

meno **||** poz
& you

A Guide to Menopause

Welcome!

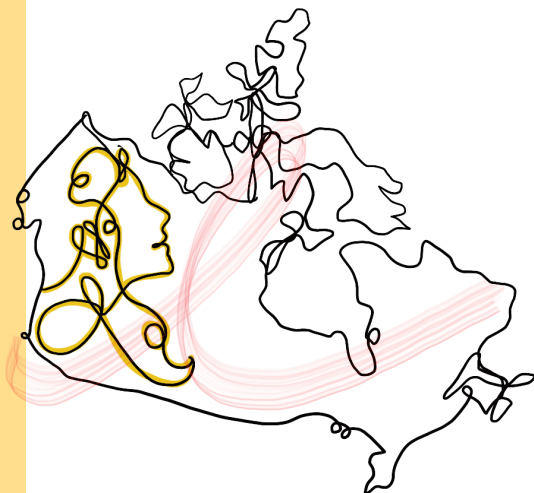
This booklet was designed for Women Living with HIV who are at any stage of the menopausal transition.

A team of Women Living with HIV who have experienced menopause helped to guide this booklet's creation and offered their stories to you through words of wisdom.

While the information provided is designed to help facilitate your journey through menopause, it may also be shared with others in your life so they can help to better support you during this time.

A Note About Gender:

In this booklet, we use the word woman to refer primarily to cis-gendered women. We recognize that this does not appreciate the diversity in the identity and expression of women, and we celebrate all genders and expressions. This information may also be relevant to anyone who experiences menopause, including people assigned female at birth who do not identify as women.



This booklet was created on the lands of the Lheidli T'enneh, x^wməθk^wəy'əm (Musqueam), S^kwxwú7mesh Úxwumixw (Squamish), səlilwətaɫ (Tseil-Waututh), sx^wenx^wəŋ təŋəx^w (James Bay), ǫi'ćəy' (Katzie), k^wik^wəł'əm (Kwikwetlem), Qayqayt, Kwantlen, Semiahmoo, Tsawwassen, Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples. We are grateful to learn and work on these unceded Traditional Territories, Lands and Waters.

What This Booklet Includes



Women's Wisdom

Quotes found by this symbol are from the team of Women Living with HIV who helped to create this booklet. These quotes are about their journeys with menopause and are included so you may feel more connected to those who have been through a similar experience.



Tidbits tagged with this symbol are common questions that Women Living with HIV have asked during their menopausal transition.

Information with this symbol is provided to acknowledge that there may be unique experiences for each person, or to highlight important information.



Scan me!



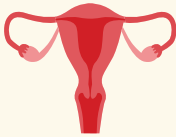
Throughout this , we have included QR codes to lead you to more information. To reach the link, open the camera app on your phone and hover over the QR box. Click the link button that pops up on the screen to go to the website or resource.

What is Menopause?

Menopause is a life transition that starts with 12 months of no menstrual period. It happens because of changes in reproductive sex hormones. Although there are some common symptoms that many women in menopause may have, **each person will have a unique experience as they go through menopause.**

The Stages of Menopause

Perimenopause



Perimenopause involves the gradual change of ovarian function. During this time, there may be changes to the length or flow of your menstrual cycle. You may also notice the start of some menopause-related symptoms, such as hot flashes or changes in mood.

Menopause



As you transition through **menopause**, your menstrual cycle will continue to change until you reach 12 months in a row without a period. At this time, you are considered to have undergone menopause and will enter **post-menopause**. The post-menopausal period lasts for the rest of your life and is a low-hormone state.

Post-menopause

A Celebration of Change

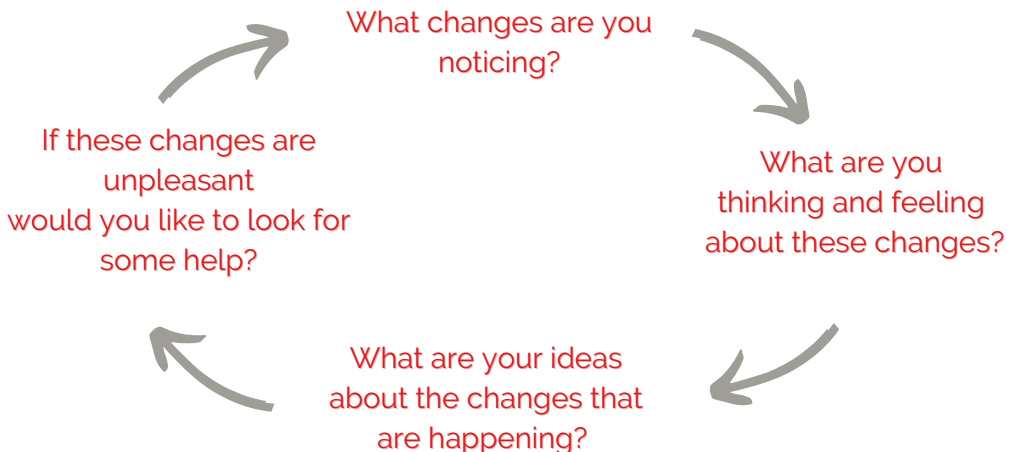
Menopause is a natural change that may be celebrated differently by each woman. Celebrating menopause does not mean you have to ignore symptoms or difficulties you may be experiencing. You can also choose to focus on the opportunity to see strengths in your body. Some people may celebrate with family and friends or individually as they explore this change.

Scan this code to find a period tracker that you can use in perimenopause to track your cycle. This can be helpful to visually represent changes to your menstrual cycle and may help you remember your experiences at your appointments.



Self-Reflecting on Your Journey

As you move through menopause, you may find it helpful to reflect on your journey as you notice changes. You may want to journal your reflections or use them to start conversations with your care providers



Changes to Hormones

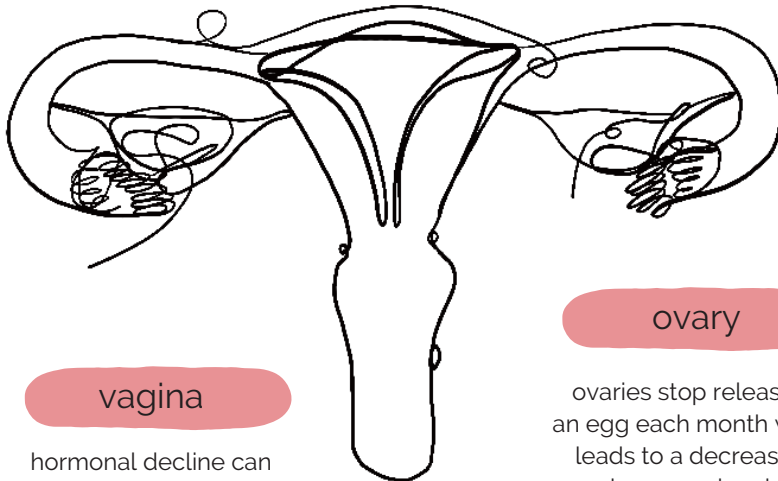
The two main hormones responsible for menopausal changes are:

Estrogen & Progesterone

- regulates the menstrual cycle
- maintains vaginal moisture and elasticity
- ensures bone health
- aids in cognitive function
- helps to protect the heart
- maintains the uterine lining
- helps with bone formation
- contributes to breast development
- aids in deep sleep

uterus

changes to hormones cause the lining of the uterus to be thinner



vagina

hormonal decline can contribute to vaginal dryness and discomfort

ovary

ovaries stop releasing an egg each month which leads to a decrease in hormone levels

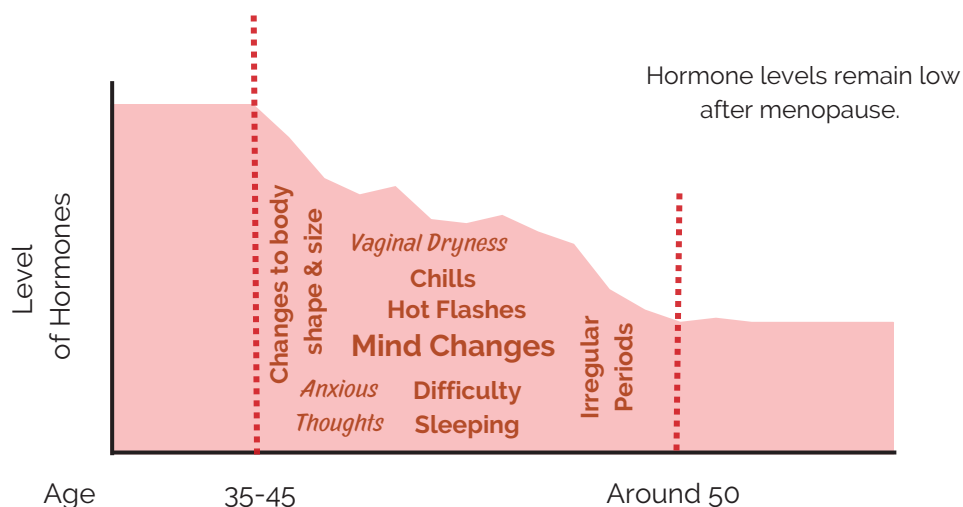


Did you know?

Perimenopause can begin up to 10 years before menopause. For some, this may be the time when symptoms are noticed the most because they can be more severe in perimenopause.

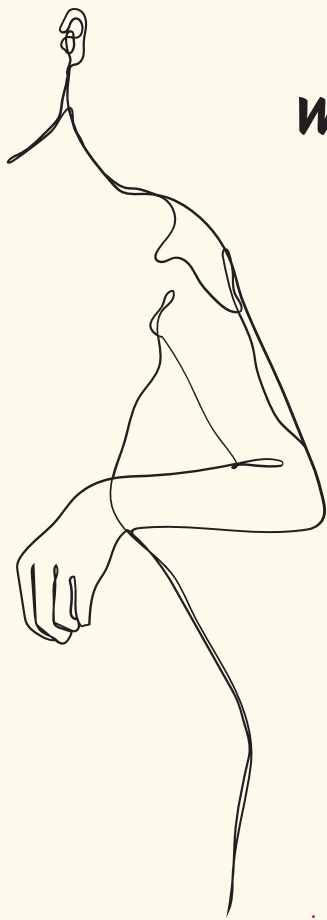
When you enter perimenopause, your hormone levels will begin to change. They may go up and down during this time, and this can be noticed with more irregularity in your periods.

During perimenopause, you may notice symptoms begin to appear and these experiences may change in severity depending on hormone fluctuations.



Will I still go through menopause if I have had my uterus removed?

Some women may have their uterus removed in a surgery called a hysterectomy. If the uterus and ovaries are removed, menopause will start right after the surgery. If only the uterus is removed, your ovaries will continue to produce hormones until you reach menopausal age (usually around age 50).



What Can I Expect During Menopause?

Changes to Mind Health

- anxious thoughts
- depressive mood
- irritability
- mind exhaustion
- confusion

Changes in Temperature

- hot flashes
- night sweats
- chills

Changes in Sexual Functioning

- less sexual desire
- vaginal dryness
- vaginal discomfort

Full Body Changes

- changes to body shape and size
- difficulties with sleeping
- joint and muscle stiffness or pain
- hair thinning
- irregular periods
- changes to breasts

When Will Menopause Begin?

The average age of menopause is 51 years in Canada. For Women Living with HIV on antiretrovirals, the age at which menopause starts varies but is likely very similar to HIV-negative women.

Changes in hormone levels often occur naturally between 40 and 60 years of age, but everyone is unique.

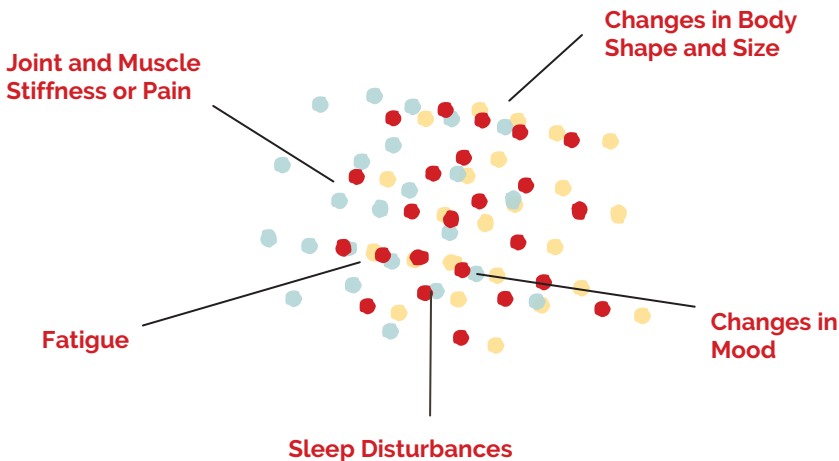
Do I need to have my hormone levels tested?

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Hormone levels naturally decline during menopause. Symptoms that appear after age 45 are within the expected timeline and do not require hormone testing. If you have symptoms of menopause before age 45, talk to your provider about hormone level testing.

Are My Symptoms From HIV or Menopause?

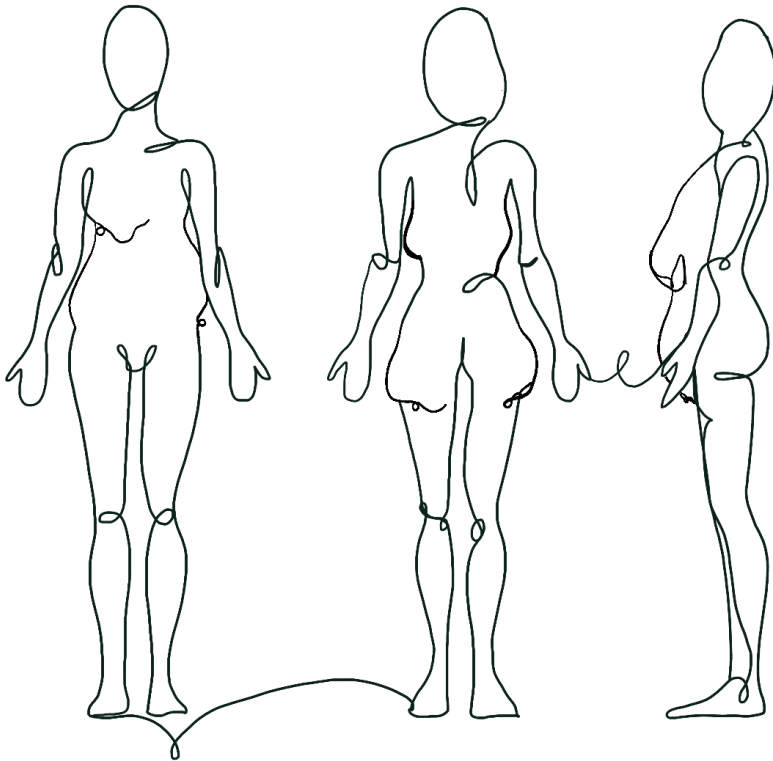
For some symptoms, it can be difficult to tell whether the cause is HIV, HIV treatment, menopause, a combination of these factors or any of the other health conditions that come with growing older. Many of the symptoms experienced by Women Living with HIV can become more severe during menopause.



This constellation shows symptoms that may overlap between HIV (red), HIV treatments (blue) and menopause (yellow).

Symptom Tracker and Body Mapping

The silhouettes below have been created so you can visually track your symptoms or questions. You may find this mapping tool helpful for **discussing menopause with your care providers or as a personal journal of your menopause experience.**




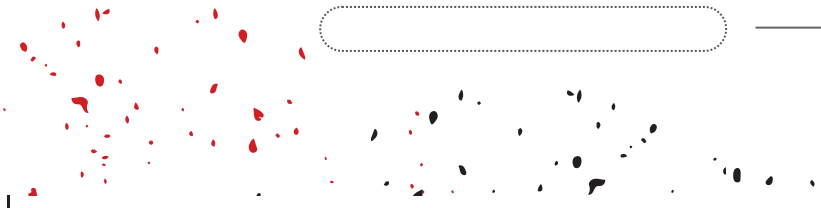
Legend:

Example: ● for joint pain

You can choose colours or symbols that have meaning for you and detail them here as a reminder.

Below is the opportunity to rate symptoms based on **severity**. It may be helpful to note the approximate dates when you first experienced symptoms, or detail how they have changed over time. **These symptoms are based on the Menopause Rating Scale, but there is room to list other symptoms you may be experiencing.** If you are experiencing 2 or more symptoms that are less severe, or more than one symptom that is very severe, consider talking to your provider.

	<input type="radio"/> less severe	very severe <input checked="" type="radio"/>	Notes
Example			_____
Hot Flashes	<input type="radio"/>		_____
Heart Changes	<input type="radio"/>		_____
Sleep Changes	<input type="radio"/>		_____
Mood Changes	<input type="radio"/>		_____
Irritability	<input type="radio"/>		_____
Anxiety	<input type="radio"/>		_____
Body or Mind Exhaustion	<input type="radio"/>		_____
Sexual Changes	<input type="radio"/>		_____
Bladder Changes	<input type="radio"/>		_____
Vaginal Changes	<input type="radio"/>		_____
Joint and Muscular Discomfort	<input type="radio"/>		_____
Add your own:	<input type="radio"/>		_____
	<input type="radio"/>		_____



Lifestyle and Holistic Therapies

Lifestyle therapies can offer relief of symptoms and improve holistic health.



Mind Health

- Menopause support groups
- Mindfulness activities
- Sleep hygiene routine
- Puzzles
- Mind training
- Cognitive therapies
- Dance, art and music



Body Wellbeing

- Yoga
- Exercise - mix and match aerobic and strength training
- Reducing alcohol intake
- Quitting smoking
- Acupuncture
- Using gentle shampoos and conditioners, as well as avoiding tight hairstyles can help reduce hair thinning



Sexual Health

- Learning about menopause with your partner
- Vaginal moisturizers
- Lubricants during sexual activities
- Changing sexual expressions to match your needs

Did you know?

By reducing some symptoms, you may notice a difference in others. Using treatment options that can help to reduce hot flashes or other menopausal symptoms may also improve your sleep.

Q



From One Woman to Another

Through collaboration with menopausal Women Living with HIV, here are some suggestions for relief of hot flash symptoms that they have found helpful.

- avoiding spicy foods
- cold showers or cool cloths
- dressing in layers so you can easily remove clothing

Healthy Living Tip

Eating a varied diet is important to get all the nutrients you may need, and women often require more calcium and vitamin D as they age. Try adding more calcium to your diet through dairy products, broccoli, or fish. Juices or milk can have added vitamin D, but some women require extra supplementation.

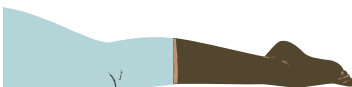


What Works Best For Me?

Symptom

What Makes it Better

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What Are My Options for Treatment?

Menopause is a unique transition for each person, and the support available can be individualized to best fit your needs and symptoms.

Considering Hormone Therapy

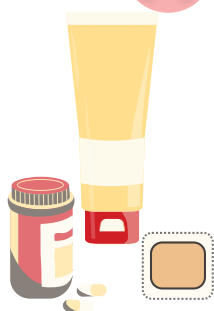
Hormone therapy is a treatment that is made up of the female sex hormones, estrogen and progesterone. It can be used to help with menopausal symptoms that happen because of decreasing hormone levels.

Hormone therapies might be a good option for you to discuss with your provider if:

- you are experiencing symptoms that are affecting your daily life
- you are curious about what options are available to you for menopausal care
- you experienced menopause early (before age 45) or following a surgery

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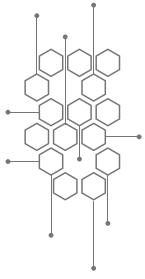
Hormone therapies come in many different forms and can be applied to only a part of your body (vaginal creams) or absorbed through your entire body (oral pills or a patch) to treat symptoms that involve more than one area, like hot flashes.





Did you know?

Newer forms of hormone therapy are created to be “body identical,” which means it matches the hormones our body makes, and increases safety.



Hormone-Based Therapies



Estrogen Therapy

- systemic (body) therapy: helps with common menopausal symptoms and is often used in a capsule, topical gel, or patch form
- low-dose vaginal therapy: helps to address vaginal/urinary symptoms and is often used in a cream, vaginal tablet or vaginal ring form

women who have a uterus and are using hormonal therapy need progesterone and estrogen

Combination Therapy

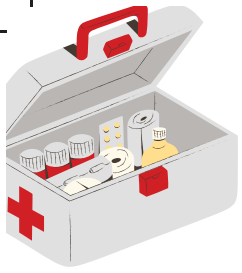
Progesterone Therapy

- helps to prevent the development of uterine cancer by thinning the lining of the uterus
- can be used as a capsule or an IUD (intrauterine device)



There have not been specific studies for hormonal therapies in Women Living with HIV. **We are still learning, but there is no reason to suggest Women with HIV are at an increased risk of poor long-term health effects when taking hormone therapies.**

You should discuss all of your treatment plans with your provider to make sure that you understand the risks and benefits of hormone therapies and to ensure any interactions with your medication can be reviewed.



Menopause is a dynamic transition, so therapies that are working well for you may change over time. If you find something isn't working the way you hope, talk to your healthcare provider about other options in the menopause toolkit.

Non-Hormonal Therapies

- Clonidine
 - This medication is often used for blood pressure treatment, and some women find it helpful for hot flashes.
- Antidepressants
 - Many experience mood changes during menopause. Antidepressants can be used to help with this, and they can also help to relieve hot flashes and sweating.
- Gabapentin
 - This medication can be used to help treat hot flashes and may help to improve mood changes during menopause.

Scan this code to find out more about hot flashes and how to treat them!



Complementary Therapies

It is important to talk with your healthcare provider about all of the therapeutic options you plan to use in your life before you begin taking them to help ensure there are no interactions between HIV medications and supplements or natural health products.

- evening primrose
- rose hip tea
- ginseng
- phytoestrogens
- valerian
- soy
- licorice root
- St. John's wort
- fennel
- pollen extract
- black cohosh
- red clover



Natural products can cause side effects or interact with medications. Research in this area is still being done so it is important to review all therapies with your care provider before you begin taking them.



Frequently Asked Questions About Menopause Treatments



Questions about treatment for menopause are common, and as care options continue to increase, you may have more questions about which treatment is best for you.

What is the best treatment option to start with?

Menopause is a different experience for each woman, and because of this uniqueness, the best starting treatment may be different for everyone. It may be helpful to think about which symptoms you would like help with the most when talking with your provider so you can choose an option that will target your priorities of care.

Who should not take hormone therapy?

Hormone therapy can help to treat menopausal symptoms such as hot flashes, vaginal concerns and mood. It may not be the best option for all women, so when talking to your provider they may ask questions about your symptoms and your health history. Older women who have been in menopause for more than 10 years, women with a history of breast cancer, or those with certain blood clotting history may find other non-hormonal treatments more beneficial.



My Questions About Treatment

As you are reading about your treatment options, you can jot down any questions that come to mind that you would like to ask at your next appointment.

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Talking About Menopause

With Care Providers

Approaching Menopause

Before you have begun menopause, you can begin to talk to your healthcare provider about changes you are noticing in your body. This can also be a great time to ask questions.

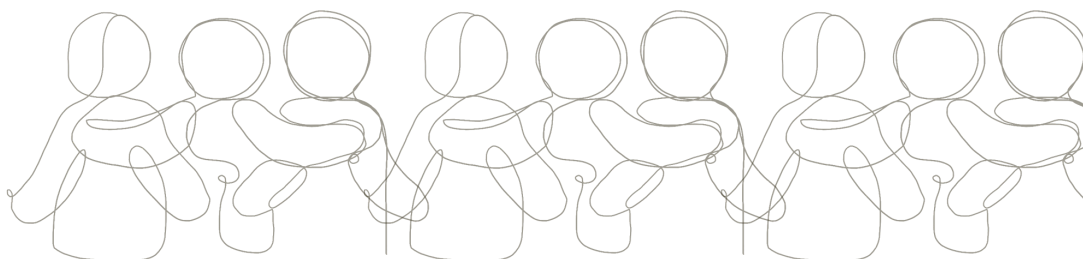
Talking about menopause early can help you to feel prepared and more informed about the menopausal transition.

Sources of Support

Menopausal support can come in many different forms. Culture and life experiences can often play a big role in sources of support, so just as menopause is a unique transition, each person's community may be unique.



Some great sources of support may be your healthcare providers, family, friends, menopause support groups, or online resources.



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Which care provider should I talk to about menopause?

Some women seek support from many different healthcare providers. **Your family doctor or nurse practitioner can be an excellent person to discuss menopause with. You may also find menopause-related conversations with your HIV specialist to be helpful.**

If you need menopausal treatments, you may be referred to a provider who specializes in women's health, like a gynecologist, who is a great provider to have menopausal discussions with.

How to Start the Conversation

Ask Questions

- I have noticed _____
Could this be a symptom of hormonal changes?
- My mother was about my age when she started menopause. Are there symptoms I can be prepared for?

Talk About Your Symptoms

- Telling your healthcare provider about your experiences can be very helpful in determining if you are having menopausal symptoms. Even if you feel that a symptom might not be related, if it is something new for you, it is good to mention.

Use This Booklet as a Tool

- This booklet is designed to be used as a tool for exploring your menopause journey. You can use the information in this booklet to guide the conversation or remember symptoms you want to discuss.



Create Your Own Conversation Starter

These are only suggestions, you can use your own experiences to fill in the blanks!

What symptoms have you been experiencing?

- I have noticed changes to my _____. Could this be a symptom of menopause?

Fill in the blank with: menstrual period body shape and size
 temperature (feeling hot or cold)
 vagina thoughts and feelings

- The symptoms I have been experiencing are bothering me a lot. I am noticing that I am unable to _____ like I was previously.

Fill in the blank with: sleep exercise
 have sex concentrate

What are you hoping to have included in a treatment plan?

- I have read about _____. Do you think this might be a good treatment option for me to try?

Fill in the blank with: hormone therapy vaginal creams
 soy valarian St, John's wort



- Sexual health is important to me. What do you recommend to help treat the vaginal symptoms of menopause?

- **Taking my antiretrovirals is an important way to keep me healthy.** What can I use for menopause treatment that will not interact with my current medications?



Notes



"I think I would have wished to have more information about the breadth of possible implications of menopause. And I think one of the other things that I probably needed to have reinforced was, I guess, living with HIV for a long time, there has sort of been a few life-threatening things. And because menopause was not life-threatening, I chose to sort of put it on the back burner, and not really worry about it."

- Woman Living with HIV



A Final Note For You

This booklet was designed with the hopes of helping you to feel more prepared for the menopausal transition. **We hope the information provided helps to empower you on this journey to ask questions, seek treatment if needed, and have a positive transition.**



Wishing Wellness!

Additional Resources



FAQ Answers
About
Menopause

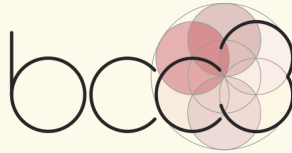


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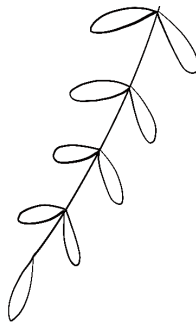
About the Authors



BC CARMA CHIWQS COLLABORATI^{ON}

BCC3 is a 5-year, women-centred, community- and clinic-based research project. It brings together Women Living with HIV, researchers, clinicians, and community partners in British Columbia, with the goal of studying how to improve healthy aging for Women Living with HIV.





Special Thanks
*to all of the amazing
 minds that came
 together to bring this
 to life.*



Shayda Swann . Julie van Schalkwyk . Mona Loutfy . Chelsea Elwood . Neora Pick . Valerie Nicholson . Peggy Frank . Claudette Cardinal . Melanie Lee . Davi Pang . Elizabeth King . Stacey Tkachuk . Melanie Murek . Elizabeth Flinton . Leanne Flinton .

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