



## Menopause and Body Changes

Women may find their body changes during menopause. Unpleasant symptoms such as dry skin, the sensation of crawling under the skin, dry vagina, pain during intercourse, joint and muscle aches, and frequent urination are common. Some of these symptoms can be due to lower levels of the hormone oestrogen, which is the main hormonal change at menopause. While the use of oestrogen replacement therapy may be useful for some women with some of the changes detailed below, it should not be regarded as an antiageing therapy.

### Skin

- Dryness, loss of elasticity, and thinning of the skin occur around the time of menopause, along with increased wrinkles. These changes are due to a combination of deterioration due to ageing and hormonal changes. Wrinkles are made worse by smoking and exposure to sun throughout life.
- Oestrogen therapy has beneficial effects on the skin. Studies have shown that oestrogen increases skin thickness as well as increasing the water-holding capacity of the upper layer of the skin. Oestrogen may also decrease skin slackness and improve the skin's capacity for repair.
- The sensation of crawling on or under the skin, called formication, is relieved by oestrogen therapy.
- Acne may occur and may accompany unwanted hair growth.

### Teeth

- Many women notice deterioration in the condition of their teeth after menopause.
- It is common to experience reduced saliva, increased gingivitis (bleeding gums) and sometimes changes in taste and smell.
- Osteoporosis (bone thinning) has been linked to tooth loss, with reduced bone in the jaw leading to lack of support for teeth.

### Vulva and Vagina

- The genital tract is highly oestrogen-dependent, so dry vagina and vulva are common complaints at menopause. This can lead to discomfort or pain during intercourse as well as bleeding or spotting after intercourse. It is normal for the labia (vulval lips) to become thinner with menopausal hormonal changes.
- Vulval dryness can worsen other vulval skin conditions (e.g. eczema) which cause itching and irritation.
- Avoiding soap and bodywashes on the vulva can help relieve irritation and dryness. Alternatives to soap include sorbolene with glycerine or special low-irritant cleansing lotions available from the chemist.
- All of the above vulvovaginal symptoms respond well to locally applied oestrogen preparations as well as to hormone therapy (HRT).

### Bladder

- Urinary frequency and incontinence are more common around the time of menopause.
- The most common cause of incontinence is an overactive or irritable bladder. Vaginal oestrogen therapy may help this condition.
- Some women find combined HRT beneficial for incontinence but others do not. In some women HRT may make incontinence worse
- Other incontinence treatments include medication, physiotherapy and, if necessary, surgery. These may be considered after further investigations of the incontinence have been undertaken.



### Joint and Muscles

- Joint and muscle aches and pains are common symptoms during menopause.
- Conditions such as osteoarthritis are also common at this time.
- Exercise is an important part of management of these symptoms. ( See AMS Healthy Ageing and Lifestyle pamphlet)
- Joint and muscle aches may improve with the use of HRT.

### Hair

- Many women notice increased facial hair at menopause.
- Thinning of scalp and pubic hair is also common.
- HRT, particularly oral forms, can help to control facial hair in some women.
- Other treatments for increased facial hair include waxing, laser therapy and antitestosterone medication.
- There are some treatments using scalp lotions that can be applied to help thinning scalp hair.

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