

Menopausal women often turn to doctors who know little about the symptoms. Here's what needs to change

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Credit: AI-generated image (disclaimer)

Menopause typically occurs at some period between the ages of <u>46 and 52</u>. Preceding this transition, hormonal changes can cause a myriad of physical and psychological symptoms, such as hot flushes, brain fog, mood swings and a loss of libido.



These symptoms not only affect the well-being of women, but also take a toll on the economy—<u>costing millions</u> in lost productivity each year.

Yet, despite its widespread impact, many medical professionals lack adequate <u>education</u> on <u>menopause</u>, leaving them ill-prepared to guide women through this transitional, important phase.

Even though 51% of the population will experience menopause, medical schools often overlook this crucial aspect of women's health. A 2021 report found that, in the U.K., only 59% of medical schools included mandatory menopause education in their curriculum.

Instead, <u>medical students</u> were expected to gain menopause education while on their GP training placements. This lack of structured education has resulted in many doctors graduating without the necessary expertise to recognize and effectively treat menopause symptoms.

Textbooks with little information

Even medical textbooks, the primary source of knowledge for medical practitioners, often provide scant information on menopause. One <u>study</u> revealed that 58% of analyzed medical textbooks used around the world had no reference to menopause and 12% dedicated less than a paragraph to the topic.

When included, the textbooks often portrayed menopause as being a "failure" or the end of "normal" ovulatory function. Such language perpetuates the false notion that the post-menopausal body is somehow "broken" or "abnormal."

The lack of menopause specialists means that some <u>women spend years</u> <u>suffering</u> from menopause-related symptoms that are either misdiagnosed or insufficiently treated. It has also placed a large burden



on the few clinics that do offer the service.

In England, one report found there were almost <u>7,000 women</u> on waiting lists for menopause treatment. They had to wait over <u>seven months</u>, on average, for referral to a specialist clinic.

As some NHS trusts do not offer any specialist menopause support at all, women then have the option to travel large distances to access the service or to pay for <u>private health care</u>.

To compensate for the educational gap, <u>medical practitioners</u> often resort to external courses for additional training, such as those offered by the <u>British Menopause Society</u>. However, these courses are costly in both time and money, which can be discouraging for the already overburdened and underpaid health care workers.

Women themselves face obstacles in discussing menopause with their doctors. Until 2019, menopause was not included in the school sexual health or science curriculums, meaning women often know very little about the transition until they start experiencing it themselves.

Data from a <u>sample of post-menopausal women</u> found that 94% had never been taught about menopause at school and 49% felt uninformed about menopause before experiencing it.

Improving menopause education

Recognizing the need for improving menopause education for both those experiencing it and those treating it, menopause was added to the <u>UK's</u> national sex education curriculum in 2019.

NHS England has also established the Menopause Pathway Improvement Program. This is working to improve clinical medical care in England,



reduce disparities in access to treatment and develop a comprehensive education and training package on menopause for health care professionals.

<u>From 2024</u>, key topics related to women's health, including menopause, will be included in mandatory assessments for U.K. medical students.

Despite these positive steps, there is still room for improvement. Menopause is already included in the general training for GPs, but only after medical school. But GPs have an incredibly broad medical education (as well as the shortest of the specialisms).

And there are signs they want more in-depth knowledge. In an <u>online</u> <u>survey</u> of GPs, 52% reported they felt they were not offered enough training to advise women with menopause symptoms. Some stated that they did not remember being taught the subject at all.

Despite this, the Royal College of General Practitioners <u>recently argued</u> <u>against</u> recommendations to mandate menopause training, instead placing the responsibility on the individual GP to ensure their clinical knowledge of menopause remains up to date.

In recent years, menopause has gained significant media coverage through campaigns by companies, charities and public figures. This increased awareness has encouraged women to seek help from their GPs, but this has led to clinics becoming overwhelmed while still underresourced.

But this is a positive step, as it suggests women are feeling empowered to seek help for their menopause symptoms. As a further sign of progress, University College London has recently announced a new National Menopause Education and Support Program. This will provide a course spread over several weeks to educate women on menopause and also



provide them with peer support throughout the transition.

The next crucial step is to equip <u>medical professionals</u> with the knowledge and resources they need to effectively support women. By doing so, we can ensure women receive the care they need and deserve during this important life transition and improve overall well-being in later life.

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