Your guide to managing your menopause
A toolkit to support and empower
Helping you navigate your menopause journey

Your journey through the menopause is unique to you. In this guide, we’ll help you find your normal, whatever that may be.

You won’t find any taboos in here either. The more we talk about the menopause, the more natural it will feel in conversation. So, let’s get started.

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What is menopause?

The menopause is when your oestrogen levels fall and you stop having periods. It usually happens between the ages of 45 and 55, but it can happen earlier.

1. **Perimenopause**
   This is the time when your hormone levels start to change but you are still having periods.

2. **Menopause**
   It’s said you’ve reached menopause when you haven’t had a period for at least a year.

3. **Postmenopause**
   This is the time after menopause when you no longer have periods. You might still experience symptoms of the menopause.

Helping you make sense of it all

**Here real stories from real people**

“You learn to adapt and you learn that this isn’t me being silly, it’s just part of the menopause process I’m going through.”

Amanda

**Menopause: your questions answered**

It’s a minefield of misinformation out there. Join our Clinical Director, Dr Petra Simic, and get answers from the expert.

Listen

Watch video
What does menopause feel like?

There are dozens of symptoms linked to the menopause. Symptoms can start months or years before your periods stop. This is called **perimenopause**. Symptoms can continue throughout the menopause and post menopause too.

Common perimenopausal and menopausal symptoms include:

- **Hot flushes**
- **Headaches**
- **Trouble sleeping**
- **Mood swings**
- **Loss of interest in sex**
- **Vaginal dryness and pain during sex**
- **Urinary tract infections (UTIs)**
- **Difficulty concentrating**
- **‘Brain fog’**
- **Night sweats**
- **Aches and pains**
- **Feeling anxious**

Are my symptoms the menopause?

Explore what you might expect and when.

Read more

Menopause symptoms can vary enormously from person to person. Symptoms may come and go and can also vary in severity. You might not notice any of these symptoms at all.
Early or premature menopause

If your periods stop before the age of 45, this is called early menopause. If your periods stop before 40, this is called premature menopause or premature ovarian insufficiency (POI).

It isn’t always known what causes an early or premature menopause. But it can be influenced by:

- your family history
- your genetics
- an autoimmune condition such as type 1 diabetes
- surgery to remove your ovaries
- chemotherapy and radiotherapy

If you think you’re experiencing early or premature menopause, talk to your GP. You can also find lots of support at the daisynetwork.org.
Menopause and your mental health

Hormonal changes in your body can affect you mentally as well as physically. You might have days where you feel low, stressed or anxious. You might have trouble with memory and concentration, or lack the confidence you had in your self before the menopause.

Your experience of the menopause can often coincide with other significant changes in your life, such as starting a new job, taking care of older relatives or perhaps your children leaving home. Juggling all these things can feel overwhelming.

Feeling like the odd one out

It’s common for many women at the height of their careers to lose confidence in their abilities. Thoughts like “I’m not good enough” or “I don’t deserve this” can lead to imposter syndrome. This is when you don’t believe you deserve your success. Remember, don’t doubt or blame yourself – it isn’t your fault. Think back on your past merits, capabilities and all you’ve achieved and don’t let the menopause hinder your ambitions.
Menopause and your mental health

Anxiety
It’s common to feel anxious. You may feel worried, tense or on edge. You could feel these emotions suddenly or they could build up over time. It’s important to remember it isn’t your fault and could be down to the changes your body is going through.

Depression
Menopause can increase your risk of depression. If you feel very low, your GP is there to listen.

Sleep
Night sweats or bladder problems can mean it’s harder to get a good night’s rest. When you aren’t sleeping well, this can affect your mood and energy levels throughout the day.

Podcast
Menopause and your mental health

Join Women’s Health Clinical Lead, Dr Samantha Wild, as she talks to Elaine and Amanda about their experiences and ways to look after your mental health during the menopause.

Listen
Hormone replacement therapy (HRT)

For many people experiencing the menopause, HRT can be a safe and effective way of managing symptoms. Your GP or doctor will discuss the possible risks and benefits of taking HRT and the safest option for you.

Let’s break it down

What exactly is HRT?

It’s a treatment to ease the symptoms of menopause. It works by topping up or replacing low levels of oestrogen. If you have a womb (you haven’t had a hysterectomy) you will also be prescribed progesterone too. As you get older, your body produces less testosterone so you may also be prescribed testosterone.

How do you take it?

There are a variety of ways to take HRT, including gels, sprays, patches, tablets and vaginal preparations. Your GP will talk to you about which one could be best for you.

What are the benefits of taking HRT?

For many people, it’s an effective way to help you manage menopause symptoms. HRT also reduces your risk of osteoporosis and may help reduce your risk of other conditions linked with the menopause, such as cardiovascular disease and stroke.
Breaking down HRT

What are the side effects?
Some people experience side effects when taking HRT but they are normally mild. Side effects can include sore breasts, headaches, feeling sick, vaginal spotting or mood swings. Your GP may recommend you take HRT for at least three months to give time for any side effects to settle and the medication to start working.

Does HRT make you gain weight?
It’s common to put weight on as you approach the menopause. But, there isn’t any evidence to say that taking any type of HRT makes you put on weight.

Does HRT cause cancer?
Your risk of developing cancer as a result of taking HRT is very small. But it can depend on the type of HRT, the age you start to take it, and how long you take it for. Your GP will talk to you about any possible risks and help you decide if it’s right for you.

Can I take HRT if I’m still having periods?
Yes. HRT can be started during perimenopause while you are still having periods.

Are there any health conditions which mean I can’t take HRT?
Certain types of HRT aren’t always right for everybody. For example, you may be advised to only have transdermal oestrogen (through the skin) if you have high blood pressure or a condition which puts you at risk of having a blood clot. Your GP will look at your medical history and talk you through your options.

I’ve been taking HRT for more than six months and I’m still experiencing bleeding. Is this normal?
It’s common to experience irregular bleeding in the first few months of starting HRT. You must talk to a GP about any unscheduled or irregular bleeding that doesn’t settle or doesn’t feel right.
There are different types of HRT

**Oestrogen-only**
This form of HRT contains just the hormone oestrogen. Your GP might offer you oestrogen-only HRT if you’ve had a hysterectomy (an operation to remove your womb).

**Combined HRT**
If you haven’t had a hysterectomy, you’ll need to take both oestrogen and progesterone. This is called combined HRT.

**Testosterone**
In some situations, your healthcare professional might prescribe you testosterone if you have a low sex drive and HRT alone hasn’t worked for you.

Find out more about HRT

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**Did you know?**
If you’ve already discussed HRT with your NHS GP and they’ve decided it’s right for you, you could save money on a repeat prescription with a Prescription Prepayment Certificate.

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HRT: your questions answered
Read more

Our guide to HRT
Read more

Check if you’re able to get help with NHS charges
Talking to your GP about menopause

Everybody’s experience of menopause is unique. Some people find they can manage menopausal symptoms without any special support or medical treatment, whilst others find the extra help they need from talking with their GP.

However you’re doing, you deserve to feel your best. Your GP is there to listen and support you, so you can feel confident managing this next stage in your life. A great place to start is by keeping a record of your symptoms and making a list of questions. We’ve put together a handy symptoms diary to help you get the most out of a conversation with your GP.
You can ask your doctor about:

- self-help measures, such as diet, maintaining a healthy weight, stopping smoking and reducing how much alcohol you drink to help manage symptoms
- HRT and other prescribed medicines
- talking therapies such as cognitive behavioural therapy (CBT) to help with your mental health
Small changes to keep healthy

There are some things that are within your control. Taking care of your emotional and physical wellbeing can help to ease symptoms and keep you as healthy as can be.

Stay physically active and exercise
Hormonal changes during menopause can affect your bone density. To strengthen your bones and reduce aches and pains, get physically active. Lifting weights is a great way to build muscle mass and bone density. Running, walking and dancing are all examples of aerobic exercise which will help to keep your heart healthy too.

Be sure to eat well
You may want to avoid foods that trigger hot flushes such as anything spicy or caffeinated drinks. Make sure you’re getting enough vitamin D in your diet from foods such as dairy products, leafy greens, oily fish and eggs. It can also help to take a vitamin D supplement (about 10 micrograms daily). These nutrients are essential for healthy bones.

Try to lose excess weight
Lowered oestrogen levels could mean some people put on weight while going through menopause. If you’re getting hot flushes and night sweats, losing excess weight may help. This will also help reduce your risk of heart disease.

Stop smoking and limit alcohol
Smoking is linked to an earlier menopause and can intensify symptoms. Talk to your GP or practice nurse for advice on quitting. Alcohol can make your symptoms worse too, so it may help to cut down how much you drink.
How you can support someone you know

Some people may not want to talk about their experience with the menopause. But if they do, listen, sympathise and be patient. Try to be understanding – it’s common for the menopause to affect someone’s mental health. You could share your own experience, if you feel comfortable doing so.

If your workplace offers menopause awareness sessions, go along to help educate yourself about what changes are common during this time of life.

Be mindful of the menopause. Don’t make assumptions

In the UK, the average age that people go through the menopause is 51 but people may also be going through premature or early menopause. The menopause doesn’t only affect women but may also affect people who are transgender, non-binary or intersex.
Support someone you know

It can be difficult to know how to support people during the menopause. If you’re a partner, family member or friend of someone going through the menopause, there are lots of ways you can offer support.

**Talk about it**
Make time to ask the person about what they’re going through, how they’re feeling and what you can do to support.

**Get practical**
Can you help with some of the things your loved one normally does, particularly if they’re feeling overwhelmed?

**Be patient**
Remember that mood swings and irritability can be part of the menopause, so try to resist snapping back.

**Don’t take it personally**
Intimacy often takes a dip during the menopause. It’s not their fault, or yours.
We’re listening

Our support doesn’t end here. Check with your organisation to see what’s available to you.

**Menopause Plan**
Time with a menopause-trained GP to talk about your symptoms and create a personalised care plan. If you have access to Bupa cover through your company, you may have access to this as part of your scheme. Please check your scheme documents.

**Menopause HealthLine**
One-to-one support from menopause-trained nurses who can offer clinical help and advice - at no extra cost if you’re a health scheme customer.

**Women’s health pages**
Packed with expert advice and resources, including lots of guidance on the menopause.

**0345 608 9984**
Available 8am to 8pm, 365 days a year. Calls may be recorded and we may monitor some of our calls.

**Visit our women’s health pages**

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**More support**

- **British Menopause Society**
- **Menopause Support**
- **The Menopause Charity**
- **Menopause and Me**
- **The Daisy Network**
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