

Menopause

Permanent ~~ca~~ cessation of menstruation / periods for 12 months

perimenopause: period around menopause.

period of 4-5 years before menopause where menopausal transition occur

Endocrinology of menopause

- Fall in serum estradiol to 10-20 pg/ml after menopause
- ↓ the negative feed back effect on hypothalamic pituitary axis resulting in increase in FSH.
- An FSH > 20 is dx of menopause
- LH also ↑
- inhibin ↓

Anatomical changes:

- ovaries shrink become atrophic.
- wrinkling of skin
- Breast: deposition of fat, ~~large~~ reduced glandular tissue
- vagina: Pale and dyspareunia.
- Small, atrophic, thin endometrium.
- greying of hair, facial hirsutism.

Physiological changes of menopause.

- Vaso motor symptoms
- Urogenital atrophy
- osteoporosis and fracture
- Cardio vascular disease
- cerebrovascular disease
- Psychological changes
- Skin & Hair
- sexual dysfunction
- Dementia & cognitive decline

Immediate Symptoms:

1. Vasomotor Symptom

- characteristic symptom of menopause is a "hot flash"
- Hot flash is characterized by sudden feeling of heat followed by profuse sweating
- Hot flashes are mediated by thermoregulatory dysfunction at level of hypothalamus
- thermoregulatory center is innervated by kisspeptin neurokinin and dynorphin neurons (KNDY neurons)
Estrogen inhibit KNDY neuron, after menopause estrogen decrease $\rightarrow$ negative effect goes and thermoregulatory dysfunction occur in the form of hot flashes.
- main cause of hot flashes: $\downarrow$ Estrogen
- management: Hormone replacement therapy (HRT)
- mild hot flashes - Reassurance with vitamin E
- moderate to severe hot flashes - HRT

Treatment:

- Life style modification
- clonidine
- phytoestrogens
- HRT

2. mood disorders: mood swings

Depression

Anxiety

Irritability

3. cognitive dysfunction: poor concentration

poor memory

Tiredness

lack of motivation

4. sexual dysfunction

- Dyspareunia
- vaginal dryness
- decreased libido

5. Urinary symptoms

- urinary ~~comp~~ incontinence
- Dysuria and frequency
- Frequent UTI

6. weight gain.

7. Osteoporosis and osteopenia.

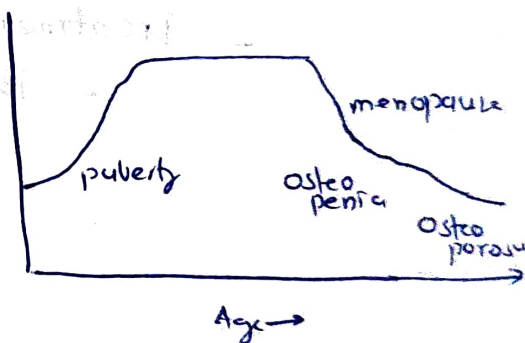
→ Bone density ↓ed due to estrogen. It is a qualitative defect and not a quantitative defect.

→ loss of trabecular bone more than cortical bone.

Bone Mineral Density decreases at menopause

Risk factors:

- early menopause
- Family h/o menopause
- low Bone mineral density
- Thyrotoxicosis
- Alcohol
- smoking
- hyperparathyroidism
- malabsorption



Diagnosis: DEXA scan

- T score: Normal - 2.5 to -1

osteopenia - -1.0 to -2.5

osteoporosis - below -2.5

Rx: calcium and vitamin D supplementation

vit D - low risk - 600 IU/L

High risk - 800 IU/L

Evaluation of post menopause / women

1. Blood workup

- CBC
- Blood sugar
- lipid profile
- FSH levels
- serum Ca & vit D

Imaging

- Pelvic Ultrasound
- DEXA scan

Treatment

- Vitamin D & Ca Supplement
- Hormone replacement therapy
- Raloxifene (SERM)
- Treatment of osteoporosis
 - Bisphosphonates, Alendronate

↓ Bone resorption