

Menopause



Almost 8 in 10 women experience menopausal symptoms that interfere with their daily lives.¹



Of the women who seek medical advice for menopause, 4 in 10 feel their symptoms are undertreated.¹



1 in 10 women will leave the workforce due to menopausal symptoms.²

3 Stages of Menopause

Perimenopause

The stage leading up to menopause, lasting up to 10 years and characterized by fluctuating hormone levels, menopausal symptoms and/or irregular periods.

Menopause

This milestone is defined as the point in time when menstrual periods have stopped for 12 consecutive months.

Post-menopause

The stage following menopause and lasting for the rest of a woman's life. For most women, menopausal symptoms subside within a few years, for others these symptoms persist for decades.

In Canada, the average age of menopause is 51 with most women reaching menopause between 45 and 55.

Early & Premature Menopause

Early Menopause: reaching the menopause milestone before the age of 45.

Premature Menopause: reaching the menopause milestone before the age of 40.

Women may experience early or premature menopause due to genetics, surgery or treatment for other conditions such as cancer. Other women may experience early or premature menopause for no identifiable reason at all. All women who reach menopause before the age of 40 will be offered further testing to rule out any underlying causes and confirm the diagnosis

What is Menopause?

Menopause is a fundamental stage of life that all women face as a natural part of aging. By 2025, over 1 billion women globally will be experiencing menopause and yet this life stage remains shockingly misrepresented and misunderstood.

When discussing menopause, it's important to be clear on definitions - are we defining menopause as a milestone or a life stage? Menopause as a milestone marks the end of a woman's menstrual cycle after 12 consecutive months without a period. As a life stage, menopause more broadly encompasses the transition and subsequent changes women experience for over half of their lives.

When menopause is oversimplified as the 'end of a woman's menstrual cycle', it ignores the complex hormonal, physical and emotional changes that accompany this important life stage. Imagine if we applied the same simplicity to puberty - explaining to young girls 'it's just the start of your menstrual cycle' and omitting all the other details on how puberty may impact your day-to-day functioning. We encourage education on the bodily changes that accompany puberty, yet we often avoid discussing the details of what to expect throughout menopause.

1 in 100

women will experience menopause before the age of 40.³

1 in 1000

women will experience menopause before the age of 30.³

What 'causes' Menopause?

When women are born their ovaries contain roughly 1-2 million ovarian follicles – these are tiny fluid filled sacs, each containing one unfertilized egg.

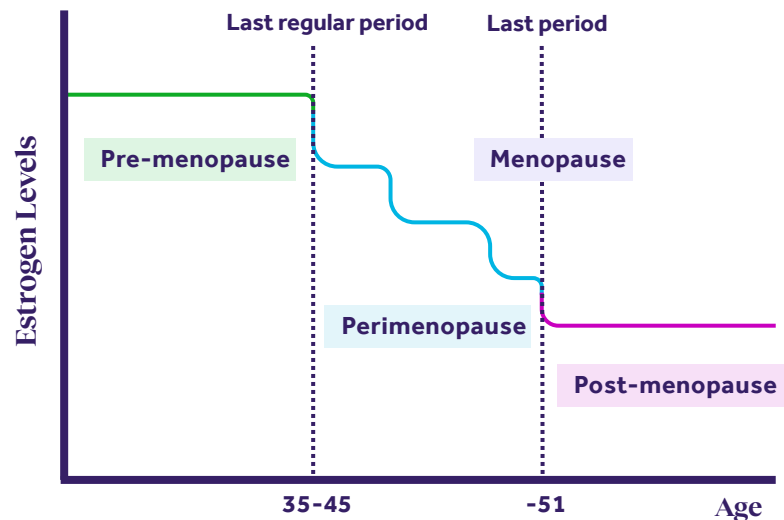
The total number of follicles in each ovary declines over time, with roughly 500,000 remaining by the time a woman reaches puberty and under 1,000 by the time a woman approaches menopause.

During the reproductive years, these follicles are growing and maturing at different rates in the ovaries. During each menstrual cycle, a mature follicle or 'egg', is released from one of the ovaries, available for fertilization by a male sperm – this process is known as ovulation. If the egg is not fertilized, it is passed during your period.

Not only are these ovarian follicles necessary for reproduction, but they also play a central role in the hormonal signaling that controls the entire menstrual cycle.

Women are born with over 1 million estrogen-producing ovarian follicles, by menopause this number declines to under 1,000.⁴

Hormonal Changes Throughout Menopause



Follicles produce estrogen and rely on complex hormonal signaling from the brain to determine when to grow and when to be released by the ovary. This means when the total number of follicles begins to diminish, so do estrogen levels. As women age, their reserve of ovarian follicles decreases, this is the natural phenomenon that eventually 'causes menopause'.

By the time a woman reaches menopause, the number of remaining ovarian follicles is very low. With fewer follicles to produce estrogen, the overall estrogen levels drop setting off a cascade of hormonal changes. These fluctuating hormone levels contribute to hot flashes, mood changes, sexual dysfunction and all the other physical and psychological symptoms that occur throughout menopause. As estrogen levels continue to fall, eventually menstrual periods stop due to the lack of estrogen normally needed to drive a regular menstrual cycle.

It can take the body years to adjust to these changing hormonal levels and for most women the symptoms of perimenopause begin 6 to 8 years prior to periods stopping.





Symptoms

Every menopause experience is unique, 25% of women will experience severe symptoms that significantly impact daily functioning while others are completely symptom-free.³

Vasomotor symptoms

Vasomotor symptoms are sudden wave-like sensations of heat, such as hot flashes and night sweats. Up 75% of women experience these symptoms with 20% of women reporting severe hot flashes with a significant impact on daily life.⁷

There is a common misconception that hot flashes subside once a woman reaches menopause, however most women will experience these symptoms for 3-5 years after menopause, in some women symptoms persist for 15 years or more.

Pelvic floor changes

A collection of symptoms associated with changes to the pelvic floor muscles and surrounding skin such as vaginal dryness, burning, or irritation, painful intercourse, painful urination, bladder control difficulties and recurrent urinary tract infections.

Changes to skin, hair and nails

Low estrogen causes the skin to thin and have difficulty retaining moisture. Many women will experience dryness, more pronounced wrinkles and increased dark spots. Hair loss can also be influenced by low estrogen with some menopausal women noticing increased hair thinning, dryness and slower growth.

Irregular periods

Irregular periods are an incredibly common experience for menopausal women. Up to 90% of women will experience irregular periods at some point during menopause.³ In Canada, most women will experience irregular periods for 6-8 years before their period stops completely.

Mood changes & memory loss

Approximately 15% to 50% of perimenopausal and postmenopausal women may experience a range of psychological and emotional symptoms, such as anxiety, depression and forgetfulness.⁷

Pain

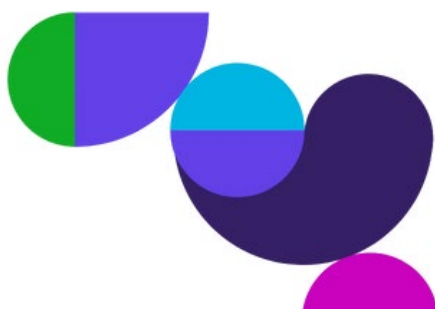
Headaches, migraines, joint pain, and body aches are all lesser-known symptoms of menopause.

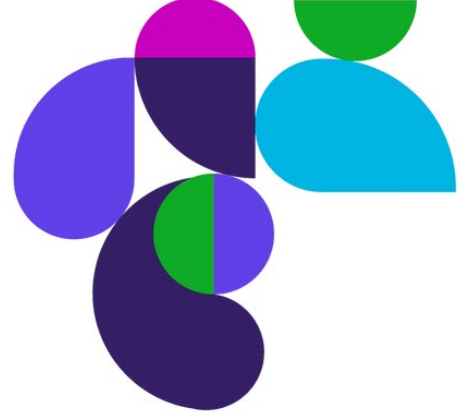
Sleep difficulty

May include either challenges falling asleep or frequent waking.

Lower libido

Over 50% of menopausal women will experience sexual dysfunction.³





Diagnosis

Menopause is diagnosed based on symptoms alone. If a woman over 45 has not had a period for at least 12 months, a healthcare provider can confidently make a diagnosis.

Is there a test for Menopause?

Testing for menopause is only recommended in very specific cases, particularly in women under 45 in order to confirm a diagnosis of early or pre-mature menopause. In these cases, confirmation of menopause may help guide treatment, as HRT is often recommended to younger women given the protective effect of estrogen supplementation (see HRT fact sheet).

If a test for menopause is required, it is usually carried out using a blood test for Follicle Stimulating Hormone (FSH). This hormone is released from the brain and works closely with estrogen and progesterone to regulate the menstrual cycle and encourage the growth of ovarian follicles in preparation for ovulation. As estrogen levels fall during menopause, FSH increases in response. A high FSH level on two repeated blood tests confirms a diagnosis of early or premature menopause in women under 45.

Treatment

Hormonal Therapies

Despite its long and controversial history, current Canadian guidelines state HRT is safe to use for the treatment of menopausal symptoms in perimenopausal women and women who are less than 10 years into post-menopause. For more details on HRT see the HRT fact sheet.

Vaginal creams, rings or suppositories containing estrogen can help with pelvic floor symptoms such as vaginal dryness or sexual discomfort.

Non-hormonal Therapies

While HRT is usually the first and most effective choice, it's not always the right choice for everyone. Other treatment options exist for women who are advised against HRT or feel HRT does not align with their personal preferences. Selective Serotonin Re-uptake Inhibitors (SSRI) medications, gabapentin, pregabalin and clonidine are all more commonly used for the treatment of other medical conditions but are also effective at improving menopausal vasomotor symptoms.

Non-hormonal vaginal moisturizers and lubricants can be helpful before sexual intercourse or for daily maintenance to relieve vaginal dryness.

Natural Therapies

More than 50% of perimenopausal and postmenopausal women use some form of complementary and alternative medicine, including natural health products, dietary changes, massage, acupuncture, and stress therapies for management of menopausal symptoms.⁷ See the table on the following page for more details.

Lifestyle Changes to Support Menopause

Whether you decide hormonal, non-hormonal or natural treatment options are right for you, all women can benefit from making small adjustments to their lifestyle in order to further support their body throughout menopause.

Stress Reduction

According to recent research, stress reduction techniques such as yoga, mindfulness and cognitive behavioural therapy have all demonstrated a positive impact on the psychological menopausal symptoms. Some research suggests that these techniques may also help improve other symptoms such as hot flashes and sleep disturbance but the results are inconsistent and further studies are required.

Up to 50% of women experience menopause-related mood changes.⁷

Diet

A menopause-friendly diet not only helps relieve vasomotor symptoms like hot flashes and night sweats but also helps protect your bones and promote healthy heart and brain functioning. The estrogen loss that occurs during menopause puts women at an increased risk of osteoporosis, heart disease and dementia. Diet is an easy way to ensure you are providing your body with the appropriate nutrients to help maintain health, prevent chronic disease and protect your post-menopausal body from the impact of low estrogen.

Consume more...

Calcium

Calcium is critical for maintaining optimal bone health and preventing osteoporosis especially when given with Vitamin D. Given the increased risk of osteoporosis following menopause, all women over 50 should aim for 1200mg of calcium per day. Calcium is found in foods like, leafy greens, broccoli, fortified fruit juice, milk, cheese, yogurt, chia seeds, and almonds. Calcium supplements should always be discussed with your doctor.

Omega-3

Some research suggest omega-3 consumption can decrease the frequency and intensity of hot flashes and night sweats. Omega 3 can be found in fish, flax seeds, chia seeds and fortified foods such as certain brands of eggs, yogurt and milk. There are also omega-3 supplements for individuals who find it difficult to consume omega-3 through diet alone.

Plant estrogen or 'Phytoestrogens'

As discussed on the previous page, phytoestrogens are a family of plant-based estrogens that mimic the role of estrogen in our body and can therefore help relieve some menopausal symptoms specifically hot flashes and night sweats. Foods like broccoli, cauliflower, dark berries, chickpeas and soybeans are all examples of phytoestrogens.

Consume less...

Process foods and refined carbohydrates

Aim to eat mostly whole natural foods with a focus on whole grains, brown rice and sweet potato over white rice, pasta and potatoes. These foods help avoid spikes in blood sugar which can worsen severity of hot flashes.

Alcohol

Alcohol can exacerbate hot flashes, sleep disturbances and mood swings. Menopausal women are advised to consume one drink or less per day.

Spicy foods

While spicy foods are not necessarily bad for your health, some women find they can bring on hot flashes so it's worth cutting back to see if symptoms improve.



How can Teladoc Health help?

If you feel you have started to experience symptoms of perimenopause and are looking for more information on symptoms or treatment options including lifestyle modifications, prescription medication for hot flashes or hormone therapy, our Find a Doctor services can help you locate a general practitioner or gynecologist.

If you are looking for a second opinion to further discuss treatment options, particularly HT, our [Expert Medical Opinion](#) service can offer an evaluation of your diagnosis and treatment plan, which are reviewed by carefully selected medical experts.

If you would like further resources on natural therapies or supportive life-style changes, our [Personal Health Navigator](#) service will help locate resources including naturopaths, dieticians, or acupuncturists, based on your concerns.

If you are having difficulty with menopause-related mental health changes, our [Mental Health Navigator](#) service can provide support in navigating the healthcare system, assessing and diagnosing a mental health concern, or reviewing an existing diagnosis or treatment plan that may not be working or improving your condition.

This guide is not meant to provide medical advice or service and should not be construed as the professional advice of Teladoc Health. As such, Teladoc Health does not guarantee or assume responsibility for the correctness of the information or its applicability regarding any specific factual situation. Personal health problems should be brought to the attention of physicians and appropriate health care professionals.

©Teladoc Health, Inc. All rights reserved.

1. "The Silence and the Stigma - The Menopause Foundation of Canada." The Menopause Foundation of Canada, The Menopause Foundation of Canada, menopausefoundationcanada.ca/wp-content/uploads/2022/10/MFC-Report_The-Silence-and-the-Stigma_Menopause-in-Canada_October-2022.pdf. Accessed 5 Jan. 2024.
2. "Menopause and Work in Canada." The Menopause Foundation of Canada, The Menopause Foundation of Canada, Nov. 2023, menopausefoundationcanada.ca/pdf_files/Menopause_Work_Canada_2023EN.pdf.
3. "Menopause - What Everyone Should Know." The Menopause Foundation of Canada, The Menopause Foundation of Canada, 9 Oct. 2023, menopausefoundationcanada.ca/resources/menopause-what-everyone-should-know/.
4. Levine, Hallie. "What the Number of Ovarian Follicles Says about Fertility." What to Expect, What to Expect, 26 May 2023, www.whattoexpect.com/getting-pregnant/ovulation/ovarian-follicles.
5. "How Do I Know When I'm in Menopause?" North American Menopause Society (NAMS) - Focused on Providing Physicians, Practitioners & Women Menopause Information, Help & Treatment Insights, North American Menopause Society (NAMS), www.menopause.org/. Accessed 5 Jan. 2024.
6. Goldstein, Susan. "An Efficient Tool for the Primary Care Management of Menopause." The College of Family Physicians of Canada, The College of Family Physicians of Canada, 1 Apr. 2017, www.cfp.ca/content/63/4/295.
7. "Pocket Guide Menopause Management." Canadian Menopause Society, Canadian Menopause Society, www.sigmamenopause.com/sites/default/files/pdf/publications/Final-Pocket%20Guide.pdf. Accessed 5 Jan. 2024.
8. Johnson A, Roberts L, Elkins G. Complementary and Alternative Medicine for Menopause. J Evid Based Integr Med. 2019 Jan-Dec;24:2515690X19829380. doi: 10.1177/2515690X19829380. PMID: 30868921; PMCID: PMC6419242.
9. Toffol, Elena, et al. "Hormone therapy and mood in perimenopausal and postmenopausal women." Menopause, vol. 22, no. 5, 2015, pp. 564-578, <https://doi.org/10.1097/gme.0000000000000323>.
10. "Menopause Diet: What to Eat to Help Manage Symptoms." Cleveland Clinic, Cleveland Clinic, 14 Dec. 2023, health.clevelandclinic.org/menopause-diet.

Learn more at TeladocHealth.ca

About Teladoc Health: Teladoc Health is empowering all people everywhere to live healthier lives by transforming the healthcare experience. Recognized as the world leader in whole-person virtual care, Teladoc Health leverages clinical expertise, advanced technology and actionable data insights to meet the evolving needs of consumers and healthcare professionals.

© Teladoc Health, Inc. All rights reserved.