

Menopausal mood swings can signal more serious mental illness

9 April 2018, by Tania Perich



The connection between menopause and mental health is still unclear. Credit: shutterstock.com

Most women expect to experience the effects of hormonal changes when they come to menopause and many anticipate increased irritability and mood swings. But mood swings that can be just an annoyance for some women can develop into something more serious for others.

Menopause [usually begins](#) around the age of 50, when the body's production of oestrogen and progesterone slows. This can lead to a range of effects such as [hot flushes](#), vaginal dryness, breast tenderness and trouble sleeping. These symptoms can last around five years.

Menopausal hormone fluctuations can have a significant impact on [women's mental health](#), with some women more vulnerable to these changes than others. These mental health problems require specific treatment and support.

Depression and anxiety

Women are [two to four times](#) more likely to have an episode of major depression during menopause

than at other times in their lives.

Although some women can have an episode of depression for the first time during menopause, women with a history of recurrent depression are up to [4.5 times more likely](#) to experience another episode of depression at the start of menopause than other women at this stage of life.

Anxiety disorders (generalised anxiety disorder, panic disorder and [social anxiety disorder](#)) are the most common of the [mental health problems](#), with around 25% of the population experiencing one [in the last 12 months](#).

But despite anxiety symptoms and panic attacks being commonly reported during menopause, [little is known](#) about their link with menopause.

Schizophrenia

Oestrogen has a [protective effect against psychotic symptoms](#) for women, due to its modulating effect on the neurotransmitter dopamine.

Excess dopamine is one of the neurological changes seen in patients with schizophrenia, a mental illness that causes episodes of delusions and hallucinations.

Women with an existing diagnosis of schizophrenia may be at increased risk of an episode as their production of oestrogen decreases.

While the causes of schizophrenia are a complex mix of genes, your early development and stress, some women [develop schizophrenia for the first time after menopause](#).

Eating disorders

Eating disorders affect women across their lifespan, and often begin at the first major period of hormonal change: puberty.

But researchers are beginning to understand the [hormonal changes](#) that occur during menopause also increase the risk of [developing an eating disorder](#), such as anorexia, bulimia and binge eating.

Once again, the increased risk is due to fluctuations in oestrogen, which plays an important role in how we regulate our food intake, affecting feelings of hunger, satiety after eating and weight gain.

Bipolar

Bipolar disorder is a serious [mental health disorder](#) affecting up to 2% of Australians. It causes bouts of severe depression and episodes of increased energy, known as mania.

Our [research](#) found that women with bipolar disorder may be uniquely affected by menopause in many ways. Disturbances in sleep due to hot flashes, for instance, can affect the onset of depression and mania.

Planning for good mental health

It is important for women with a history of [mental health conditions](#) to plan their mental health care when [menopause](#) begins.

Women without a history of mental illness should be aware of the risks and talk to their GP prior if they notice persistent changes in mood, or other concerning symptoms.

GPs can prescribe medication and refer to psychologists for Medicare-subsidised counselling, or to psychiatrists for more specialised care.

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