

Women are turning to cannabis to treat menopause symptoms, study suggests

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A new University of Alberta [study](#) published in *BMJ Open* suggests many women in Alberta use cannabis to treat symptoms of menopause despite a lack of evidence that it is effective for menopause symptoms.

"This research highlights that women are using cannabis as an alternative option to manage their symptoms," says Katherine Babyn, a second-year [medical student](#) who completed the study as a part of her master's program in the Faculty of Pharmacy and Pharmaceutical Sciences.

"It also highlights issues around menopause care in general that women are seeking other options to manage their symptoms."

The study involved 1,485 women aged 35 and older living in Alberta who completed an [online survey](#) about their cannabis use patterns in relation to reported [menopause symptoms](#).

Of the respondents, about one-third (499 women) reported currently using cannabis while 66% used at some point. Of current users, 75% indicated using cannabis for medical purposes most common symptoms were for improving sleep, reducing anxiety and relieving muscle and joint aches.

The exploratory study was designed to inform further research into why and how women use cannabis and to help create clinical tools for health-care providers and educational material for women.

When Babyn and co-author Nese Yuksel, a professor in the Faculty of Pharmacy and Pharmaceutical Sciences and Babyn's supervisor during her master's program, searched the scientific literature for studies on cannabis and menopause, they noticed a lack of published research.

"Even when we looked at specific symptoms that related to what a woman might experience during menopause, there weren't any [randomized controlled trials](#) that suggested cannabis could be an effective therapy option for menopause symptoms," says Yuksel, who is also a member of the Women and Children's Health Research Institute and incoming president of the Canadian Menopause Society.

"The fact that we were able to survey such a large number of women shows that there is an interest in this area, and it is an important topic to continue investigating."

In her previous clinical work at the menopause clinic at the Lois Hole Hospital for Women, Yuksel noticed more women using cannabis to alleviate symptoms they didn't realize were the result of menopause or perimenopause, which is the time leading up to menopause.

"It's not just the hot flashes and night sweats—it's the sleeping issues, it's the mood issues, it's the brain fog and that (difficulty with) concentration, which a lot of women talk about," says Yuksel. "But they may not understand that these could be related to menopause."

Babyn adds that women may choose to consume cannabis or natural health products because they come from [natural sources](#), leading to the belief that natural options are safer or healthier alternatives to pharmaceutical or synthetic drugs.

"It's well known that natural does not necessarily equate to safer or better," says Babyn. "To establish if cannabis is safer or more effective, you really need those randomized control trials, just like all the other drug options that are studied."

Despite this, Yuksel says, the internet is full of informal information about using cannabis in menopause.

"We want to be able to guide women because we get a lot of questions."

Management options for menopause in Canada include menopausal hormone therapy, non-hormonal prescription medications, lifestyle modifications and complementary therapy such as cognitive behavioral therapy. Current menopause guidelines recommend [menopausal](#)

[hormone therapy](#) (MHT) as the most effective option for treating bothersome vasomotor symptoms.

"Unfortunately, there's still a lot of fear of MHT that's a real issue," says Yuksel.

"We're trying to do a lot with the Canadian Menopause Society to bring awareness on feeling comfortable using MHT in the right population. For example, it can be safely considered in women who are less than 60 years of age or less than 10 years' menopause and without contraindications."

Bringing awareness to health-care providers is also important for Babyn and Yuksel because the stigma towards aging in women and menopause can lead to less open communication for patients seeking treatment.

"It's about making women feel comfortable talking, even sharing that they may be having issues," says Yuksel.

"Because of the stigma, the fear of MHT and a lot of misinformation out there, women start finding their own solutions. This study is reflective of the fact that maybe there are a lot of women not getting the help they deserve or need at that time."

For the second phase of their mixed-methods study, Babyn and Yuksel have also explored why the women they surveyed turned to cannabis as a treatment method.

In addition, an information pamphlet about cannabis in menopause including current evidence and support is being developed.

"It is not that we are advocating for cannabis for menopause symptoms; we believe there should be more research in this area so that we have the

evidence to support women," notes Yuksel.

"We did provide a snapshot of what is happening in this area: that women are using cannabis as an option for managing their [menopause](#) symptoms and there should be more investigations moving on forward from this data."

More information: Katherine Babyn et al, Cannabis use for menopause in women aged 35 and over: a cross-sectional survey on usage patterns and perceptions in Alberta, Canada, *BMJ Open* (2023). [DOI: 10.1136/bmjopen-2022-069197](https://doi.org/10.1136/bmjopen-2022-069197)

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