This booklet has been written by Dr Louise Newson, GP, menopause specialist and director of the balance app. She is also director of the not-for-profit company, Newson Health Research and Education, and is the founder of The Menopause Charity.

Contents

What is the menopause? ............................................. 4
What sort of symptoms can my partner expect? ............... 5
How is the menopause treated? .................................. 6
Ten ways you can support your partner through the menopause ............................................. 6-7
Did you know? About three in four women will experience symptoms during their menopause

The menopause is a completely normal life event for women.

However, the hot flushes, fatigue, mood changes and other symptoms can affect all aspects of a woman’s life.

Relationships in particular can be put under immense strain during this time and can be made more difficult by the fact that many couples don’t openly discuss the menopause. The menopause can be a challenging time for any couple - it doesn’t have to be.

This guide has been specially created for partners to help you through your loved one’s menopause.

It covers what you need to know from what the menopause actually is and common symptoms, through to practical advice and tips on how you can give much-needed support during this time.

Preparation is key, and this guide will give you the knowledge to support each other through this time, towards a new chapter in your lives.
What is the menopause?

Did you know? The average age of the menopause is 51

Put simply, the menopause is when a woman stops having periods. It occurs when the ovaries stop producing eggs and as a result, levels of hormones called estrogen and progesterone fall.

Did you know? Changes to periods can often be the first sign of the menopause

There are four key stages:

Pre-menopause: the time in a woman’s life before any menopausal symptoms occur.

Perimenopause: when women experience menopausal symptoms due to hormone changes, but still have their period

Menopause: when a woman does not have a period for 12 consecutive months

Postmenopause: the time in a woman’s life after you have not had a period for 12 consecutive months.

How and when does my partner’s menopause happen?

The average age of the menopause is 51, and symptoms of the perimenopause often start at around 45 years of age.

If the menopause occurs when a woman is under 45 years, then it is called an ‘early’ menopause. If it occurs before the age of 40, it is classed as premature ovarian insufficiency (POI).

Certain circumstances can trigger an early menopause or POI. These include surgery involving the ovaries, having radiotherapy to the pelvic area as a treatment for cancer, or certain types of chemotherapy drugs to treat cancer. For more information on early menopause and POI, see Menopause and Me: A Guide for Younger Women.
Hormones estrogen and progesterone work together to regulate the menstrual cycle and production of eggs. Estrogen also plays an important role throughout a woman’s body, including bones, memory, mood and even hair and skin.

During the perimenopause and menopause, hormone levels fluctuate greatly, and this imbalance can result in a whole range of symptoms.

About three in four women will experience symptoms during their menopause – these symptoms are likely to have a knock-on effect on their relationships. The severity of symptoms varies tremendously between women. Some will only experience them for a few months, others can continue to suffer for years – even decades.

Symptoms can include:

- **A change in their periods:** this is often the first sign. Many women find their periods become heavier than usual, although for some women they may get much lighter. Periods usually occur more irregularly before stopping altogether.

- **Hot flushes:** the most common symptom of all, affecting three out of four women. They can come on suddenly at any time of day, spreading throughout the face, chest and body.

- **Night sweats:** many women find they wake up drenched in sweat and have to change their pajamas or bed clothes. If you share the same bed, it can also be a disruptive symptom for you too.

- **Mood changes:** fluctuating hormones mean women can be irritable one minute and tearful the next. These mood changes may be more common if your partner suffered from premenstrual syndrome (PMS) or postnatal depression in the past.

- **Fatigue and poor sleep:** poor sleep can be related to night sweats, so you may find your partner is more tired during the day.

- **Joint pains and muscle aches:** estrogen is very important in providing lubrication in the joints and preventing inflammation, so low levels can leave joints sore and muscles aching.

- **Brain fog:** this is a collective term for symptoms like memory lapses and poor concentration.

- **Lack of libido:** Women also have the hormone testosterone - which can influence our sex drive. During the perimenopause and menopause, declining levels of testosterone in a woman’s body can lead to a lack of interest in sex and lack of pleasure from it.

- **Vaginal symptoms:** Low estrogen can make the tissues around the vagina thinner, drier and inflamed. The vagina also expands less easily during sex and this can make intercourse uncomfortable or painful.

- **Urinary symptoms:** Low estrogen thins the lining of the bladder, and some women find they have the urge to go to the toilet more often or have recurrent urinary tract infections.

- **Hair and skin changes:** estrogen helps to build collagen - the protein that protects the structure of our skin. Lower levels of estrogen can lead to reduced elasticity, fine lines and dryness. Some women find their skin becomes itchier, or they develop acne. Changing hormones can also make their hair thinner and less glossy.
Ten ways you can support your partner through the menopause

Here, Diane Danzebrink offers practical ways to offer support.

1. Educate yourself
The more you know about what she is experiencing the better. While you may never be able to truly understand how it feels, regular effort to try and understand will go a long way, as you mutually support each other through the ups and downs.

Many women feel lost and lonely at this time in their lives, so your love and support is more important than ever.

2. Encourage your partner to consult a health professional about her symptoms – and offer to go with her to the appointment
For some women, just making an appointment is a daunting step; she may have been suffering from low confidence, so offer to be there with her for moral support. We’ve all been there when our minds go blank during important appointments - you can be there to offer gentle reminders about the questions your partner may have wanted to ask.

3. Try not to put undue pressure on her
The menopause can be a confusing time for you both, so now it is not the time to be making big decisions. Ask yourself ‘can it wait?’

Also, resist the urge to ask how long her menopause will last. It’s not helpful and she won’t have any better idea than you do. On average, the menopause lasts four to eight years from the first to the last symptom but remember that every woman is different.

Simple things can make a huge difference when she is feeling overwhelmed. Just being there to offer words of support – perhaps a cup of tea or a hug – can work wonders.

How is the menopause treated?

There are a range of treatments available to help manage menopause symptoms, and in many cases, vastly improve a woman’s quality of life.

The best-known treatment is hormone replacement therapy (HRT), which works by replacing the hormones a woman’s body stops making during the menopause.

No woman should wait until symptoms are unbearable before they seek help.

In addition, the menopause can also raise the risk of osteoporosis (bone-weakening) and cardiovascular disease (diseases of the heart and blood vessels), so speaking to a health professional is really important.

They will be able to talk through available treatments to help your partner make an informed decision, based on their individual circumstances and preferences.

A trusted source of information on menopause treatments is the 2015 guidelines on menopause by medicines regulator the National Institute for Health and Care Excellence (NICE).

The guidance covers treatments that can help symptoms, information about what to expect during an appointment with a health professional, and also includes what questions a woman can ask to get the information they need. (www.nice.org.uk/guidance/ng23).
4. Ask her what she needs
It can feel impossible to know what your partner needs when she is struggling physically and emotionally, no matter how close you are.

No-one expects you to be a mind reader, so don’t be afraid to ask, but try to do so in a tactful, gentle way.

5. Accept the silence
It may feel at times that her silence or lack of communication is a signal she wants to shut you out, but try to remember that many women need a period of quiet for self-reflection.

Try to imagine what it must be like to have so many physical and emotional changes happening to your body at the same time and wondering where the real you has gone.

6. Resist the urge to snap back
It may be easier said than done but bear in mind that fluctuating estrogen levels have an effect on the cells that respond to hormones in the brain, meaning the ‘filter’ that might normally stop you saying something, or help you say it in a nicer way, is not working as efficiently and this can result in a sharp tongue at times.

Just stop, breathe and walk away if you have to. Remember it will pass.

7. Be patient, and be prepared to change your plans
Many women struggle with self-confidence during menopause and if this is coupled with crashing fatigue it’s likely that your partner may just want to curl up on the sofa at home, rather than socialise. Remember you are probably the only person in the world that she feels able to be truly herself with. The pressure to keep up appearances, particularly at work, can be exhausting and being at home with you is probably where she feels safest right now.

8. However challenging life can be, don’t forget to show her that you love her
Changing hormone levels can lead to a number of changes in a woman’s body, from weight-gain to thinning hair. It’s unsurprising that the physical changes that can happen during the menopause can result in your partner becoming less confident and more self-conscious.

Try to understand that these changes can take some getting used to: sometimes all women want is reassurance and a hug.

9. Remember that sex during the menopause is complicated
Many women say how sad they feel about their own lack of interest in sex and how uncomfortable they often find it, physically. Some women admit they avoid nearly all physical contact, so they don’t have to talk about what’s happening to them.

It can be common for both sides to wonder if their partner just doesn’t love them anymore.

Each partner often longs for physical intimacy to return but all too often neither wants to start the conversation, which often leads to an ever-widening gap.

10. A change of life for all
The menopause has often been referred to as ‘the change’ of life and in so many ways it is - but not just for women. We all change, men and women, both physically and emotionally, as we age but that doesn’t mean we shouldn’t be able to look forward to long, happy, healthy, fulfilling lives with our husbands, wives and partners.
Dr Louise Newson is a GP and menopause specialist in Stratford-upon-Avon, UK and the founder and writer of the balance app and website.

The website and app contain evidence-based, non-biased information about the perimenopause and the menopause. She created both platforms to empower women with information about their perimenopause and menopause and to inform them about the treatments available.

Her aim is for people to acquire more knowledge and confidence to approach their own GP to ask for help and advice about their hormones. She is passionate about improving awareness of safe prescribing of HRT in all stages of the perimenopause and menopause.

Louise is also the director of the not-for-profit company Newson Health Research and Education.