

# Menopause Basics Backgrounder

Menopause affects half the population but remains shrouded in mystery. We know a lot about puberty and pregnancy, but when it comes to menopause – the years leading up to it in perimenopause and the years after it in postmenopause – the open talk and fact-based information disappear. Too many women experience menopause without a good understanding of what is happening to their bodies and how changing hormone levels can lead to a number of symptoms and long-term health risks.

## What is Menopause?

Menopause is a natural phase of life and a universal experience that will happen to women and some transgender and non-binary people.

During menopause a woman's ovaries stop producing eggs, which results in falling levels of the hormones estrogen and progesterone. Menopause is a continuum that includes three important stages that will last between one-third to one-half of an average woman's life: perimenopause, menopause and postmenopause. "Menopause" is often used to describe the entire continuum.

## Perimenopause

Perimenopause is the time leading up to menopause and can last anywhere from two to 10 years. During perimenopause estrogen and progesterone levels fluctuate – sometimes dramatically – leading to many symptoms that can have a negative impact on one's health, quality of life and workplace productivity. Most women are in perimenopause between the ages of 40 and 50.

## Early and Premature Menopause

An early menopause is considered to occur between the ages of 40 and 45 years old, and a late menopause between 55 and 60. Going through menopause before the age of 40 is described as premature menopause.

- 1 in 100 women go through menopause before the age of 40.
- 1 in 1,000 before the age of 30.
- 1 in 10,000 before the age of 20.

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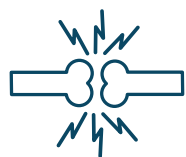
## Surgical and Medical Menopause

Menopause occurs immediately if both ovaries are surgically removed (bilateral oophorectomy). Surgery to remove the uterus (hysterectomy) does not cause menopause if the ovaries are left in place, although periods will stop. Women who have had a hysterectomy will start menopause two to three years earlier, on average, than women who have not. Surgical menopause can cause menopausal symptoms that are more frequent and severe than those experienced during natural menopause.<sup>i</sup> Medical menopause can be caused by chemotherapy, radiation or ovarian suppression therapy.

## Postmenopause

Every day after reaching menopause is considered postmenopause. Women are postmenopausal for the rest of their lives; many perimenopausal symptoms tend to subside in women several years after menopause, but for others they can continue for decades. With the significant postmenopausal drop in estrogen, a woman's risk for heart disease, osteoporosis and the genitourinary syndrome of menopause (GSM) increase. Menopause is often used to describe the postmenopausal phase as people will often say "I'm in menopause".

## Common Symptoms During Menopause



**Physical**



**Mood &  
Mental Health**



**Genitourinary  
& Sexual Health**



**Cognition  
& Sleep**

Each person's menopause journey is unique, with some experiencing very few symptoms while others have symptoms that can last for up to a decade or more. Research indicates that one in two women are unprepared for this stage of life.<sup>ii</sup>

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The lack of menopause education and awareness leaves many people unable to connect the dots on symptoms that are related to the hormonal changes of menopause. Why are there so many symptoms? Women have estrogen receptors throughout their bodies, which is why they may experience everything from hot flashes and night sweats to joint pain, skin changes, dry eyes and recurrent urinary tract infections.

Symptoms are often connected. Lack of sleep caused by hot flashes, joint pain and night sweats, for example, can play a role in levels of fatigue, brain fog and mood changes. With other conditions, similar symptoms are recognized as requiring accommodation.

Knowledge is power. With evidence-based information, women can act. Lifestyle changes, preventative care and a range of safe and effective treatment options can help women live their best life through perimenopause, menopause and postmenopause. Education and awareness raising sessions in the workplace can play a key role in breaking the stigma of menopause and in closing the menopause knowledge gap.

## Diverse Communities and Experiences

People who are transgender, non-binary or intersex may also experience menopause, which can be distinct for each person due to age-related hormonal changes or hormone treatments and surgeries.<sup>1</sup> Members of LGBTIQ+ communities often face barriers in receiving care during menopause, including accessing appropriate menopause hormone therapy, on top of already facing systemic health inequities.<sup>2</sup>

Menopause is also an intersectional experience in relation to disability, age, race, religion, and marital status. Cultural norms can impact a person's perception of menopause and willingness to seek help, and women of different races experience variations in menopausal symptoms.<sup>3</sup> Research has shown, for example, that Black women can experience more severe and longer-lasting menopausal symptoms than other people of other races.<sup>4</sup> Indigenous women face many disparities in health care access during reproductive years as a result of colonial policies, including targeted violence and racism.

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It is important to recognize that for many reasons people's individual experiences of menopause may differ greatly. More research is needed to explore how diverse communities experience menopause.

For further information, visit [MenopauseFoundationCanada.ca](https://www.menopausefoundationcanada.ca)

- <sup>1</sup> <https://www.england.nhs.uk/long-read/supporting-our-nhs-people-through-menopause-guidance-for-line-managers-and-colleagues/#transgender-non-binary-and-intersex-staff-and-the-menopause>
- <sup>2</sup> [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(22\)01935-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(22)01935-3/fulltext)
- <sup>3</sup> <https://thebms.org.uk/wp-content/uploads/2023/06/20-BMS-TfC-Menopause-in-ethnic-minority-women-JUNE2023-A.pdf>
- <sup>4</sup> <https://www.nytimes.com/2023/08/23/well/live/menopause-symptoms-women-of-color.html>
- <sup>5</sup> <https://www.cmaj.ca/content/195/33/E1097>

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- <sup>i</sup> O'Brien K, Uzelac A, Lim J, Christakis M, Shirreff L. Surgical Menopause. Gynaecology Quality Improvement Collaboration: v12.22.2021.
  - <sup>ii</sup> The Silence and the Stigma: Menopause in Canada. The Menopause Foundation of Canada. October 2022.