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PATIENT & CAREGIVER EDUCATION

# Managing the Health Effects of Menopause and Early Menopause

This information will help you understand and manage the health effects of menopause and early menopause.

## Natural Menopause

The ovaries hold a woman's supply of eggs and produce hormones, including estrogen. These hormones regulate your monthly menstrual cycle (period). Girls are born with about 1 million eggs, but lose eggs as they age. With fewer eggs, it's harder to get pregnant. For most women in the United States, at age 51, the egg supply becomes so low that the ovaries stop producing estrogen. When this happens, monthly menstrual periods end, and menopause begins.

The loss of estrogen and menopause can cause changes to your body, including:

- Symptoms such as hot flashes, night sweats, trouble sleeping, and mood changes.
- Vulvar (outside of vagina) and vaginal changes.
- An increased risk of osteopenia or osteoporosis (loss of bone density, or thinning of the bones), which can increase the risk of fractures (breaks).
- An increased risk of heart disease.

## Menopause and Cancer

Some treatments for cancer cause women to go through menopause at a young age. This is also called premature or early menopause, premature ovarian failure, and primary ovarian insufficiency (POI).

Causes of early menopause in women with cancer include:

- Surgical removal of both ovaries.
- Loss of eggs in the ovaries from certain chemotherapy medications
- Loss of eggs in the ovaries from being exposed to radiation.

Although many women treated for cancer won't get menopause at a young age, some women go through menopause earlier than they normally would. This is usually during or right after their cancer treatment. But some women go through menopause years after cancer treatment. It's hard to predict if or when a woman will go through menopause earlier due to cancer treatment.

If you're younger than 40 years of age, call your doctor or nurse if you have any symptoms of early menopause, including:

- Irregular periods for 3 months or longer.
- No periods for 3 months or longer.
- Any symptoms of menopause.

## **Menopausal symptoms while taking certain medications**

Some women are given medications (such as leuprolide) to suppress their ovaries. These will cause menopausal symptoms while you're on the medication. If you haven't received any other treatment that could cause early menopause, your ovaries should start to work normally again after you stop the medication.

## **Treatment for Symptoms of Menopause**

### **Hormone therapy (HT) for early menopause**

If you have early menopause, your doctor may recommend HT to replace the hormones your body is no longer producing in their usual amounts. This can prevent some of the health effects of early menopause.

HT can help by:

- Treating the symptoms of menopause.

- Helping to prevent thinning of your bones.

If you have a uterus, your doctor will prescribe estrogen and progestin. If you've had a hysterectomy (a surgery to remove your uterus), your doctor may prescribe estrogen only. HT can be given in several different ways. Your doctor will recommend what's best for you.

Some women are concerned about taking estrogen because of health risks, but many of these risks are reported in women who take estrogen at an older age, after they reach menopause naturally. There is no evidence that these same risks occur in younger women who take hormones to replace those they would have naturally produced at their age.

Not all women can safely take HT. It's generally not recommended for women with:

- Hormone-sensitive tumors (such as breast cancer)
- A history of blood clots
- Heart or vascular disease (having a history of heart attacks, high blood pressure, or stroke)
- Liver disease
- Unexplained vaginal bleeding

Talk with your doctor to see if HT is safe for you. If you can't take HT, there are other ways to manage the effects of menopause and early menopause. Some of these are described in the next section.

## **Managing symptoms without hormones**

You can also manage your symptoms without hormones by following the tips in this section.

## Hot flashes and night sweats

Hot flashes usually start as a warm feeling in your face, neck, chest, and back, which can spread to your entire body. Hot flashes can range from light warming and redness (flushing) to drenching sweats. Some people have 1 or 2 hot flashes a day while others have as many as 3 an hour. They can come on suddenly during the day and can wake you up at night.

You can minimize hot flashes by avoiding smoking, caffeine, alcohol, and spicy food. For more information on how to manage hot flashes, read our resource *Managing Your Hot Flashes Without Hormones*

([https://mskdirect.mskcc.org/pe/managing\\_hot\\_flashes](https://mskdirect.mskcc.org/pe/managing_hot_flashes)).

## Trouble sleeping

Sleeping well at night can make you feel better and give you more energy. Some people with menopause or early menopause can have problems with their sleep, such as having trouble falling asleep or waking up in the middle of the night. For more information on how to manage trouble sleeping, read our resource *Improving Your Sleep at Home*

([https://mskdirect.mskcc.org/pe/improving\\_sleep\\_home](https://mskdirect.mskcc.org/pe/improving_sleep_home)).

## Mood changes

Some people see changes in their mood after menopause. If you're feeling anxious or depressed for a long period of time, ask your doctor or nurse for a referral to Memorial Sloan Kettering's (MSK) Counseling Center for emotional support or to consider medication that may be helpful in treating these symptoms. For more information, call the Counseling Center at 646-888-0200.

## Vulvar and vaginal changes

The vulva and vagina become drier and less elastic after menopause. Women who can't take HT can manage these problems by regularly using vaginal and vulvar moisturizers and using vaginal lubricants during sexual activity. Some women may also be able to use vaginal estrogen. For more information on how to use these products to manage vulvar and vaginal changes and to improve your sexual experience, read our resource *Improving Your Vulvovaginal Health*

([https://mskdirect.mskcc.org/pe/improving\\_vulvovaginal\\_health](https://mskdirect.mskcc.org/pe/improving_vulvovaginal_health)).

If you want more support and information about these issues, talk with your doctor or nurse about the MSK Female Sexual Medicine & Women's Health Program. To make an appointment, call 646-888-5076.

## Bone health

Osteopenia is a condition in which your bone mineral density is lower than normal. Having osteopenia can lead to osteoporosis, a disease in which your bones become weak and more likely to fracture. The loss of estrogen production that occurs from menopause or early menopause can increase the risk of these conditions.

There are things you can do to decrease the chance that osteopenia will progress to osteoporosis and reduce your risk for fractures, including exercising and eating a diet rich in calcium and vitamin D. For more information on how to maintain healthy bones, read our resource *Improving Your Bone Health* ([https://mskdirect.mskcc.org/pe/improving\\_bone\\_health](https://mskdirect.mskcc.org/pe/improving_bone_health)).

Your doctor may recommend you take a calcium supplement, a vitamin D supplement, or both if you don't get enough from your diet. For information on the types of calcium supplements and on how to take them, read our resource *Calcium Supplements* ([https://mskdirect.mskcc.org/pe/calcium\\_supplements](https://mskdirect.mskcc.org/pe/calcium_supplements)).

## Heart health

Losing estrogen during menopause or early menopause may affect your heart health. There are many ways to reduce your risk of heart disease.

- Don't smoke. If you need help quitting, contact the MSK Tobacco Treatment Program at 212-610-0507.
- Eat a heart-healthy diet and maintain a healthy weight. For tips on how to do this, read our resource *Eat Your Way to Better Health* ([https://mskdirect.mskcc.org/pe/eat\\_better\\_health](https://mskdirect.mskcc.org/pe/eat_better_health)).
- Exercise regularly. Any exercise that raises your heart rate for 30 minutes, 5 days a week, is a good option.
- If you have high blood pressure, diabetes, or high cholesterol, ask your doctor or nurse about how to treat these.

# Additional Resources

The North American Menopause Society  
[www.menopause.org/for-women](http://www.menopause.org/for-women)

Women's Health.gov  
[www.womenshealth.gov/menopause](http://www.womenshealth.gov/menopause)

For more resources, visit [www.mskcc.org/pe](http://www.mskcc.org/pe) to search our virtual library.

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