

# Midlife Women's Health Symptoms and Screening

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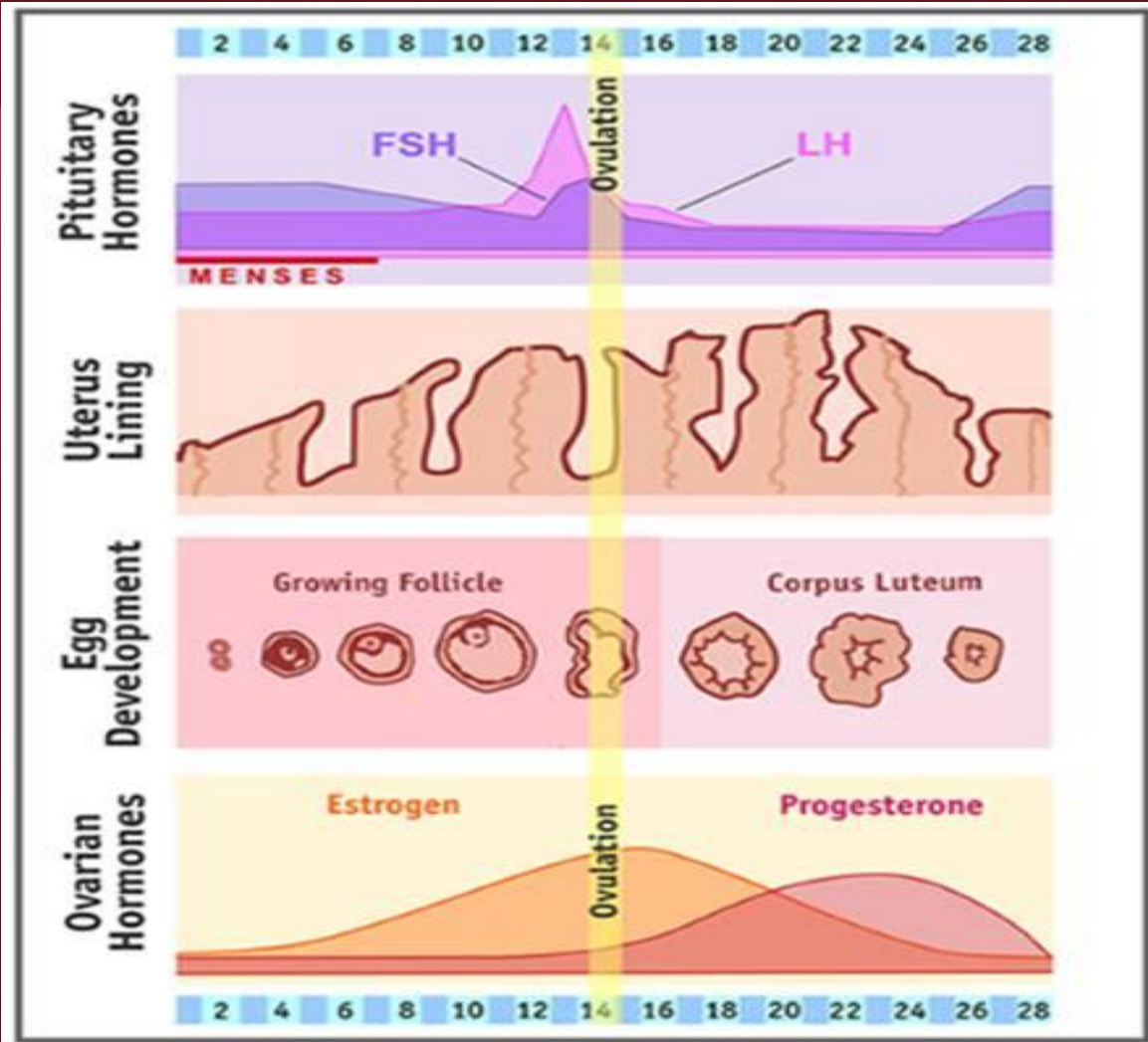
September 29, 2010



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# Ovarian aging and Hormone production





# Menopause transition

- Erratic hormone secretion
- Menstrual cycle irregularity
- Eventually stop ovulating
- Eventual cessation of bleeding

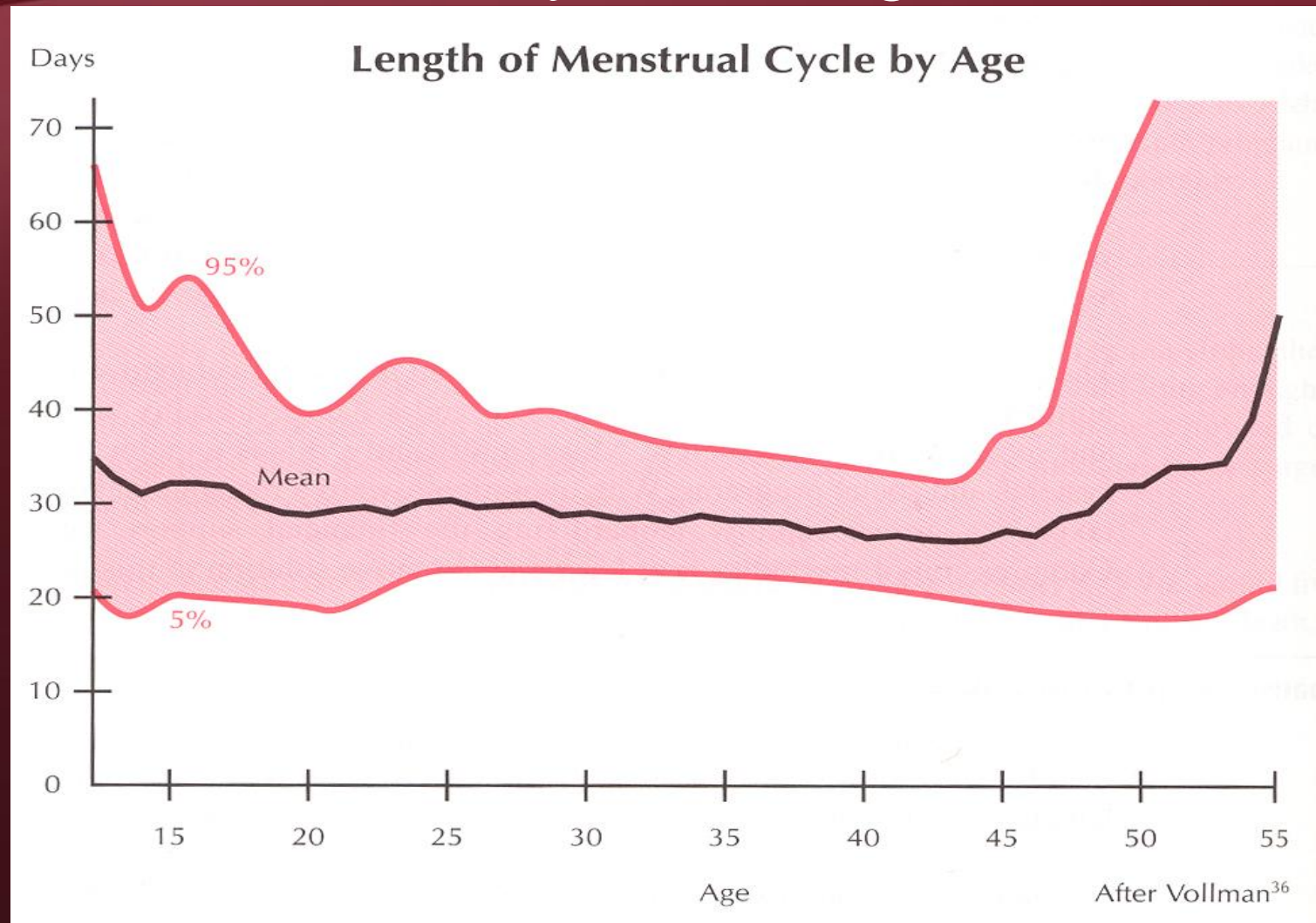


# Menopause Transition

- Average age of onset: 46
- Average duration: 5 years

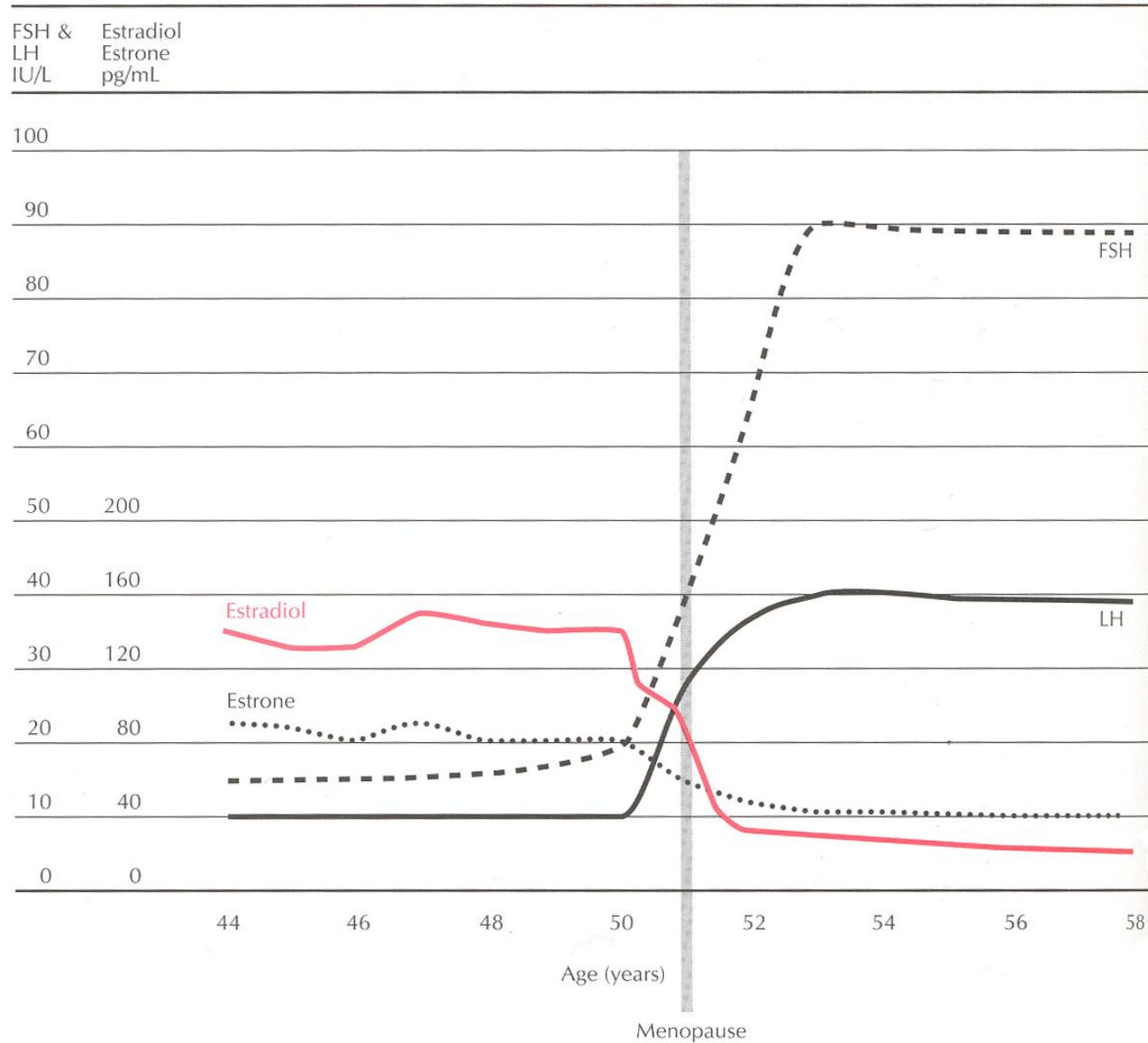


# Most anovulatory cycles < 20 and > 40 years of age



# The Perimenopausal Transition

(mean circulating hormone levels)



- True or False. Lauren is 52 years old. She is still having periods every month. In the last two months they have been so heavy she has to leave work to change her clothes. This is a normal part of menopause





# Bleeding Patterns

- Irregular Periods
- LESS IS BETTER
- MORE IS ABNORMAL
  - Closer than 21 days
  - Longer than 7 days
  - Heavier
  - Bleeding between periods
- Any bleeding after menopause is abnormal



- True or False. Estrogen is no longer recommended for treating hot flushes in menopause because of the very high risk of causing breast cancer.



# Symptoms of approaching menopause

- Irregular menses, heavy or light menses
- Night sweats
- Hot flashes/hot flushes
- Insomnia
- Pain with intercourse
- Vaginal dryness
- Urine leaking when coughing or sneezing
- Difficulty concentrating/memory loss
- Mood swings
- Headaches
- Decrease in sexual desire





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# Symptoms of approaching menopause

- Hot flushes/ night sweats
- Highest in first 2 years postmenopause,
- Decline over time
- Most: 6 months to 2 years
- 21 to 41% of women report
- 10 to 15% have severe symptoms
- 25% of women seek help for



# Hot Flashes/ Night Sweats

## Non-medical Treatment

- Relaxation techniques
- Regular exercise
- Keep core temperature cool
  - Dress in layers, use a fan
- Healthy body weight
- Do not smoke
- Deep, slow abdominal breathing



# Hot Flashes/ Night Sweats

## Non-medical Treatment

- Avoid personal triggers
  - Hot drinks, caffeine, spicy foods, alcohol
- OTC
  - Soy foods/ isoflavones, black cohosh?
  - Progesterone/ yam creams ?
  - Vitamin E?
  - (dong quai, evening primrose oil, ginseng, licorice, Chinese herb preps, acupuncture, magnet therapy)



# Hot Flashes/ Night Sweats

## Medical Treatment

- Estrogen (with progesterone if has uterus)
- Non-hormonal
  - Antidepressants
    - Venlafaxine (SNRI)
    - SSRI
  - Antiseizure
    - Gabapentin (Neurontin)
  - Antihypertensives
    - Clonidine





# Hot Flashes/ Night Sweats

## Medical Treatment

- Hormones: if moderate to severe
- For symptoms only
- Lowest dose that IMPROVES symptoms to tolerable level
- Short term
- Perimenopause or early menopause



# To HRT or Not to HRT? That is the question!!!

- Advantages

- Less hot flashes/night sweats
- Improved mood
- Improved sleep
- Improved vaginal lubrication
- Improved mental function
- Improved bladder function
- 5/10,000 decreased risk for hip fracture
- 6/10,000 decreased risk for colon cancer

- Disadvantages

- 8/10,000 increased risk for breast cancer (E + P)
- 18/10,000 increased risk for blood clots
- 8/10,000 increased risk for stroke
- 7/10,000 increased risk for heart attack
- HRT side effects:
  - Breast tenderness
  - Headache
  - Nausea
  - Cholecystitis (rare)
  - Rash, itching





# Other Symptoms: Memory and Cognition

- # 1 concern in a poll
- Probably from aging, not menopause
- Data on HRT is variable
- Verbal memory?



# Memory and Cognition

- Stimulate your mind
  - Higher education
  - Extensive social network
  - Thinking exercises
- Be active
- Reduce stress
- Get adequate sleep
- Concentration



# Other Symptoms: Memory and Cognition

- High antioxidants in food
- Folic Acid 800 mcg daily





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# Other Symptoms: Insomnia

- Hormones?
- Stress
- Chronic Illness/ pain
- Medications
- Sleep apnea
- Restless Legs





# Other Symptoms: Insomnia

- Avoid alcohol
- Avoid caffeine and chocolate within 7 hours
- Avoid nicotine



# Other Symptoms: Insomnia

- Nightly rituals
- Sleep-conducive environment
- Regular sleep schedule
- Consistent time to get up
- Sleep restriction therapy
- Relaxation techniques



# Other Symptoms: Insomnia

- Botanicals
  - Valerian
  - German chamomile, lavender, hops, lemon balm, passion flower?
- Melatonin



# Other Symptoms: Insomnia

- Sedatives and hypnotics
- Antidepressant (Trazadone)
- HRT





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# Other Symptoms: Mood

- Especially perimenopause
  - Depressed mood
  - Anxiety
  - Stress
  - Decreased sense of well-being



# Other Symptoms: Distressing Symptoms

- Irritability
- Tearfulness
- Insomnia
- Fatigue
- Decreased memory and concentration
- Depression



# Other Symptoms: Mood

- Dysphoria
  - Normal, brief
- Dysthymia
  - Short term, usually no treatment
  - Most days, at least 2 years
  - Often reaction to problems
- Major depression
  - Treatment





# Major Depression

- Depressed mood
- Decreased interest or pleasure in activities
- Sleep changes
- Fatigue or no energy
- Feel worthless or guilt
- Decreased ability to think, concentrate, or indecisive
- Recurrent thoughts of death, suicidal

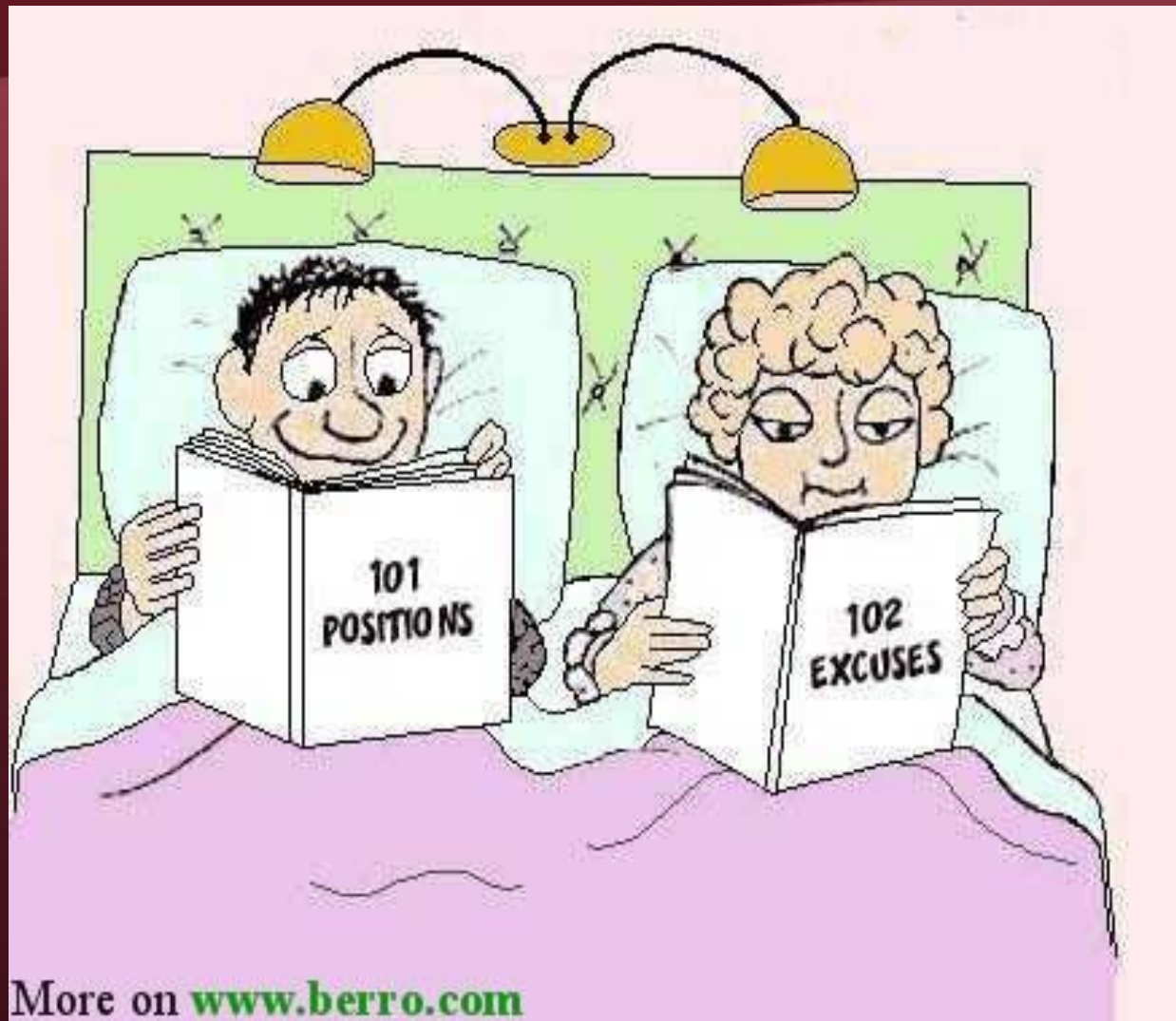


The Good News:  
Postmenopausal US Women  
indicate they felt happier and  
more fulfilled at this time of their  
life than at any other time

1998 Gallup/NAMS Poll



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More on [www.berro.com](http://www.berro.com)



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# Other Symptoms

## Sex

- 1/3 to 1/2 of women note changes
  - Interest
  - Orgasm
  - Response
  - Pain
- Multifactorial
- Infrequently is testosterone the answer



- What is the number 1 killer of women in midlife and beyond?
  - Stroke
  - Diabetes
  - Breast Cancer
  - Heart Disease
  - Accidents



# Common Medical Conditions

- Obesity
- Cardiovascular Disease
  - Heart Disease
  - Abnormal lipids
  - High blood pressure
  - Stroke
- Diabetes
- Osteoporosis
- Thyroid disease



# GREAT NEWS

- You have control of the biggest risk factors for cancer and illness
  - 80% of chronic illness is related to lifestyle



# Common Medical Conditions

- Obesity
  - 70% of women 55 to 75 years
  - 65% of women 45 to 55 years
  - Lifestyle and aging





# Common Medical Conditions

- Cardiovascular disease is # 1 killer of women
  - Mortality rate great than next 14 causes of death combined!
  - After age 50,  $>1/2$  of deaths in women are from CVD
  - Not to mention decreased QOL and disability



# Cholesterol Screening

UTAH

50th

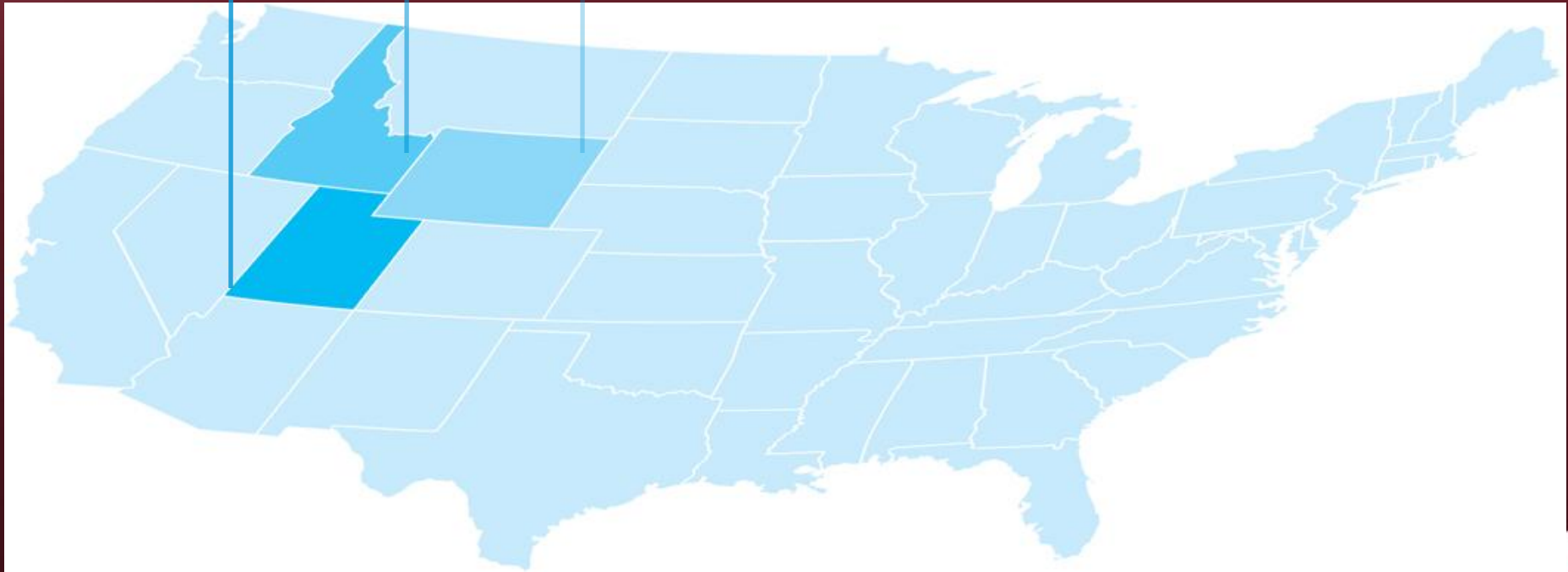
IDAHO

48th

WYOMING

23rd

The West is unacceptably low.



# Cancer Screening

- Women have a 1 in 3 lifetime risk of cancer
- Nearly 80% of cancers diagnosed at 55 and older
- Increased risk due to age, not menopause
- Est. 1/3 of all US cancer deaths attributed to diet and obesity



# Screening

- Primary
  - No risk factors
- Secondary
  - Have risk factors
- Tertiary
  - Have the disease
  - Screening for complications



# Primary screening

- No symptoms
- Cost/benefit analysis
- Risks of screening
  - False negatives
  - False positives
- What is the endpoint
  - Mortality
  - Years saved/ lost
  - Cost of treatment



- (Choose as many as are correct) Cindy is 45 years old and does not have insurance. She has never been able to afford to get a mammogram, and was relieved to see a news report that she does not need a mammogram until she is 50 years old. Which of the following would cause you to recommend that she have a mammogram now?



- A. Her mother had breast cancer
- B. She had a hysterectomy with removal of both ovaries at 28, and has been on estrogen ever since then
- C. She is 65 inches tall and weighs 250 pounds
- D. She used oral contraceptive pills from 20 to 26 years old
- E. She has had a breast biopsy that showed atypical fibrocystic disease



# Cancer Screening

- Breast Cancer
  - The most common non-skin cancer
  - 2<sup>nd</sup> major cause of cancer mortality in US
  - Lifetime risk 1 in 8
  - 30% of women in Utah with breast cancer are 40 to 49





# Breast Cancer Screening

Why the change?

- Data only from RCT
- Data on “invited to screen”, not actual
- Mortality data
- Harms of screening
- Cost of finding cancer relative to incidence



# Breast Cancer Risk Factors

- Age
- Genetics (5%)
- Obesity
- Radiation exposure to chest
- Early onset periods (< 12 years)
- Late menopause (> 55 years)
- Alcohol
- 1<sup>st</sup> child over 35 years



# Mammography Screening

UTAH

37th

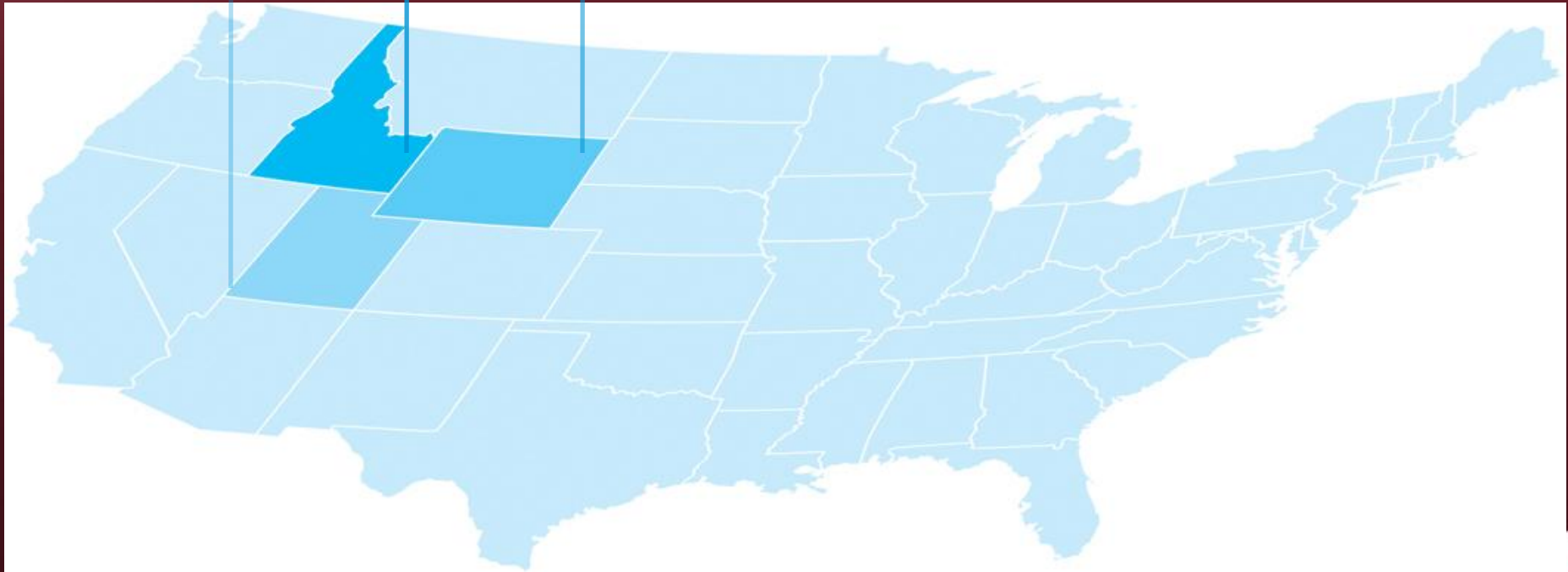
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50th

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38th

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# Breast Cancer Screening

## USPSTF

- 40 to 49: Individualize
- 50 to 74: every other year
- BSE not recommended



# Breast Cancer Screening

- ACS
  - Annual beginning at 40
- ACOG
  - Every 1 to 2 years from 40 to 49
  - Annual at 50 +



# Cervical Cancer Screening

- 21 to 29
  - Every 2 years
- 30+ with 3 consecutive negatives, and no history of high grade, no other risk factors
  - Every 3 years
- Low risk women over 30 may be cotested with HPV



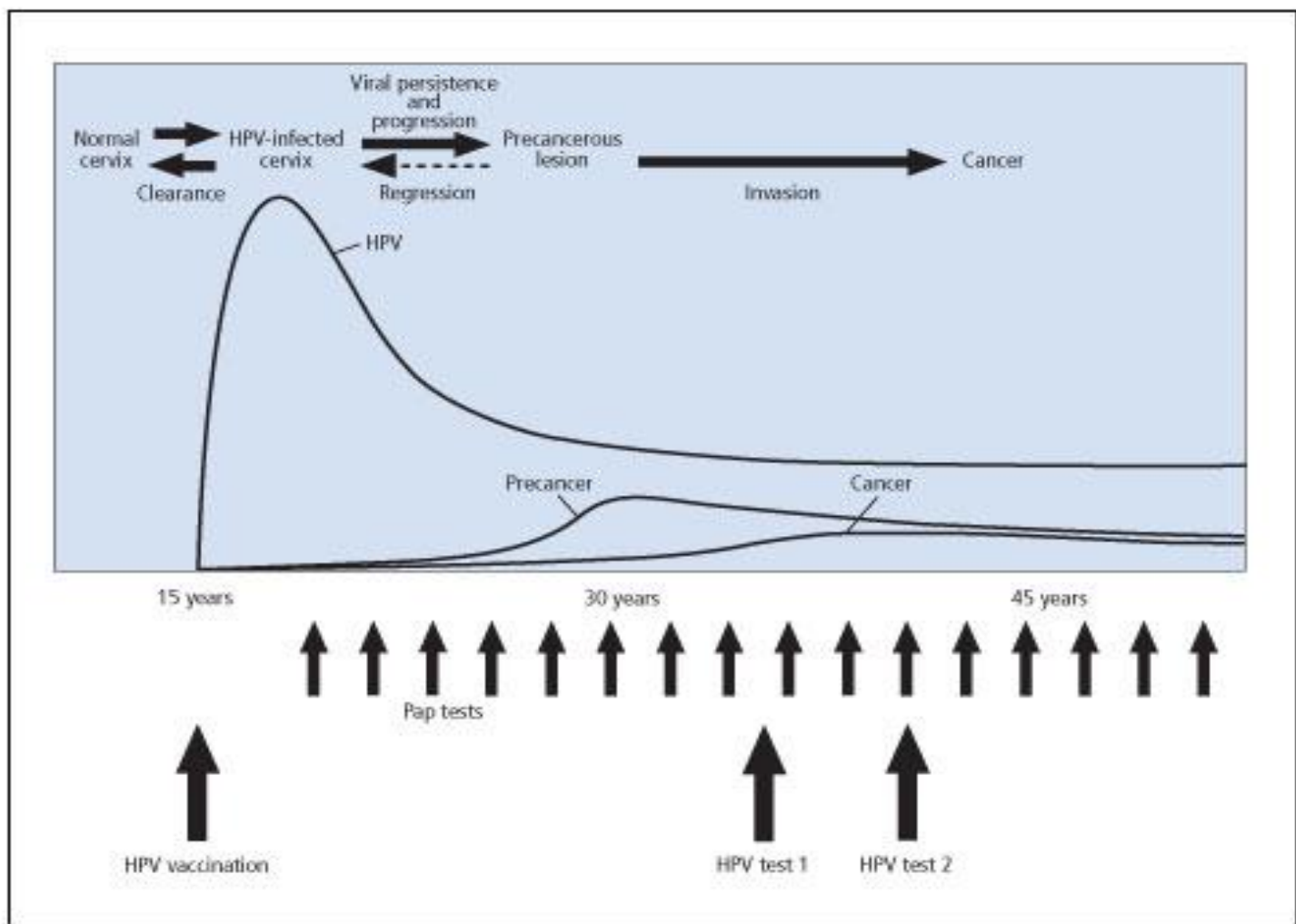
# Cervical Cancer Screening

- When to stop
  - ACS 70
  - USPSTF 65

(If 3 consecutive neg, and no abnormal pap in past 10 years)

Reassess annually for risk





**Figure 1.** Natural history of HPV infection and cervical cancer. (Schiffman M, Castle P. N *Engl J Med* 2005; 353:2101–2104)

Top panel: The peak prevalence of transient infections with carcinogenic types of HPV occurs in teens and twenties following the initiation of sexual activity. The peak prevalence of cervical precancer occurs approximately 10 years later, and peak prevalence of invasive cancers occurs at ages 40–50.

Bottom panel: The conventional model of cervical cancer prevention is based on repeated rounds of cytology and colposcopy. Alternative strategies include HPV vaccination of



# Pap Smear

UTAH

50th

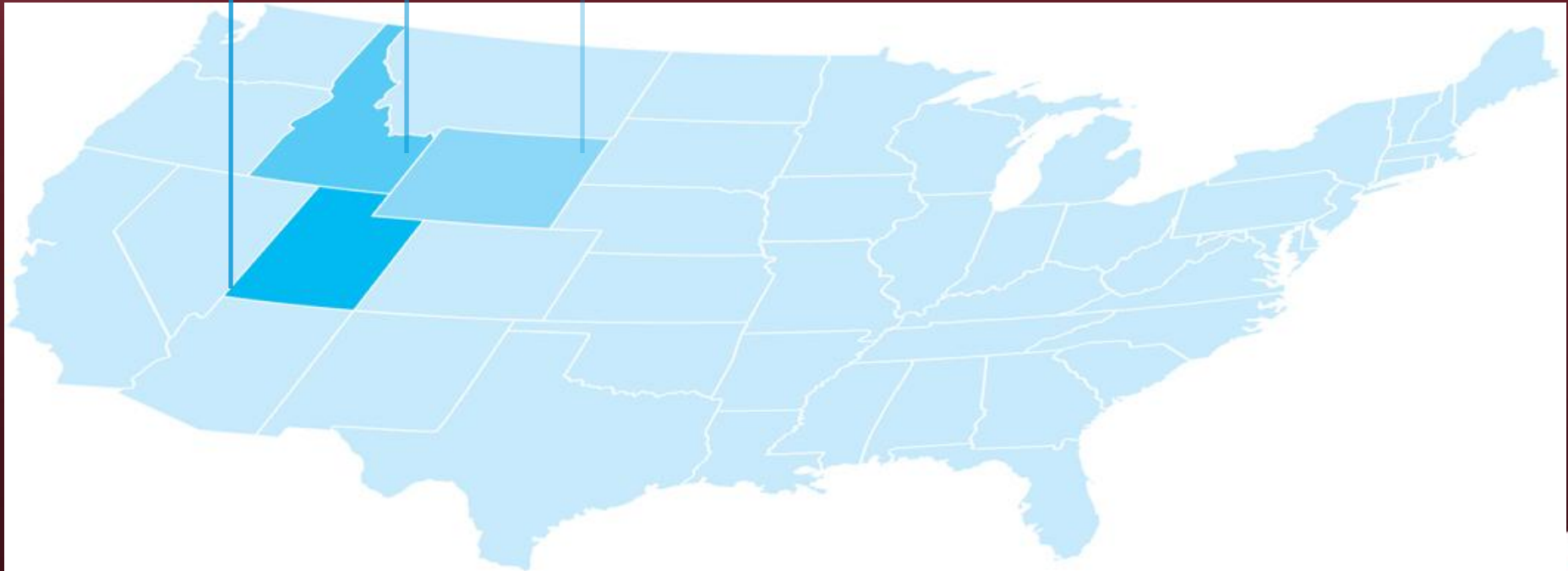
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47th

WYOMING

11th

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- True or False. Debby has no family history of colon cancer as far back in her family tree as she can research, at least 3 generations. Therefore, it is NOT recommended that she have a colonoscopy at 50 years old.



# Colon Cancer

- 3<sup>rd</sup> most common cancer
- 3<sup>rd</sup> most fatal cancer
- 1 in 20 lifetime incidence



# Colon Cancer Screening

- Generally recommend colonoscopy at 50 if no risk factors
- Earlier if risk factors
  - Family History
  - Inflammatory bowel disease
  - H/O Polyps



# Colon Cancer

- Symptoms
  - Frequent bloating
  - Frequent abdominal discomfort
  - Persistent changes in stool
  - Blood in or black stool
  - Unusual fatigue
  - Unexplained weight loss



# Colon Cancer Screening

UTAH

15th

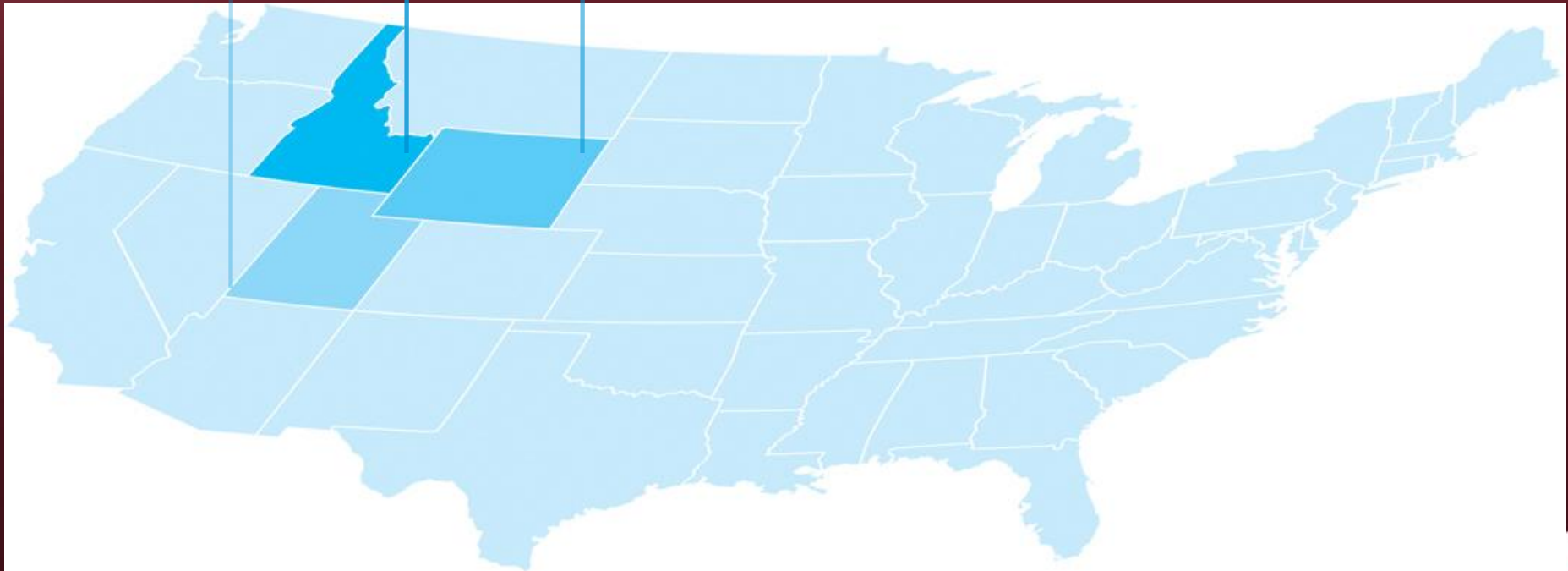
IDAHO

48th

WYOMING

46th

The West is unacceptably low.



# Uterine Cancer Screening

- Not routine
- Based on symptoms



- Which of the following are possible symptoms of ovarian cancer?
  - Bloating every other day
  - New constipation nearly every day for the last 6 weeks
  - Pain in the right low abdomen that has occurred at least 3 or 4 times a week for the last six months
  - Feeling full with eating half of a usual meal
  - All of the above





# Ovarian Cancer Screening

- 1 in 70 lifetime risk
- #5 cancer killer
- #1 gyn cancer killer



# Ovarian Cancer Screening

- Symptoms are common, and frequent
  - Bloating
  - Pain
  - Feel full quickly
  - Urinary urgency or frequency

(most days for more than 2 to 3 weeks)



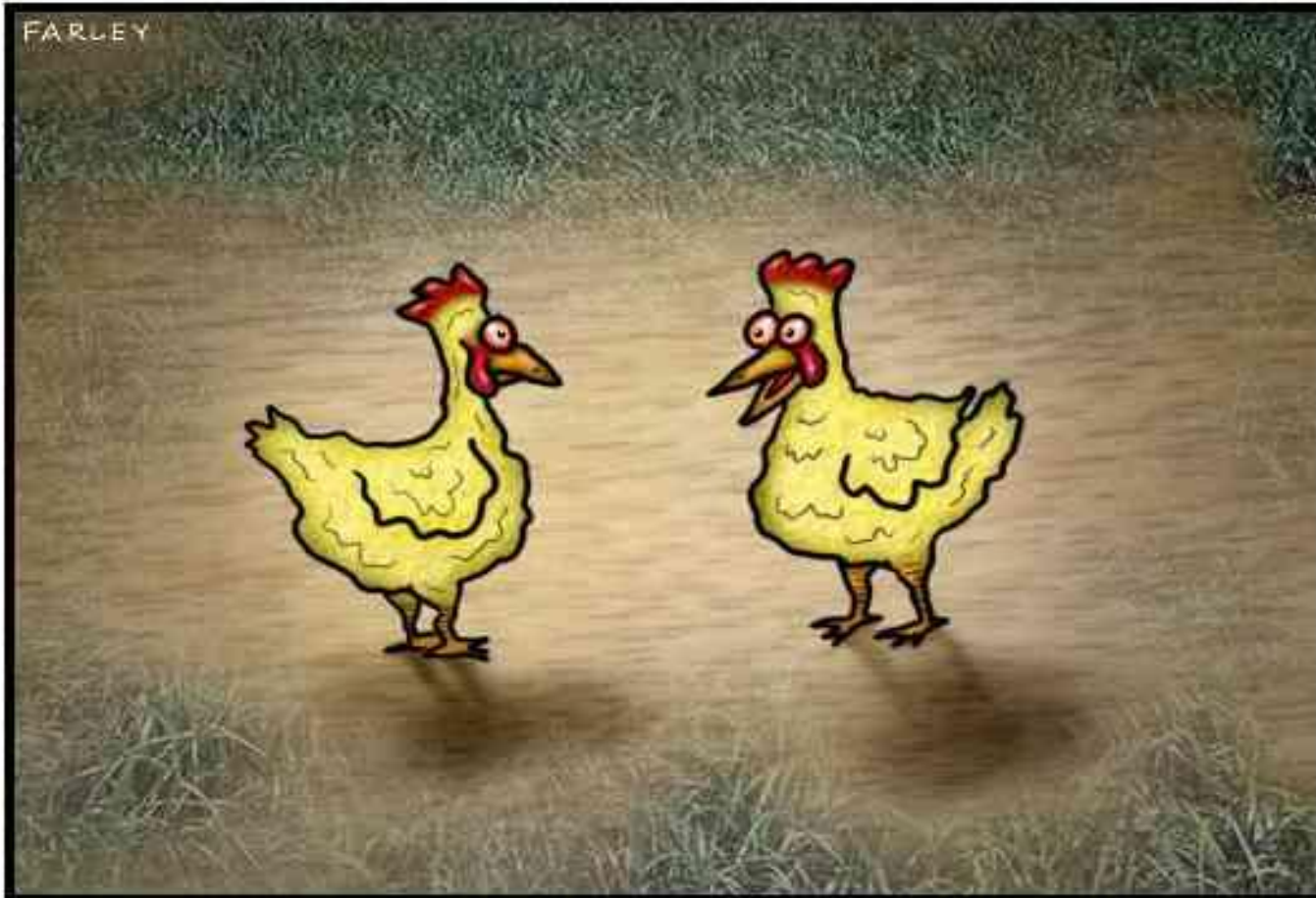
# Skin Cancer Screening

- 1/2 of all cancers
- Lifetime risk 1 in 3
- 65 years and over, 40 to 50% chance of basal and/or squamous cell cancer at least once
- Melanoma incidence rapidly growing



# DOCTOR FUN

7 Nov 97



"Menopause is easy - after you stop laying eggs, they eat you."

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