Lifestyle and behavioural modifications for menopausal symptoms

KEY POINTS:

- Evidence for the effectiveness of lifestyle and behaviour modifications for menopausal symptoms is mixed, limited or non-existent.
- Evidence suggests that weight gain increases the severity of vasomotor symptoms so maintaining healthy weight might be helpful.
- No evidence exists for the effectiveness of lifestyle changes such as exercising or controlling environmental temperature although these might help with comfort and wellbeing.
- Evidence shows that cognitive behaviour therapy improves wellbeing and decreases the impact of menopausal symptoms.
- No evidence exists showing that breathing and relaxation practices reduce the severity of symptoms – there is mixed evidence for yoga.
- Limited evidence suggests that hypnosis might improve menopausal symptoms but there is no evidence that acupuncture, magnetic therapy, reflexology or chiropractic interventions are effective.

Many women are interested in the potential of lifestyle and behavioural modifications to help with their menopausal symptoms. The evidence for the effectiveness of lifestyle changes is mixed and limited.

Lifestyle and behavioural modifications might not necessarily improve symptoms, but some may improve wellbeing and help women tolerate symptoms.

Lifestyle modifications

Maintaining healthy weight

Women often request information about weight gain and menopause. Although menopause does not cause weight gain, there is evidence that weight gain can increase the severity of vasomotor symptoms.

- Breast cancer survivors with post-diagnosis weight gain had a greater risk of reporting hot flushes than women who did not gain weight1.
- One study of 40 overweight/obese women showed that a 10% weight loss resulted in significant improvement in hot flushes, with a correlation between weight loss and reduction in hot flush frequency2.

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Improving cooling through environmental control

Clinical evidence does not exist to support the efficacy of cooling interventions as treatment for vasomotor symptoms. Nonetheless, small core body temperature elevations can trigger vasomotor symptoms\(^2\),\(^3\),\(^4\), so it makes sense to propose environmental and lifestyle changes that lower core body temperature or that prevent it from rising. Suggested changes include:

- adjusting clothing
  - dress in layers
  - wear sleeveless blouses or tops
  - wear clothing made of natural fibres that breathe
  - avoid jumpers and scarves
- using a hand fan or electric fan as required
- keeping cooler at night
  - lower the room temperature
  - put a cold pack under the pillow
  - turn the pillow over to the cool side when feeling warm
  - use dual control electric blankets
  - use a bed fan that blows air between the sheets
- drinking cool liquids such as iced water.

Avoiding triggers of vasomotor symptoms

Some women are able to identify triggers for their vasomotor symptoms. Avoiding these triggers may help women to manage symptoms, although this has not been tested in clinical trials. Potential triggers include:

- spicy foods
- smoking – has been reported as a risk factor for vasomotor symptoms\(^5\). Smoking cessation may help to alleviate mild symptoms but there are no clinical trials evaluating this intervention
- alcohol – can trigger hot flushes and some women find that their flushes are reduced when they avoid drinking alcohol.
Exercising regularly

Several studies have investigated whether exercise improves hot flushes, but the existing evidence does not show that exercise helps to reduce hot flushes or night sweats.

Nonetheless, exercise has other benefits and may improve quality of life, cognitive functioning, depression, sleep patterns, fatigue, bone density, weight maintenance and cardiovascular disease. For guidelines on exercise, see the AMS information sheet Lifestyle advice for healthy ageing.

Mind- and body-based therapies and practices

Cognitive behaviour therapy

Group and individual cognitive behaviour therapy are both effective at reducing the impact of vasomotor symptoms and at improving sleep and general wellbeing. This approach could potentially be used in conjunction with other therapies for menopausal symptoms.

Yoga

There is mixed evidence that yoga is effective for the management of vasomotor symptoms and sleep disturbance.

Paced breathing

Slow, deep abdominal breathing for 15 minutes twice daily may reduce feelings of anxiety that can occur with hot flushes but this practice does not reduce the severity of hot flushes.

Relaxation

Poor quality studies have yielded inconsistent results regarding the effect of relaxation on vasomotor symptoms.

Other therapies

Hypnosis

There have been limited studies on hypnosis for hot flushes, but a recent carefully conducted trial showed that hypnosis was more effective than an attention control comparison. Hypnosis also improved sleep and hot flush interference in this study.
Acupuncture

Small studies of acupuncture as a treatment for hot flushes have shown mixed results. A recent large Australian study did not show any benefit for hot flushes compared to sham acupuncture. A thorough review of all the studies on acupuncture for hot flushes and night sweats in breast cancer patients did not show any overall benefit for acupuncture.

Magnetic therapy, reflexology, chiropractic interventions

There is no evidence that women benefit when they use these therapies.

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References