

Perimenopause usually begins in your 40s: How do you know if it has started?

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More than <u>half our population</u> (50.7%) are born with ovaries and will experience perimenopause in midlife. This occurs as hormone levels decrease and ovaries slow their release of eggs.



<u>Perimenopause</u> usually <u>begins</u> in the early to mid-40s. Some people even begin perimenopause earlier, due to premature ovarian insufficiency or <u>medical treatments</u> such as chemotherapy or surgical oophorectomy (ovary removal).

Menopause is technically the single day 12 months after your last period. It usually occurs five to 10 years after perimenopause begins, between ages 45 and 55.

Up to 80% of people in perimenopause <u>experience symptoms</u>. But it's not just hot flushes—symptoms can be incredibly varied and range in severity.

What are the symptoms?

Estrogen affects every system in the body and so too can perimenopause symptoms. These include:

- <u>depression</u> and anxiety
- body aches
- "brain fog" and forgetfulness
- irregular periods or periods of unusual heaviness or lightness
- insomnia
- night sweats
- hot flushes
- vaginal dryness
- no interest in sex
- urinary urgency.

It's impossible to anticipate which, if any, <u>symptoms</u> you'll experience, or in what <u>order</u> they will begin.



What impact does perimenopause have on work and life?

Around 30% of symptomatic Australians find their perimenopause symptoms <u>significantly interfere</u> with <u>daily activities</u>, including their ability to work.

The Australian Women's Health Survey <u>reported</u> 46% of participants have taken an extended break from work, study or exercise due to <u>menopause symptoms</u>.

Thanks to the personal nature of many symptoms, and the stigma surrounding them, these statistics may still <u>under-report</u> the impact of perimenopause on both individuals and society.

The Australian Institute of Superannuation Trustees <u>estimated</u> the retirement of women due to <u>menopausal symptoms</u> would equate to lost earnings and super of more than A\$15.2 billion for every year of early retirement.

Some women experience significant deterioration in their mental health in the lead up to <u>menopause</u>. Perimenopausal depression (PMD) is a serious illness and is categorized as a subset of <u>major depression</u>. It certainly shouldn't be dismissed as female "hysteria" or a bad mood when someone is seeking care or support. In fact, <u>female suicide</u> rates <u>increase from ages 40–60</u>.

Know when to seek help

Each woman's experience will be different, and not all symptoms are related to menopause, but with early recognition and seeking help when needed, this life transition can be a smoother journey.



There are various <u>treatment</u> options for perimenopausal symptom relief. The gold standard is <u>menopausal hormone treatment</u>, which used to be called <u>hormone replacement therapy</u>. This works by counterbalancing the hormone losses of perimenopause and comes in a range of doses and formulations, including gels, patches, pessaries, creams and tablets.

The period after menopause is <u>associated with</u> higher risks for heart disease, diabetes, osteoporosis and dementia. If menopausal hormone treatment is started within 10 years of menopause, it may also <u>reduce these risks</u>.

Some women find it helpful to go through a <u>symptom checklist</u> before seeing their GP (or going through it with their GP) if they want an official diagnosis of perimenopause or treatment for symptoms.

There are also <u>national specialist telehealth menopause services</u> available if you're not getting the care you need locally (currently <u>A\$295 or \$165</u> <u>concession</u>, before the Medicare rebate, for a long appointment with a doctor and a detailed report to send to your GP).

And it's important to know you can seek a second opinion if you're not being listened to.

Perimenopause doesn't just impact those personally going through perimenopause, it also affects their partners, families, businesses, workforce participation and gender equity. We all need to be educated about <u>perimenopause</u> and consider how to increase flexibility and support in our workplaces and other environments.

The federal parliament has <u>just commenced</u> a <u>Senate inquiry into issues</u> related to menopause and perimenopause. This will include the <u>economic cost</u>, physical impacts, government policies and programs, and cultural and societal factors. So we can expect to see more discussion of



these issues until the **final report** is delivered in September 2024.

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