changes of menopause.
- **Vaginal and bladder problems.** When estrogen levels diminish, your vaginal tissues may lose lubrication and elasticity, making intercourse painful. Low estrogen levels may also leave you more vulnerable to urinary or vaginal infections. Loss of tissue tone may contribute to urinary incontinence.
- **Decreasing fertility.** As ovulation becomes irregular, your ability to conceive decreases. However, as long as you're having periods, pregnancy remains a possibility. If that's not what you want, use birth control until you've had no periods for 12 months.
- **Changes in sexual function.** During perimenopause, sexual arousal and desire may change. But for most women who had satisfactory sexual intimacy before menopause, this will continue through perimenopause and beyond.
- **Loss of bone.** With declining estrogen levels, you start to lose bone more quickly than you replace it, increasing your risk of osteoporosis.
- **Changing cholesterol levels.** Declining estrogen levels may lead to unfavorable changes in your blood cholesterol levels, including an increase in low-density lipoprotein (LDL) cholesterol – the "bad" cholesterol – which contributes to an increased risk of heart disease. At the same time, high-density lipoprotein (HDL) cholesterol – the "good" cholesterol – decreases in many women as they age, which also increases the risk for heart disease

■ *When should I seek medical advice?*

Some women seek medical attention for their perimenopause symptoms. But others either tolerate the changes or simply don't experience symptoms annoying enough to warrant attention. Because subtle

symptoms may come on gradually, you may not realize at first that they're all connected to the same thing – declining and fluctuating levels of estrogen and progesterone. If you do experience symptoms that interfere with your life or well-being, such as severe hot flashes, mood swings or changes in sexual function that concern you, see your primary care provider.

Irregular periods are common and normal during perimenopause. But, other conditions can cause abnormalities in menstrual bleeding. Keep track of your periods by writing them down so you can give your primary care provider good information during visits. See your provider to rule out other causes for irregular periods if any of the following situations apply to you:

- Your periods are very heavy, or accompanied by blood clots.
- Your periods last several days longer than usual.
- You spot between periods.
- You experience spotting after sex.
- Your periods occur closer together.

Potential causes of abnormal bleeding include hormonal imbalances, infection, birth control pills, pregnancy, fibroids, blood clotting problems, and, rarely, cancer.

■ *How is perimenopause diagnosed?*

Perimenopause is a process — a gradual transition. No one test or sign is enough to determine if you've entered perimenopause. Your primary care provider takes many things into consideration, including your age, menstrual history and what symptoms or body changes you're experiencing. Some providers may order tests to check your hormone levels. But other than checking thyroid function, hormone testing is rarely necessary or useful to evaluate perimenopause.

By monitoring your menstrual cycle and recording your signs and symptoms for several months, you'll gain a better understanding of the changes occurring during this time. You will also have valuable information to discuss with your doctor.

■ *Can I get pregnant if I am perimenopausal?*

Yes. Despite a decline in fertility during the perimenopause stage, you can still become pregnant. If you do not want to become pregnant, you should continue to use some form of birth control until you reach menopause (you have gone 12 months without having your period).

■ *Are there treatments that can reduce the symptoms of perimenopause?*

Making healthy lifestyle choices may help ease some of the symptoms of perimenopause as well as promote good health as you age. These choices include:

- **Good nutrition.** Because your risk of osteoporosis and heart disease increases at this time, a healthy diet is more important than ever. Adopt a low-fat, high-fiber diet that's rich in fruits, vegetables, and whole grains. Add calcium-rich foods or take a calcium supplement. Avoid alcohol and caffeine, which can trigger hot flashes.
- **Regular exercise.** Regular physical activity helps prevent weight gain, improves your sleep, strengthens your bones, and elevates your mood. Try to exercise for 30 minutes or more on most days of the week.
- **Stress reduction.** Practiced regularly, stress reduction techniques, such as meditation or yoga, can promote relaxation and good health throughout your lifetime, but may be particularly helpful during the menopausal transition

Some women experience relief from hot flashes after taking low-dose birth control pills (or other hormonal methods) for a short period of time. However, women who are 35 or older and smoke cannot take birth control pills. Talk to your primary care provider to see if they are right for you.

For other symptoms of perimenopause, your primary care provider may recommend a counselor, vaginal lubricants to help with dryness, or antidepressant medications for mood swings.