

Symptoms and Complications Associated with Menopausal Transition

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SYMPTOMS AND COMPLICATIONS

Precautionary health care as you age may incorporate recommended health screening tests, such as colonoscopy, mammography and triglyceride screening. Your doctor might suggest other tests and exams, too, including thyroid testing if suggested by your history, and breast and pelvic exams. Always seek out medical advice if you have bleeding from your vagina after menopause.

Menopause can result from

Naturally declining reproductive hormones

As you advance your late 30s, your ovaries initiate making a lesser amount of estrogen and progesterone – the hormones that manage menstruation – and your fertility declines

In your 40s, your menstrual periods may turn into longer or shorter, heavier or lighter, and more or less frequent, until eventually – on average, by age 51 – your ovaries stop releasing spawn, and you have no additional periods.

Surgery that removes the ovaries (oophorectomy)

Your ovaries produce hormones, including estrogen and progesterone that control the menstrual cycle. Surgery to remove your ovaries causes immediate menopause. Your periods stop, and you're probable to have hot flashes and experience other menopausal signs and symptoms. Signs and symptoms can be severe, as hormonal changes arise abruptly rather than progressively over several years. Surgery that removes your uterus but not your ovaries (hysterectomy) usually doesn't cause instantaneous menopause. Although you no longer have periods, your ovaries still release eggs and generate estrogen and progesterone.

Chemotherapy and radiation therapy

These cancer therapies can induce menopause, causing symptoms such as hot flashes during or shortly after the course of treatment. The halt to menstruation (and fertility) is not always enduring subsequent chemotherapy, so birth control measures might tranquil be preferred. Radiation therapy only affects ovarian function if radiation is planned for at the ovaries. Radiation treatment to other parts of the body, such as breast tissue or the head and neck, won't involve menopause.

Primary ovarian insufficiency

About 1% of women occurrence menopause before age 40

(premature menopause). Impulsive menopause may result from the failure of your ovaries to generate normal levels of reproductive hormones (primary ovarian insufficiency), which can stanch from genetic factors or autoimmune disease. But regularly no cause of premature menopause can be found. For these women, hormone therapy is typically suggested at least until the expected age of menopause in order to secure the brain, heart and bones.

COMPLICATIONS

Heart and blood vessel (cardiovascular) disease

When your estrogen levels turn down, your risk of cardiovascular disease increases. Heart disease is the primary reason of death in women as well as in men. So it's momentous to get regular exercise, eat a vigorous diet and retain a usual weight. Ask your doctor for advice on how to protect your heart, such as how to diminish your cholesterol or blood pressure if it's too high.

Osteoporosis

This circumstance causes bones to become fragile and weak, leading to an enlarged risk of fractures. During the first few years after menopause, you may lose bone density at a rapid rate, increasing your menace of osteoporosis. Postmenopausal women with osteoporosis are mainly susceptible to fractures of their spine, hips and wrists.

Urinary incontinence

As the tissues of your vagina and urethra lose elasticity, you may experience frequent, sudden, or the loss of urine with coughing, laughing or lifting (stress incontinence). You may have urinary tract infections more often. Strengthening pelvic floor muscles with Kegel exercises and using a topical vaginal estrogen may help relieve symptoms of incontinence. Hormone therapy may also be an effective treatment option for menopausal urinary tract and vaginal changes that can result in urinary incontinence.

Sexual function

Vaginal dryness from decreased dampness fabrication and loss of elasticity can cause discomfort and trivial bleeding during sexual intercourse. Also, decreased sensation may decrease your yearning for sexual activity (libido). Water-based vaginal moisturizers and lubricants may help. If a vaginal lubricant isn't enough, many women benefit from the use of local vaginal estrogen treatment, existing as a vaginal cream, tablet or ring.

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Weight gain

Many women gain weight during the menopausal transition and

after menopause because metabolism slows. You may must to eat less and exercise more, just to retain your current weight.