



Women's Health The Menopause and Perimenopause

An Advice Guide
for Usdaw Members



Support During The Menopause

1 in 3 women in the UK, around 13 million, are estimated to be going through or have reached menopause.

The menopause and perimenopause can have a big impact on women's lives, relationships, social life, family and work. Being able to talk about the menopause and get the right support early can help to minimise the impact on your life and work.

This leaflet is designed to raise awareness about what the menopause is, how to spot the symptoms, what the Union can do to support you if the menopause is affecting you at work and where to go for further advice.

What is the Menopause?

The menopause is when a woman's periods stop due to lower hormone levels. You reach menopause when you have not had a period for 12 months. The menopause usually happens between the ages of 45 and 55, but it can happen to women at a much younger age. Most women continue to experience menopause symptoms for four years after their last period, but around 10 per cent can experience symptoms for up to 12 years after.

For some women the menopause happens much earlier in their 40s, 30s or even 20s. This is referred to as Early Menopause or Premature Ovarian Insufficiency. Women can enter early menopause naturally, due to having surgery or treatment for other health issues, or for reasons which are not clear. More information on the Early Menopause can be found in Usdaw leaflet 456: *Early Menopause*.

What is the Perimenopause?

Perimenopause is the term used to describe the time before the menopause, where women are still having periods but beginning to experience menopause symptoms. The perimenopause can last for up to 10 years before your periods stop altogether.

The first sign of the perimenopause is usually, but not always, a change in the normal pattern of your periods. Eventually you will stop having periods and this is when you start your menopause.



Common Menopause Symptoms

Trans and Non-binary Menopause

Non-binary and trans people may also experience the menopause and can face additional barriers to talking about their experiences and accessing appropriate support. Not everyone is open about their identity at work. Some non-binary and trans people may therefore be reluctant to discuss menopause symptoms if doing so would disclose their non-binary or trans status. Everyone's experience will be different and your union rep can help you raise issues and get the support you need at work.

Symptoms of the Menopause

It's common for menopause and perimenopause symptoms to be missed or misdiagnosed. Sometimes women can be diagnosed with depression, anxiety and other health conditions without the link being made that their symptoms are menopause related.

Many women say they feel like they are 'going mad' or 'losing it' because of how they feel. But you are not alone. If you're experiencing any of these symptoms, it might be worth asking 'could it be the menopause?' and speaking to your GP or health professional for further advice.

- Irregular or heavy periods
- Hot flushes
- Perspiration
- Mood swings
- Dizziness
- Disrupted sleep
- Night sweats
- Tiredness or a lack of energy
- Loss of memory
- Difficulty concentrating ('brain fog')
- Depression or anxiety
- Irritability
- Low self-esteem
- Palpitations
- Headaches and migraines
- Changes in eating patterns
- Joint pain
- Dry or itchy skin
- Reduced sex drive
- Vaginal dryness
- Frequent urination
- Urinary infections

These are just some of the most common symptoms of the menopause. The menopause can be different for everyone and you may have all, some or none of these symptoms. You know best how you feel.



Most women will not require a blood test as your GP can usually confirm whether you are menopausal based on your symptoms, but a blood test to measure your hormone levels may be carried out if you're aged 40 to 45. Blood tests may also be carried out to help diagnose suspected early menopause if you're under 40 and have menopausal symptoms.

Treatment for Menopause and Perimenopause

There are a range of things that can help with managing your menopause symptoms. Getting enough rest, eating well, taking regular exercise and checking in with your mental health become more important during the menopause. There are also medicines that can replace the hormones you are missing and talking therapy that can provide relief and support during this time.

It's best to have a conversation with your doctor or menopause specialist to see what your options are. Any treatment should be reviewed regularly and may need to be adjusted as your menopause progresses or your symptoms change. You may need treatment for a number of years, until most of your menopause and perimenopause symptoms have passed.

- **Hormone Replacement Therapy (HRT):** HRT is the main treatment for menopause and perimenopause and replaces low levels of hormones. The risks of HRT are very small and usually outweighed by the benefits. Recent evidence also suggests that HRT may reduce women's risk of Alzheimer's as they get older. If you are interested in HRT, your doctor can discuss the benefits and risks with you.
- **Non-hormone treatments:** These may be suitable for women who cannot, or choose not to, have HRT. These include a blood pressure medicine called Clonidine and an epilepsy medicine called Gabapentin. Speak to your doctor.
- **Testosterone Gel:** Testosterone gel or cream can help to improve your mood, sex drive or energy levels where HRT has not worked for you. It can be prescribed by a specialist doctor after the menopause.

- **Oestrogen:** Your GP can prescribe oestrogen treatments to help with vaginal dryness, itchiness and discomfort as a result of menopause or perimenopause. This can also be helpful to relieve urinary symptoms.
- **Antidepressants:** May be prescribed to help with menopause symptoms that are affecting your mood such as depression, low mood or anxiety.

- **Cognitive Behavioural Therapy (CBT):** This is a talking therapy that can help you to work through feelings such as low mood, anxiety or other issues that are related to your menopause. You can self-refer yourself for CBT on the NHS via their website. You may also want to check if your employer has an Employee Assistance Programme that offers a free, confidential course of CBT or counselling.



Complimentary and Alternative Therapies

Many women find there are alternative treatments that help them to reduce or manage their symptoms. If you are thinking about using a complimentary or alternative therapy, the NHS advises to ask your GP or pharmacist for advice as there are limited studies on how safe and effective they are and some herbal remedies and 'natural' hormones can interact with other medicines you are taking or have side-effects.

Why is the Menopause a Trade Union Issue?

The proportion of women in the UK who are working through their menopause is rising. Women make up nearly half of the UK workforce and the TUC estimates 70% of UK women aged 45-59 currently work, meaning more women than ever are working through their menopause.

Working through the menopause can be very challenging. Menopause symptoms can be exacerbated by the jobs we do and the workplace environment.

Therefore the menopause is an occupational health and safety issue – and a trade union issue.



The Union has been working with employers to introduce menopause workplace policies and guidance to support women at work. Check your colleague website or speak to your Usdaw rep or manager to find out if there is a menopause policy or guide in your workplace.

Vulval Lichen Sclerosus

Vulval lichen sclerosus (LS) is an inflammatory condition that affects the skin of the vulva (the area around the opening to the vagina). It's most common in postmenopausal women but can occur at any age.

Vulval LS does not affect the vagina or cause any discharge but it causes patches on the skin that are usually:

- Itchy
- White
- Smooth or crinkled
- Easily damaged - they may bleed or hurt if rubbed or scratched

The patches can appear anywhere, but most often are on the area around the opening to the vagina (vulva) and anus.

Lichen sclerosus symptoms vary and range in their severity. They have the potential to significantly impact a woman's daily functioning and quality of life, particularly if misdiagnosed or left untreated.

Common symptoms include:

- Chronic itching
- Burning
- Pain
- Irritation
- Inflammation
- Soreness
- Tears in the vulva or anus
- Burning with urination

It's not unusual for these symptoms to become worse at night.

Over time, the skin of the vulva may scar and shrink.

Not everyone will experience all of these symptoms, and vulval LS can go into remission, which means that symptoms may not be present all the time.

These symptoms can sometimes be confused with thrush so it's important to speak to your GP if symptoms persist.

While the exact cause of the condition is not known, it is believed to be related to an overactive immune system or hormone imbalance. Lichen sclerosus is not:

- Contagious - you cannot spread it to other people.
- Caused by poor personal hygiene.

There is no cure for LS so treatment focuses on symptom control by reducing local inflammation. The main treatment is a strong steroid ointment which is applied to the affected area.

If you notice a change in your symptoms or appearance, particularly any ulcers or lumps, it's important to talk to your doctor about this. A small number of women who have vulval LS may develop vulval cancer, but this is very rare particularly when symptoms are well controlled.

Visit the NHS website www.nhs.uk/conditions/lichen-sclerosus/ and Lichen Sclerosus & Vulval Cancer Awareness UK Awareness at www.lsvckawareness.co.uk for more information.



Supporting the Menopause at Work

Small adjustments to your role or work environment can help you to cope with difficult menopause symptoms at work. Some examples of workplace adjustments are below. Speak to your Usdaw rep to discuss the issues you are having and the right support for you.

- Hot flushes can be aggravated by working in high temperatures and by unsuitable clothing. This can easily be helped by having access to cold water, portable fans, and natural fibre uniforms or relaxing uniform policies.
- Difficulty sleeping, depression and anxiety can be aggravated by irregular shift patterns or night shifts. This can be helped by agreeing temporary changes to more regular hours with adequate rest between shifts.
- Working in a public-facing role, such as on checkouts, can be difficult when you are experiencing symptoms like hot flushes and perspiration and anxiety. Temporary changes to your role may help you to feel more comfortable managing your symptoms.
- Headaches, lack of energy, aches and pains, anxiety, depression, dizziness and palpitations can be aggravated by pressurised working environments and excessive workloads. These symptoms can be supported by

flexible working arrangements and empathetic managers who understand the impact of the menopause at work.

- Heavy or irregular periods, frequent urination, nausea, vomiting or urinary infections can be helped by having access to toilet facilities at all times, flexible break times, washing or changing facilities and access to sanitary products.
- Dry skin, dry eyes and headaches can be aggravated by computers or screens, low humidity and excessive air conditioning. These symptoms can be helped by regular breaks away from screens, regulating air conditioning or providing humidifiers.
- If the menopause is impacting on your attendance at work and you are worried about your absence levels, speak to your Usdaw rep.



Where To Go For Help

Your GP, nurse or pharmacist can discuss and provide advice on help with your menopause and perimenopause symptoms.

The following organisations offer further advice, information and support on the menopause and perimenopause.

Balance App

A free app designed to help you track your menopause symptoms created by Dr Louise Newson, a menopause and perimenopause specialist.

web: www.balance-menopause.com/balance-app/

Healthtalk

Videos of women talking about living with menopause and perimenopause and what helped them.

web: www.healthtalk.org/menopause/overview

Women's Health Concern

A charity providing advice on the menopause and the location of your nearest British Menopause Society registered specialist.

web: www.womens-health-concern.org

QUEER/LGBTQIA+ MENOPAUSE

Support and advice for LGBT+ people experiencing the menopause.

web: www.queermenopause.com/resources

Menopause Café

Hold informal events for people gather to eat cake, drink tea and discuss menopause. You can find out about events near you on their website.

web: www.menopausecafe.net

The Daisy Network

A charity supporting women going through the early menopause and Premature Ovarian Insufficiency (POI). You can also join their network to connect and share experiences with other members.

web: www.daisynetwork.org

Menopause Matters

Up-to date information about the menopause and options for treatment and support.

web: www.menopausematters.co.uk

More Information

Usdaw Nationwide

Wherever you work, an Usdaw rep or official (Area Organiser) is not far away. For further information or assistance, contact your Usdaw rep or local Usdaw office. Alternatively you can phone our Freephone Helpline **0800 030 80 30** to connect you to your regional office or visit our website: **www.usdaw.org.uk**

You can also write to the Union's Head Office. Just write **FREEPOST USDAW** on the envelope and put it in the post.

Join Usdaw

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www.usdaw.org.uk/join



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Once we process your application, you will receive a membership card with our Helpline telephone number and a New Member's Pack giving details of all the benefits and professional services available to you.



www.usdaw.org.uk

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