Useful addresses and contact numbers: -

- Website: www.menopausematters.co.uk  
  www.bladdermatters.co.uk

- Dumfries Based Menopause / Osteoporosis Helpline:
  Sister K Martin, Menopause Nurse Specialist
  Tel. 01387 241121.
  Thursday mornings 9 am – 12 midday

- National Osteoporosis Society
  Website: www.nos.org.uk
  Helpline: 0845 450 0230

- Women’s Nutritional Advisory Service (WNAS)
  Tel: 01273 487366
  Website: www.wnas.org

This information is also available on request in other formats by phoning 01387 241053.

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4) **Complementary Therapies**

Complementary therapies aim to treat the whole person rather than specific symptoms and although no data exist to show that any therapies control menopausal symptoms, some women may find that along with other lifestyle changes they may feel an improvement in symptoms like flushes and sweats and in overall mood and well being.

Complementary therapies include homeopathy, reflexology, acupuncture, massage and aromatherapy. The choice is confusing and it is important that women find a therapy, which suits them and is appropriate to their individual needs. It is therefore important that women find a good complementary therapist.

**Support: -**

Often women find talking to family and friends and sharing experiences and information with other women helps them to feel that they are not alone and that they are understood. Information and support is also available from health professionals, support groups, national organisations and telephone helplines (see contact numbers and useful addresses).
Herbal remedies which may be useful for some women however are not recommended for women who have had breast cancer as some can have estrogenic properties. Herbal remedies include:

- **Agnus Castus** known as “Monks Pepper or Chasteberry extract” – most commonly used for pre-menstrual syndrome (PMS) and has a hormone regulating effect. It is available as a tincture or in tablet form. **Caution** - Possible interactions with oral contraceptives and hormone replacement therapy.

- **Black Cohosh** – is widely used by women to alleviate menopausal symptoms. It may help with symptoms such as mood swings, depression and weepiness and may also help hot flushes, however studies have shown mixed results on its effectiveness. Little data is however, available on its long term use. It is available as a tincture or as a tablet and doses vary with the product. **Caution** - Cases of hepatitis have been reported, are thought to be due to contaminants and have not been found with high quality preparations.

- **Ginkgo Biloba** – some studies have suggested beneficial effects on memory and cognitive function. **Caution** – it can interfere with blood clotting and should not be taken with anti-coagulant drugs such as Warfarin and Aspirin.

- **Sage** – may be helpful in relieving hot flushes and seems to have a hormone regulating effect, further studies into its effectiveness are ongoing. **Caution** for women with high blood pressure and if on Tamoxifen.

- **St John’s Wort** – studies have shown this may be beneficial in treating mild/moderate anxiety & depression. **Caution** – has many drug interactions including Cyclosporin, Amitryptiline and other anti-depressants, Digoxin, Warfarin, Theophylline, anti-asthma drugs, oral contraceptives, migraine drugs, HIV drugs and others. Do not take with other anti-depressants drugs.

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**Introduction**

The benefits of HRT are well known in the control of menopausal symptoms such as hot flushes and sweats, and in the prevention and treatment of osteoporosis. However, many women do not take HRT, either because they are medically advised not to do so, have tried HRT and not tolerated it because of side effects, or prefer not to take it and take a more “natural” approach to managing the menopause. For these women, alternatives to HRT can be helpful. Alternatives are available as prescription or over the counter medications but with a growing alternative therapy market the choices for women can often be confusing. This leaflet is aimed at giving an overview of some of the alternatives available along with general advice on dietary and lifestyle measures in managing the menopause.

1) **Dietary & Lifestyle Measures**

**Diet:**

Good nutrition is essential at all stages in life but especially so in menopausal years where eating a well balanced diet can help to reduce weight gain and minimise symptoms.

A healthy, well-balanced diet is also important in reducing the risk factors associated with heart disease and osteoporosis.

As part of a well-balanced diet:

- Eat three meals a day (i.e. do not skip meals)
- Eat more fruit and vegetables – 5 portions per day
- Avoid excess salt – limit in cooking and at the table
- Avoid excess caffeine – limit tea, coffee and fizzy drinks
- Cut down on fat and sugar
♦ Grill rather than fry foods
♦ Avoid large amounts of red meat – eat more white meat and fish e.g. 2 portions of oily fish per week
♦ Do not overeat and limit “junk” or processed foods.

**Exercise:** -
Exercise is important for a healthy heart and cardiovascular system, maintaining strong, healthy bones, improving mood and in promoting overall well-being. Any exercise is better than none at all with weight bearing exercise being best in the prevention and treatment of osteoporosis e.g. brisk walking, jogging, dancing and aerobics. Swimming and cycling, although not weight bearing exercises, are good for maintaining joint flexibility and may also help to improve symptoms like flushes and sweats.

**Rest and Relaxation: -**
With many women leading busy lives both at work and in the home it is important that time is made for adequate rest and relaxation. This is important in relieving stress and anxiety, improving mood and promoting overall well-being.

Excess stress is also linked to an increased risk of heart disease, and can worsen symptoms like flushes and sweats. It is therefore important that women make time for themselves to relax with simple measures such as a soak in the bath or reading a book.

**Evening Primrose / Starflower Oil** contains Gamma Linoleic Acid (GLA), which is an essential fatty acid, which is commonly used for breast pain and tenderness. It may also be helpful for mood swings but is unlikely to have an effect on hot flushes. The strength and potency can vary. Check the amount and aim for 240mg daily for at least 2 months for maximum effect. The dose can then be reduced as required. **Caution** – may interact with anti-inflammatory drugs, beta-blockers, anti-coagulants and anti-psychotics. Also use with anti-epileptic drugs may increase risk of seizures. Side effects include headache, skin rashes and nausea.

**Herbal Remedies: -**
Even though there is often very little scientific evidence available on the use of herbal remedies in relieving menopausal symptoms, many women use them and report an improvement in symptoms like flushes, sweats and mood swings.

There are many over the counter remedies available but the choice can be very confusing and it is not to be presumed that because they are “natural” remedies, that they are completely safe. Such products are often marketed as food supplements and are not subject to the same strict regulation as conventional drugs. Doses can vary widely, and certain herbal remedies can interact with other medications and should therefore be used with caution. It is therefore important that women speak to a pharmacist or find a reputable therapist with whom to discuss such issues and look for the Traditional Herbal Medicine scheme approved logo (THR).
heart disease, osteoporosis, and cancers of the breast, womb and bowel. Although the evidence is encouraging and would suggest potential benefits for women in Western countries, further research is necessary. Phytoestrogens can be taken as a supplement or by increasing dietary intake, however quite radical changes to diet may be required to have an effect.

Foods, which are good sources of phytoestrogens, include: -

Cereals: oats, barley, rye, brown rice, couscous and bulgar wheat.

Seeds: sunflower, sesame, pumpkin, poppy, and linseeds.

Pulses: soya beans and all soya based products.

Beans: chickpeas, kidney beans, haricot beans, broad beans, green split peas.

Vegetables: red onions, green beans, celery, sweet peppers, sage, garlic, broccoli, tomatoes and bean sprouts.

Soya, linseed oils and red clover are the richest sources of phytoestrogens.

Commercial products such as Burgen bread and soya products like soya milk and yogurts are also richer sources and are available to buy in supermarkets. Phytoestrogens, such as Red Clover, are also available to buy in tablet form as an additional dietary supplement. They may, however not be suitable for all women. Women who have had breast cancer or other hormone dependant tumours may not be advised to take these as it is uncertain whether or not even the tiniest amount of estrogen may have an adverse effect. More research is required.

Smoking: -
Smoking is said to lower levels of estrogen in the body and is associated with an earlier than average age of menopause. It is also increases the risk of osteoporosis and heart disease, and can worsen symptoms like hot flushes and sweats. Women who smoke should therefore try to give up completely or cut down as much as possible.

2) Prescribed Alternatives
a) Hot flushes: -

Clonidine (Dixarit) is a drug, which is usually prescribed for migraine or high blood pressure but can also help to reduce the intensity of hot flushes in some women. The dose is normally 50-75 micrograms twice daily and is usually well tolerated but possible side effects include difficulty sleeping, dry mouth, dizziness, constipation and drowsiness.

SSRI Drugs (Selective Serotonin Reuptake Inhibitors) - these are a type of anti-depressant drugs which can help to reduce flushes and sweats by working on the “thermostat” in the brain.

They are also useful in controlling mood swings. Examples are Venlafaxine, Fluoxetine and Paroxetine. These types of drugs can have side effects but are usually minimal since they are started in a low dose. Higher doses can be more effective in relieving flushes but side effects can be greater. Side effects include nausea, dizziness, sleeping problems, agitation and confusion.

SSRI drugs can be particularly useful for women who have had breast cancer and cannot take HRT, but care should be taken since some SSRI drugs can interfere with Tamoxifen which can be used as part of breast cancer treatment.
Gabapentin: - this is a drug, which is used to treat epilepsy, nerve type pain and migraine but has been shown to help flushes. It can also be useful in relieving aches and pains, which some menopausal women may have. Possible side effects include dizziness, fatigue, tremor and weight gain. It is usually prescribed in a low dose of 300mg daily and then increased gradually if necessary to up to 900mg daily in divided doses.

b) Osteoporosis: -
Although HRT is licensed for bone protection and has been shown to reduce the risk of fractures, there are other non-hormonal treatments available which may be considered when HRT is not suitable. The choice and duration of treatment however depends on a number of factors including age, medical history and any fractures. There are a variety of different medications available and these are explained in our ‘Osteoporosis’ leaflet.

Calcium and Vitamin D supplements: -
Calcium and Vitamin D are essential for strong bones and teeth. The best way of getting enough calcium is in the diet as it is more readily absorbed, however supplements can be beneficial to those women who have a low dietary intake through for example, not liking or not being able to tolerate dairy products, or having little exposure to sunlight.

The recommended daily intake of calcium for women is 700mg, which is the equivalent of a pint of semi-skimmed milk. Good dietary sources of calcium include dairy products, leafy green vegetables and oily fish. Dietary sources of vitamin D include oily fish, margarine and eggs but our main source is from sunshine, with vitamin D being known as the “sunshine” vitamin. It may be worth considering a vitamin D supplement in winter month’s when days are long and dark with little sunshine.

c) Vaginal atrophy: -
Lack of estrogen can cause the tissues of the vagina to become dry and more fragile (atrophic) which can cause discomfort irritation, itch and discharge and pain during intercourse. Lack of estrogen can also cause bladder symptoms such as passing urine more frequently, leakage of urine and infections.

Vaginal estrogen preparations can be very helpful in relieving these symptoms and are available as vaginal tablets, pessaries, and creams which are normally prescribed nightly for two weeks then twice weekly as a maintenance dose. There is also an estrogen releasing vaginal ring which is changed 3 monthly.

These vaginal preparations can be prescribed for women who cannot otherwise take estrogens as they act mainly on the vaginal area with very little being absorbed into the whole system.

However there are also a variety of non hormonal vaginal preparations which can be useful and may be a more suitable option for some women. These include vaginal moisturisers such as Replens and Sylk which are available to buy over the counter or on prescription.

3) Over the Counter Alternatives
Phytoestrogens are naturally occurring compounds with weak estrogen-like activity found in varying amounts in some plants.

There is growing interest in phytoestrogens because there has been some evidence to suggest that women who come from countries who traditionally have diets rich in phytoestrogens, for example in Asia and Japan, experience fewer menopausal symptoms and have a lower incidence of diseases like