

Menopause and your GP

10 Things Your Doctor Should Know About Menopause

1. The [NICE guidelines](#) on Menopause were published for health care professionals in November 2015; your GP should have knowledge of and apply the recommendations in the guidelines to their practice. Don't be afraid to ask your GP if they have read them as many haven't and many others are not even aware of them.
2. The average age of menopause is 51 but for many women the symptoms of perimenopause start in their early forties. Blood hormone tests for women over the age of 45 are not appropriate and menopause should be diagnosed on symptoms. Periods do not need to have changed to indicate perimenopause; women do not need to have stopped having periods to enable them to have HRT.
3. Premature menopause affects one in a hundred women under the age of forty, one in a thousand women under thirty and one in ten thousand under twenty. It is very important that women in premature menopause are provided with information about the importance of hormone replacement therapy (where appropriate) to protect their long-term health.
4. Surgical menopause affects women who have had their ovaries removed, sometimes in conjunction with their womb. These women must receive hormone replacement therapy (where appropriate) to protect their long-term health.
5. Common physical symptoms include; palpitations, feeling tired or lacking energy, feeling dizzy or faint, headaches, joint pain, itchy skin, hair loss, vaginal dryness, increased urinary tract infections and loss of libido.
6. Menopause symptoms are not just hot flushes, night sweats and changing periods. Many women experience mental and emotional symptoms before any physical symptoms, these can include; anxiety, panic, low mood, difficulty concentrating and a loss of confidence.
7. Hormone Replacement Therapy, not anti-depressants, is the first line treatment for menopause. Many women are being diagnosed as stressed or depressed and prescribed anti-depressants when they are in fact peri menopausal. Women who prefer not to, or are not recommended to use HRT, should be given information on alternative treatment choices.
8. Body identical hormone replacement therapy is available via the NHS. Many women are told by their that it's not. The majority of oestrogen called Estradiol available in the UK is body identical and most GP's can also prescribe micronized body identical progesterone. There is no time limit on how long a woman can use HRT.
9. Women who still have their womb must be prescribed oestrogen and progesterone to protect the womb lining. Women are sometimes prescribed oestrogen only; this is incorrect

and potentially dangerous.

10. Women in medical menopause due to a cancer diagnosis or who present with complex medical histories should be referred to an NHS menopause specialist clinic for consultation and treatment options.

How you can prepare for your appointment?

1. Do your research; take a look at the [NICE guidelines](#), knowledge is power.
2. Make a list of all your symptoms and anything you have used to try to alleviate them.
3. Take a trusted friend or family member with you; it can be great to have support.
4. Make a list of your questions; it's easy to forget once you sit down with the doctor.
5. Be prepared to wait for answers; if your doctor is unsure ask him or her to consult a colleague or read the NICE guidelines before coming back to you.

Source: <https://menopausesupport.co.uk/wp-content/uploads/2019/02/BLOG-10-Things-Your-Doctor-Should-Know-About-Menopause.pdf>