

Menopause: Unavoidable yet Stigmatized

A Research Paper by the All4Smiles Research Team

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Abstract

While most adolescents and youth are familiar with periods and menstruation, few have yet to be introduced to menopause. Despite its inescapability, the topic remained stigmatized and under addressed amongst all age groups. For the January edition of our research papers, the All for Smiles team will be looking into menopause through multiple lenses. Not only will we be defining menopause on a basic level, we will be looking at its impacts on mental health, cultural perspectives on menopause, and the up-and-coming Hormonal Replacement Therapy treatment.

Table of Contents

- 1) What is Menopause?..... **4-5**
- 2) Cultural Perspectives on Menopause..... **6-8**
- 3) Impact of Menopause on Mental Health..... **9**
- 4) Hormonal Replacement Therapy..... **10-11**
- 5) Works Cited.....**12-13**

What is Menopause?

By: Evelyn Yao

Menopause is the natural biological process marking the end of a woman's reproductive years. It is diagnosed after 12 consecutive months without a menstrual period, typically occurring between the ages of 45 to 55. Globally, the average age is 51, although this can vary due to factors such as genetics, lifestyle, and health conditions. This transition represents a significant part in a woman's life, as it brings about a range in hormonal, physical, and emotional changes. Understanding menopause is essential for promoting health and well-being during and after this transition.

Menopause is driven by changes in the reproductive system, particularly the gradual decline in ovarian function. The ovaries, which produce eggs, also regulate key hormones such as estrogen and progesterone. During perimenopause, estrogen levels fluctuate unpredictably, and progesterone production decreases, leading to irregular ovulation and menstrual cycles. As menopause approaches, the ovaries stop releasing eggs, and estrogen production declines significantly. This hormonal shift affects various parts of the body. A crucial indicator for identifying menopause, follicle-stimulating hormone (FSH) levels increase when the body tries to activate the ovaries. The mental and physical symptoms that are frequently linked to this transition are caused by these hormone shifts.

Stages of Menopause:

1. Perimenopause (the transition phase):
 - Begins several years before menopause as the ovaries gradually produce less estrogen

- Symptoms: Irregular periods, moodswings, hot flashes, sleep problems, and vaginal dryness
 - Hormone levels fluctuate, and ovulation becomes less predictable
2. Menopause (the official stage):
- Confirmed when a woman has not gotten their menstrual period in 12 months
 - The ovaries stop releasing eggs, and estrogen levels drop significantly
 - Symptoms: Persistent hot flashes, night sweats, difficulty sleeping, reduced libido, and changes in skin elasticity.
3. Postmenopausal (the years after menopause):
- Starts after menopause is confirmed
 - Symptoms may ease for some women, but others experience long-term effects like increased risk of osteoporosis and heart disease.

In addition to these symptoms, menopause can impact long-term health as well. Women are at risk of cardiovascular disease and osteoporosis due to the decline of estrogen and decline of bone density, respectively. These health challenges highlight the importance of understanding menopause as not just a life stage but a crucial area for medical attention and support.

Cultural Perspectives on Menopause

By: Mumtahina Hemi

Many teenage girls crave their first period, viewing it as a sign of maturity and the first step into adulthood. A period symbolizes the body's preparation for reproduction, a signal that girls are turning into women. A period is menstrual bleeding that occurs when the lining of the uterus sheds, and it is part of the monthly menstrual cycle, which prepares women for pregnancy. Periods usually last seven days and can cause minor pain, like stomach cramps and emotional mood swings. Menopause is defined as when a woman does not have a period for 12 consecutive months, and it is usually preceded by perimenopause, which can last for four years. During perimenopause, spotting usually accompanies periods being irregular- either closer or farther apart from each other. Women typically start perimenopause when they are in their mid-40s, but it can come earlier or later. Along with not having a period, women also experience hot flashes, night sweats, sleep problems, and vaginal dryness when they hit menopause.

Different cultures perceive menopause in contrasting ways, with some honoring menopause as a sign of wisdom and others panicking over it as a sign of medical problems. The West tends to view menopause as a negative phenomenon, and there is some stigma regarding it. People from the West view menopause as a time of loss and decline from the healthy reproductive functions before, signifying the "old" age of women who experience menopause. Because fertility is connected with youth and positive traits, taking away the reproductive function via menopause strips women of one of their vital biological functions, which the West views as negative. Additionally, Western women report more vasomotor symptoms of hot flashes compared to Eastern women, which may lead to a more stigmatized

view of menopause. On the other hand, the Eastern perspective reveres menopause as a transition to a new wiser phase of life. Women who experience menopause are seen as community leaders with spiritual well-being and knowledge. People in the East see menopause as a natural part of life that requires honoring and have a more holistic view of it. Eastern women tend to report more musculoskeletal pain and sleep disturbances compared to Western women, which requires herbal remedies, acupuncture, and dietary adjustments. Western women turn to hormone replacement therapy (HRT) for symptom management instead.

Specifically, Indigenous communities emphasize a woman's role as a spiritual healer and leader after they reach menopause. They believe that in this time, a woman reaches a heightened spiritual awareness and is able to utilize healing powers. Similarly, some Shamanic traditions also believe women who reach menopause are able to access the spiritual world and have a deeper connection with spirits, allowing them to have a positive view of menopause. Some cultures, like African, Pagan, Chinese, and Jewish, may incorporate celebration of life rituals to mark the transition into menopause, indicating their respect for it. As such, many cultures in the East honor menopause because of their religious beliefs in the spiritual world. In contrast, the West, which is primarily composed of patriarchal societies, view menopause as a sign of aging because they value women based on their ability to bear children. In these Western cultures, menopause can cause a decline in a woman's social status, as they are only seen to continue the family lineage and to appeal to men. Additionally, some Asian cultures and religions may view menopause as negative, due to the stigma around aging because of the loss of youth. In Islamic cultures, women who experience menopause may have greater social freedom and respect because they no longer have to observe strict gender roles.

Overall, menopause is a sign of a transition of life for women, which different cultures interpret according to their structures and religions. The West tends to view menopause as negative and as a sign of infertility due to patriarchal beliefs, while the East tends to view menopause as positive and as a deeper connection to the spiritual world due to religious beliefs. Regardless of each culture's beliefs, it is essential to keep in mind cultural sensitivity and respecting all cultures and women.

Impact of Menopause on Mental Health

By: Joyce Sato

Menopause is a natural process in which a woman's reproductive system comes to an end; this occurs most commonly between the ages 51-52. This change is often characterized by a significant amount of mental changes, increasing the probability of depression and anxiety due to the many chemical changes happening within the body.

While undergoing menopause, common indicators of a change in mental health or stability range from irritability, mood swings, trouble with memory or concentration, to sleeping difficulty and anxiety. According to research, women are twice as likely to develop depression after or during menopause in comparison to before it. These mental changes are primarily due to increased or decreased estrogen and progesterone levels, as well as each individual's personality and environment.

Although the mental effects of menopause can be challenging, there are many ways to increase the quality of living and lessen the severity of these side effects. In order to improve hormonal conditions, hormone therapy, psychotherapy, lifestyle adaptations, and even participating in yoga or a soothing activity will boost emotional regulation and overall contentedness. Even more so, it is crucial to understand the symptoms of menopause and recognize that there are a wide variety of options for treatment and professional help.

Hormonal Replacement Therapy

By: Ifra Iyoob

First of all, what is Hormone Replacement Therapy, or HRT? Simply put, it is a medication that contains female hormones. There are two basic kinds of HRT: systemic hormone therapy and low-dose vaginal products. Systemic hormone therapy comes in pill, skin patch, ring, gel, or spray form and it usually contains a higher level of estrogen that is absorbed through the body. On the other hand, low-dose vaginal products—this comes in cream, tablet, or ring form—have a lower dose of estrogen (hence the name). Considering its dosage, it is usually only used to treat the vaginal and urinary symptoms of menopause. Systemic hormone therapy, because of its higher concentration of estrogen, is used for any common menopause symptoms.

When an individual takes this medication, the estrogen that their body stops making during menopause starts to be replaced. In doing so, HRT helps alleviate those common menopausal symptoms. The therapy was found to be effective in lessening the burden of menopausal hot flashes and night sweats. Additionally, it has been proven to ease vaginal symptoms of menopause, including itching, dryness, burning, and discomfort with intercourse. HRT has proven effective not only in acting as a barrier towards those symptoms, but it has also prevented bone loss and reduced fracture in postmenopausal women. Osteoporosis, a bone-thinning disease, is common among menopausal and postmenopausal women. While doctors usually recommend a type of medication called bisphosphonates to treat this condition, HRT has been shown to be a great alternative for those who cannot tolerate or are not benefitting from the treatment.

Despite its benefits, HRT is not a risk-less endeavor. The amount of risk with HRT depends on a variety of factors, like the type of hormone therapy, the dose, how long the

medication is being taken, and an individual's own health risks and history. The largest clinical trial to date on HRT was completed using Prempro, an estrogen-progestin pill. During the study, researchers found that the drug increased the risk of serious conditions like heart disease, stroke, blood clots, and breast cancer. Other studies have found that certain factors have been attributed to certain HRT-associated risks. Those include the aforementioned variables: 1) age, 2) type of hormone therapy, and 3) health history. Women 60 years and older or those who have undergone menopause for over ten years, are at a much greater risk for the conditions mentioned above. However, if women begin HRT before 60 or within 10 years of menopause, the benefits of the therapy greatly outweigh any negatives.

Ultimately, whether one decides to take or not take HRT is a personal decision that is between them and their doctor. For many, it takes some trial and error to find out first if HRT is even right for them, and second, what form of it is most effective.

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