

DIABETES AND THE MENOPAUSE



➤ WHY IS THIS LEAFLET FOR YOU?

Living with diabetes and also going through the menopause can be challenging. Knowing what to expect and following the advice in this leaflet may help you to manage both conditions. It can also guide you to know what to discuss with your doctor or nurse regarding the best treatment for you, your diabetes and menopausal symptoms. This leaflet will give you essential information on:

- What is the menopause?
- The menopause and diabetes
- Treatment
- Managing your diabetes
- Useful resources



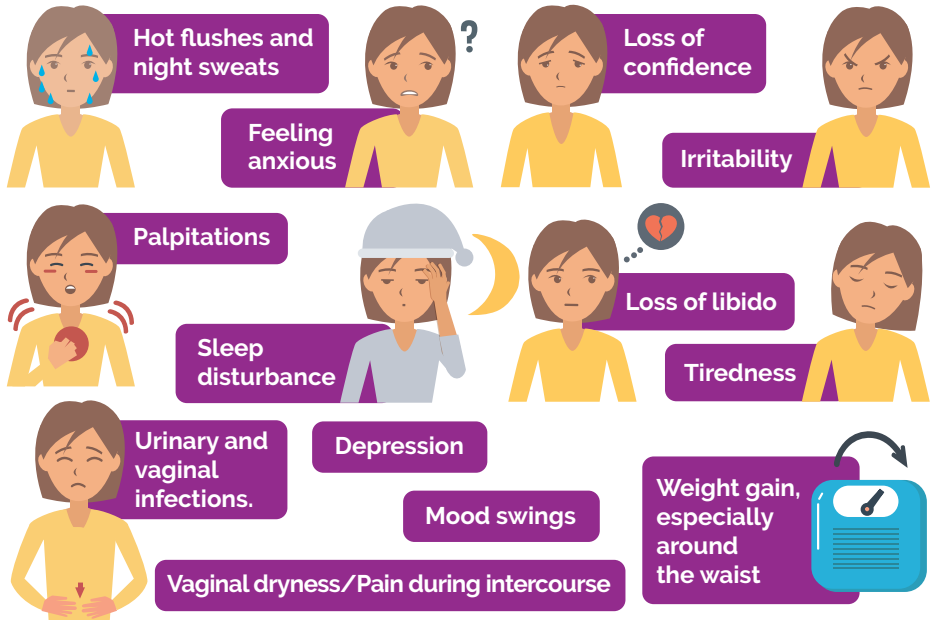
> WHAT IS THE MENOPAUSE?

The menopause occurs when menstrual periods have stopped for at least 12 consecutive months and typically occurs around the age of 50 - although anytime after 40 is considered normal.

The years leading up to menopause are referred to as the 'peri-menopause' and during this time levels of the female sex hormones involved in producing an egg from the ovaries each month fluctuate and gradually decrease. As a result periods may become irregular, sometimes more frequent and heavier, but at other times lighter and less regular. Because the hormones go up and down so much at this time blood tests to check hormone levels are rarely used (other than when menopause is suspected in younger women under the age of 45).

Menopause can also be induced by surgery e.g. hysterectomy (removal of the womb) or oophorectomy (removal of the ovaries) resulting in a sudden fall in female hormones and often more severe menopausal symptoms.

Typically, troublesome physical and emotional symptoms experienced by many women at this time include:



There is huge variation in both the severity and duration of menopausal symptoms.

➤ THE MENOPAUSE AND DIABETES

Female sex hormones (oestrogen and progesterone) can influence how effectively your body responds to insulin. Insulin is the hormone that controls blood glucose levels. As oestrogen levels fall, your body becomes less responsive to the effects of the insulin you produce (or inject). This is called insulin resistance. The fluctuations in hormone levels can therefore make it difficult to control your blood glucose levels, sometimes swinging from high to low levels for no apparent reason. You may find that you gain weight during the menopause. This can also increase your insulin resistance.

The fall in female hormones associated with the menopause can increase the risk of heart disease and bone fractures. Unfortunately, having diabetes also increases the risk of these health problems. The advice given in this leaflet can help you to reduce your risk.

The symptoms experienced by many women during the menopause may be confused with the symptoms of low blood glucose ("hypos"). Hypos are a side effect of certain diabetes tablets and insulin and should be treated with glucose.

Check with your doctor, nurse or pharmacist to see if you are taking a treatment that causes hypos if you are not sure. You may need to test your blood glucose more frequently, to confirm you are hypo, otherwise you may consume a lot of glucose inappropriately leading to hyperglycaemia (high blood glucose) and weight gain.

Vaginal dryness is a common symptom of the menopause, making sexual intercourse uncomfortable. In women with diabetes, high blood glucose levels over time can damage the nerves to the vagina causing thinning and inflammation of the vaginal walls. This can cause problems with sexual arousal and enjoyment.



> TREATMENT

If menopausal symptoms are affecting your quality of life, your doctor may recommend hormone replacement therapy (HRT). There are two main types of HRT:

- Oestrogen combined with progestogen/progesterone.
- Oestrogen alone - this is only suitable for women who have had a hysterectomy.

There are many different types of HRT, some are designed to give a monthly withdrawal bleed while others do not (often referred to as 'period-free HRT'). There are also different routes of administration including tablets, patches, gels and a vaginal ring.

HRT is not suitable for all women including those with a history of breast, ovarian or uterine cancer. Having diabetes however, does not necessarily mean you cannot use HRT. Discuss this with your doctor or nurse.

Your doctor will help you to assess whether the risks outweigh the potential benefits for you. Benefits can include reduced risk of hip fractures as well as improvement in menopausal symptoms. Oestrogen-only HRT may improve insulin sensitivity and help with blood glucose control. Urinary and vaginal infections can be more common in menopausal women but those with high blood glucose levels are more likely to suffer from these. Getting some help to control your diabetes will reduce the frequency of these infections

Vaginal symptoms can be improved by administering local oestrogen which is available as vaginal tablets, pessaries, cream or a vaginal ring. Lubricants can make sexual intercourse more comfortable but does not treat the underlying problem.

You can still get pregnant during the peri-menopause. You should use contraception for at least one year after your periods stop over the age of 50 and for 2 years if you are under 50.

The risks of using HRT for more than 10 years over the age of 50 are uncertain and ideally you should try to 'wean off' it after this time. The lowest effective dose should be taken for the minimum duration for relief of menopausal symptoms. You should attend for regular follow-up to review the benefits and risks and whether HRT is still needed. Starting HRT over the age of 60 is generally not recommended.

There are some alternative medications that may be prescribed for menopause-related symptoms such as hot flushes. Discuss these with your doctor or nurse.

Some women prefer to consider complementary / alternative treatments instead of HRT. Unlike conventional medicine there is no legal requirement to show that they are effective or indeed safe. For more information refer to:

www.rcog.org.uk/en/patients/menopause/hrt-and-alternatives/

> MANAGING YOUR DIABETES

The following advice will help you to control your blood glucose levels, manage the symptoms of the menopause, and reduce the health risks associated with diabetes and the menopause.

<p>✔ Keep active: weight-bearing physical activity helps to keep bones strong, is good for your heart health, helps your insulin to control your blood glucose more effectively and can help you to sleep better.</p>	
<p>✔ Eat a healthy diet: cut down on refined and processed foods and increase your fruit, vegetable and wholegrain intake. This will help to control weight gain, reduce swings in blood glucose levels and is good for heart health. Legumes (peas and beans), soy foods and flaxseeds contain plant chemicals that act like oestrogen in the body.</p>	
<p>✔ Ensure your diet contains sufficient vitamin D and calcium: these are essential for strong bones. Sunshine is good for bone health too!</p>	
<p>✘ Cut down on caffeine and alcohol: both can disturb sleep and make hot sweats worse. Alcohol is high in calories, so cutting down or cutting it out will help you to lose weight.</p>	
<p>✘ Stop smoking: smoking significantly increases your risk of heart disease and bone weakness.</p>	
<p>✔ Discuss your diabetes treatment with your diabetes team: some tablets cause low blood glucose levels which feel like hot sweats. Some tablets may increase your risk of bone fractures. If you are taking these, there may be safer alternatives available.</p>	

> SUMMARY:

- Having diabetes and going through the menopause can be challenging.
- Understanding how the change in your hormones can affect your blood glucose levels can be helpful.
- Having diabetes may increase the health risks associated with the menopause, particularly heart disease and bone problems.
- It may be difficult to distinguish between menopausal symptoms such as hot sweats or palpitations and signs of hypoglycaemia. You may need to self monitor your glucose more frequently to identify the cause.



> USEFUL RESOURCES:

TREND-UK: www.trend-uk.org

Diabetes UK: www.diabetes.org.uk

Menopause Matters: www.menopausematters.co.uk

Manage my Menopause: www.managemymenopause.co.uk

Women's Health Concern (WHC): www.womens-health-concern.org



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