

Treading the transformative path of perimenopause: Navigating



Anju Jose*, Sai Sudha Velamala

Department of Pharmacy Practice, College of Pharmaceutical Sciences,
Dayananda Sagar University, Karnataka, India
Email: anjuse-sps@dsu.edu.in

Abstract

Each woman experiences perimenopause uniquely, with its duration ranging from a few months to up to a decade. Menopause is characterized by the cessation of menstruation due to diminished ovarian follicular activity. It is not a condition that necessitates a cure; instead, it represents a natural and normal phase of life, similar to adolescence or motherhood. Despite this, societal norms have often portrayed menopause as a topic to be shunned or apprehensive about. This review provides valuable insights into the transition from perimenopause to menopause, highlighting that menopause is not an endpoint but rather a new beginning and emphasizing that rather than fearing change, approach it with confidence and grace.

Keywords: Menopause, perimenopause, myths

1. Introduction

Perimenopause, also known as the menopausal transition, signifies a phase characterized by significant physiological changes in a woman's body, culminating in her final menstrual period (FMP) (1). Throughout this period, sex hormones like estradiol and progesterone undergo notable fluctuations, impacting the female biological system and heralding the shift from reproductive to non-reproductive life (2). Perimenopause is linked to biological, psychological, and social transformations within the female body. The menopausal transition unfolds in two distinct stages: the initial phase, marked by mostly regular menstrual cycles with occasional disruptions, and the subsequent stage where amenorrhea becomes more prevalent, persisting for over 60 days until the final menstrual period (3).

While menopause typically occurs between the ages of 45 to 56 years for most women, studies suggest a correlation between aging and menopause and increased risks of conditions such as dementia, cardiovascular issues, and certain cancers like ovarian, breast, and endometrial cancers (4). Vasomotor symptoms (Figure 1) such as hot flashes, can persist for more than seven years, and in some cases, up to a decade post the last menstrual cycle. These symptoms often subside within approximately 7.4 years if left untreated, although severe hot flashes may affect around 10–20% of women (5).

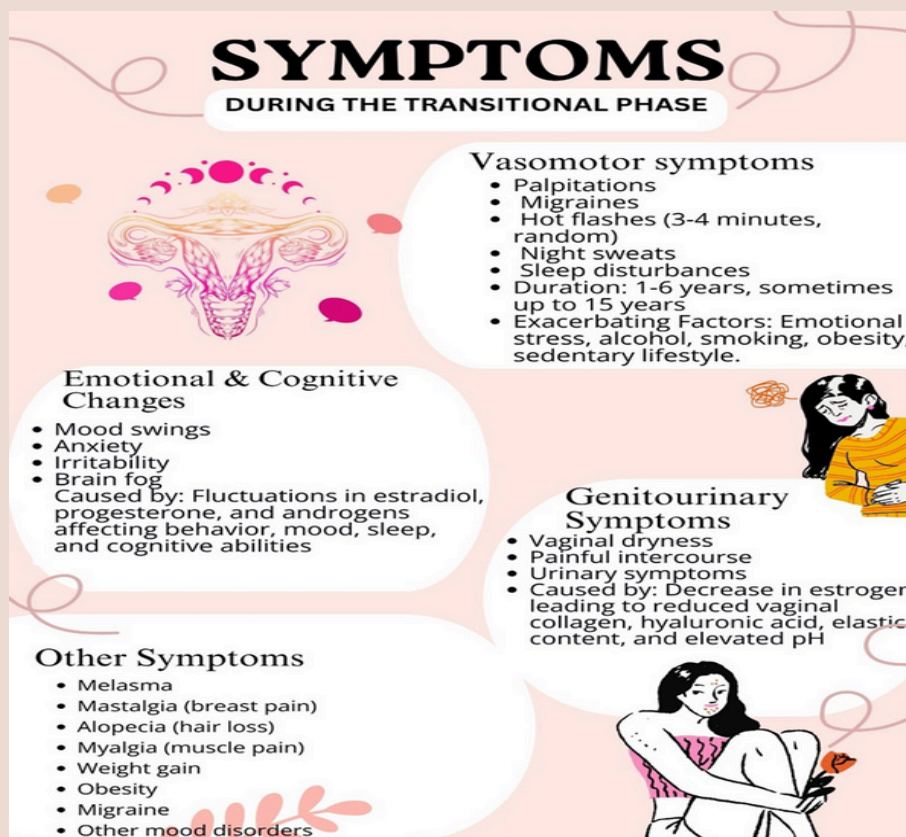


Figure 1. Signs and signals during the transitional phase

2. Key hormonal changes

The menstrual cycle consists of two phases: the luteal phase, also known as the secretory phase, and the follicular phase, or proliferative phase. During perimenopause, there is a notable decline in the number of ovarian follicles, leading to reductions in hormones such as Inhibin B, anti-Müllerian hormone, and ovarian estradiol. This decline subsequently impacts the production of FSH and LH, which play significant roles in manifesting various menopausal symptoms (4).

3. The power of self-care: Managing the transition

As per the Global Self-Care Federation, an organization supporting the World Health Organization, self-care encompasses the practice where individuals take responsibility for their health and well-being by utilizing available information and knowledge. This approach to self-care is not synonymous with self-indulgence or selfishness; instead, it involves prioritizing one's health to lead a fulfilling life focused on personal priorities. A study was conducted to explore how self-care education, rooted in the individual empowerment model and self-efficacy theory, impacts the quality of life of post-menopausal women. The study yielded positive outcomes, with the primary barrier identified as a lack of knowledge (6).

4. Nourish your body

During perimenopause and menopause, hormonal changes lead to a significant decrease in basal metabolism, reducing by around 250-300 kcal per day. This shift in metabolism is often accompanied by changes in body composition, potentially leading to issues of obesity and overweight. Moreover, hormonal fluctuations during this period can contribute to a decrease in fat-free mass (FFM) and skeletal muscle mass (SMM), increasing the risk of conditions like sarcopenia.

To maintain optimal health during perimenopause and menopause, it is essential to adhere to certain guidelines:

- Maintain a Body Mass Index (BMI) within 18.5-24.9 kg/m² for a healthy nutritional status.
- In cases of overweight or obesity, reduce calorie intake and ensure consumption of 1.2 g of protein per day.
- Establish a balanced diet regimen.
- Avoid simple sugars and fast-acting carbohydrates.
- Incorporate plant-based protein sources like legumes (beans, peas, lentils, chickpeas, soy, etc.) into your diet weekly.

- Ensure adequate intake of essential vitamins (A, B, C, D) and minerals such as calcium and phosphorus (7).

5. Embracing the journey: A holistic approach

In addition to dietary and lifestyle adjustments, research has indicated that mind-body exercises such as Pilates, yoga, tai chi, and mindfulness-based stress reduction can effectively alleviate menopausal symptoms. These practices have been shown to enhance bone mineral density, improve sleep quality, reduce anxiety, depression, and fatigue, offering holistic benefits during the menopausal transition (8).

6. Debunking menopause myths: Separating fact from fiction

Table 1. Busting the myths

Common myths	Quick truths	Ref.
“It starts when my periods end.”	Officially entering menopause is defined by the absence of periods for 12 consecutive months. During the perimenopausal phase, irregular periods are common as the body transitions towards menopause.	(9)
“Impossible to get pregnant.”	The cessation of periods does not always signify the end of fertility. While the likelihood of conceiving naturally decreases after age 45, even if menstruation continues, there is still a possibility for some women to conceive	(9)
“Your sex life is over.”	Hormonal fluctuations during menopause can lead to a decrease in sex drive and an increase in vaginal dryness, potentially impacting your sexual health and intimacy.	(9)
“It makes you irritable.”	Menopause alone has no effect on mood. But due to symptoms like night sweats and hot flashes, sleep can be messed up, making the person irritable.	(9)
“You need to take hormones.”	Symptoms such as hot flashes and night sweats can be effectively managed through various approaches, including hormone replacement therapy (HRT), which comes with its own set of risks and benefits. Additionally, alternative methods like acupuncture, the use of vaginal lubricants, and lifestyle modifications can also play a significant role in alleviating these symptoms and improving overall well-being during menopause.	(9)
“It makes you gain weight.”	While hormonal fluctuations during menopause may play a role in weight gain, it is the natural slowing of metabolism with age that primarily contributes to excess weight gain. Consistent exercise and physical activity can be instrumental in maintaining overall health and managing weight during this stage of life.	(9)
“Men also experience menopause.”	Men do experience a decline in the levels of testosterone as they age, which can cause some “changes” but not “symptoms”.	(9)

7. A fresh perspective: Finding the silver lining

- Menopause is undeniably a challenging and transformative phase in a woman's life, but it's essential to recognize that it is a natural transition (Table 1). Whether through hormone replacement therapy or positive lifestyle changes, menopausal symptoms can be managed and eventually overcome. Aging brings with it numerous benefits, such as wisdom gained through experience, enhanced intellectuality, and the opportunity to reassess goals for the future (10).
- The impact of mental and physical health issues, along with other changes, can significantly influence women's lives. Engaging in open discussions with healthcare providers is key to unravelling the complexities of symptoms through a holistic approach. By collaborating with doctors, it is possible to gain a comprehensive understanding of your condition, receive personalized treatment recommendations, and access the necessary information and support to manage your health effectively during the menopausal transition.
- Throughout their lives, women often prioritize others over themselves, feeling guilty about self-care and struggling to put their needs first. Menopause can serve as a catalyst for self-awareness and self-worth, prompting women to focus on their bodies, emotions, and aspirations. Rediscovering identity and desires post-menopause can be liberating, as it allows women to shift their focus from caregiving to self-nurturing.

- Menopause acts as a bridge between two life stages for women, presenting challenges but also opportunities for personal growth. Taking a holistic approach can help navigate this transition, with the understanding that each woman's experience is unique yet shared by millions. Embracing change with confidence and grace, understanding one's body, making mindful lifestyle choices, and prioritizing self-care are empowering ways to navigate this phase with resilience and self-assurance.
- Connecting with and seeking support from other women who are either experiencing or have experienced menopause can offer valuable perspectives, shared experiences, and a sense of community. By coming together, women can support each other, ease the transition, and celebrate the strength that emerges from this transformative journey (Figure 2).

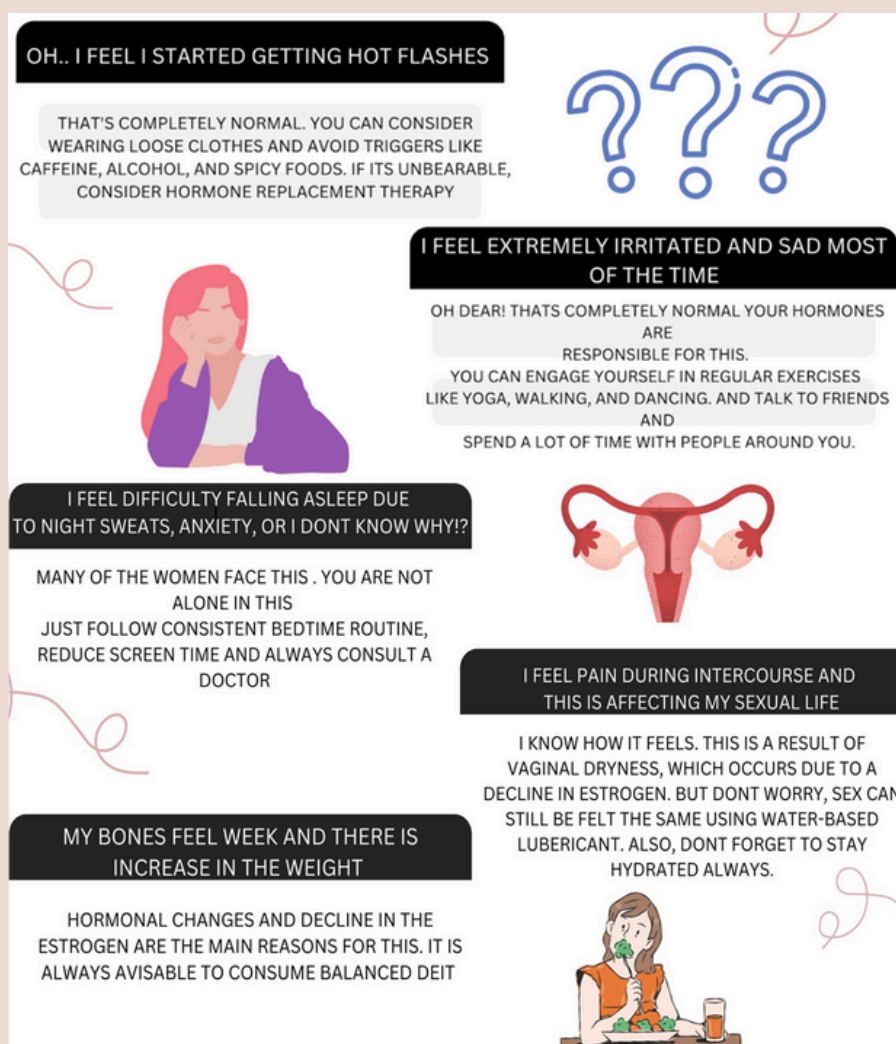


Figure 2. Mindful reflections associated with the voyage through menopause

8. When to seek help

While menopause is a distinct and unfamiliar experience for every woman, it can be challenging to recognize when symptoms become concerning or potentially problematic. Therefore, it is essential to be vigilant for specific red flags that may signal the need for medical attention. Upon noticing these warning signs, it is crucial to promptly seek guidance from a healthcare provider to address any potential issues effectively and ensure optimal health and well-being during this transition.

- Heavy and prolonged bleeding
- History of polycystic ovarian syndrome (PCOS)
- Bleeding after sexual intercourse
- Resumption of bleeding after a year without periods
- Being overweight
- Severe mood swings and persistent symptoms (11).

9. Conclusion

Transitions are intrinsic to life. By adopting a broader outlook and welcoming change, we can navigate

it with grace. While every woman experiences the transition to menopause in a unique way, one universal truth is that millions of women around the world go through this transformative phase. By gaining an understanding of the changes occurring in your body, making mindful lifestyle choices, and placing a priority on self-care, you can navigate this stage with a sense of empowerment and control.

References

1. O'Neill S, Eden J. The pathophysiology and therapy of menopausal symptoms. *Obstetrics, Gynaecology & Reproductive Medicine*. 2020 Jun 1;30(6):175-83.
2. Willi J, Süss H, Ehlert U. The Swiss Perimenopause Study – study protocol of a longitudinal prospective study in perimenopausal women. *womens midlife health*. 2020 Dec;6(1):5.
3. Zhu C, Thomas N, Arunogiri S, Gurvich C. Systematic review and narrative synthesis of cognition in perimenopause: The role of risk factors and menopausal symptoms. *Maturitas*. 2022 Oct 1; 164:76-86.
4. Santoro N, Roeca C, Peters BA, Neal-Perry G. The Menopause Transition: Signs, Symptoms, and Management Options. *The Journal of Clinical Endocrinology & Metabolism*. 2021 Jan 1;106(1):1-15.
5. Talaulikar V. Menopause transition: Physiology and symptoms. *Best Practice & Research Clinical Obstetrics & Gynaecology*. 2022 May; 81:3-7.
6. Kafaie-Atrian M, Sadat Z, Nasiri S, Izadi-Avanji FS. The effect of self-care education based on self-efficacy theory, individual empowerment model, and their integration on quality of life among menopausal women. *International Journal of Community Based Nursing and Midwifery*. 2022 Jan;10(1):54.
7. Erdélyi A, Pálfi E, Túű L, Nas K, Szűcs Z, Török M, et al. The Importance of Nutrition in Menopause and Perimenopause—A Review. *Nutrients*. 2023 Dec 21;16(1):27.
8. Xu H, Liu J, Li P, Liang Y. Effects of mind-body exercise on perimenopausal and postmenopausal women: a systematic review and meta-analysis. *Menopause*. 2024 May;31(5):457-67.
9. Nagaraj D, Ramesh N, Devraj D, Umman M, John AK, Johnson AR. Experience and Perceptions Regarding Menopause among Rural Women: A Cross-Sectional Hospital-Based Study in South Karnataka. *Journal of Mid-life Health*. 2021 Jul;12(3):199-205.
10. Arnot M, Emmott EH, Mace R. The relationship between social support, stressful events, and menopause symptoms. Sánchez-Rodríguez MA, editor. *PLoS ONE*. 2021 Jan 27;16(1): e0245444.
11. Huang DR, Goodship A, Webber I, Alaa A, Sasco ER, Hayhoe B, et al. Experience and severity of menopause symptoms and effects on health-seeking behaviours: a cross-sectional online survey of community dwelling adults in the United Kingdom. *BMC Women's Health*. 2023 Jul 14;23(1):373.