

Peri-Menopause Client Information

1. Menopause is the cessation of periods and is said to have occurred after 12 months of no periods.
2. Menopause can occur anywhere between the ages of 40-60, but the average age in NZ is 52.
3. Before periods stop, a woman often goes through a transition phase with her cycles, they can be longer or shorter than normal and her period may become heavier or lighter. She may also experience: hot flushes, night sweats, disruption to sleep, increase in sweating during the day, vaginal dryness, aching muscles.
4. Recording mucus, sensation, temperature and changes in the cervix enables you to be aware of the fertile and infertile times in each cycle. This awareness helps you decide when to have intercourse thus alleviating the anxiety of an unplanned pregnancy.
5. Recording temperature helps to identify if you have or have not ovulated in that particular cycle. When experiencing a long cycle, temperature taking provides reassurance that pregnancy has not occurred.
6. Although the fertility of both men and women is reduced by this stage, pregnancy is still possible.
7. You will be able to stop using contraception one year after your periods stop if you are aged over 50 years, or two years after your periods stop if you are aged under 50 years.

Probability of conception per cycle when no contraception is used:

20-29 years	23-25%
30-34 years	17-22%
35-39 years	8-16%
40-44 years	1-6%
45+ years	Less than 1%

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Peri-Menopause Client Guidelines

1. Fertile mucus may be different from what was considered fertile in the past.
2. **Any vaginal bleeding, even menstrual bleeding must be considered potentially fertile.** This takes into account short cycles that tend to be ovulatory.
3. The four days after any bleeding has ended are considered potentially fertile therefore abstinence is practiced from the onset of the bleeding, including menstruation until the evening of the fourth day after the last day of bleeding
4. If there is dryness and no mucus in the four days following menstruation a long cycle can be anticipated and Basic Infertile Pattern (BIP) and cervical palpation can be used to determine the pre-ovulatory safe days. The usual post-ovulatory double check guidelines apply for the end of the fertile time (three high temperatures and three days of changed mucus from fertile to infertile).
5. If cervical mucus or changes in the cervix are noted in the days following menstruation, and early ovulation can be expected and abstinence is advised until the post ovulatory double check guidelines confirm the end of the fertile time.

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Basic Infertile Pattern (BIP)

This pattern should be recognised with 3 weeks of charting.

There are two types of pattern:

- Dryness, i.e. a dry sensation and no mucus seen.
- Unchanging mucus and sensation. The mucus and sensation may be of any description; the significant point is that the woman describes the same pattern day after day.

Guidelines for BIP

1. Intercourse is considered safe on alternate evenings during BIP (alternate to avoid confusion caused by seminal fluid on the day after intercourse and evenings to allow the woman to check for mucus throughout the day). This is called the 'alternate day' rule.
2. If there is change in the BIP (to a more fertile mucus or sensation), even for one day, the rule to apply is: avoid unprotected intercourse until the BIP has returned for four days. It is safe to resume unprotected intercourse from the evening of the fourth day, then continue to apply the alternate day rule. If the change does not revert back to the previous BIP, avoid unprotected intercourse for two weeks to see if a new BIP is established. If it has, this now becomes the client's new BIP and the rules explained earlier are applied.
3. Any bleeding or spotting must be considered a change. Wait for the bleeding to stop and the previous BIP to return. On the evening of the fourth day it is safe to resume having unprotected intercourse.
4. If the woman considers the bleed to be a period, she needs to commence Sympto-Thermal charting under the guidance of her Fertility Educator. BIP guidelines no longer apply.

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Post-Ovulatory Double Check Guidelines

The end of the fertile time is marked by:

3 days of change from your fertile mucus and sensation

AND

3 days of raised temperatures which are higher than the
previous six recordings

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Peri-Menopause Self Care

Hot flushes

- Layered, natural fibre, loose clothing, so that layers can be removed temporarily.
- Bedding can be arranged in layers, using duvets rather than heavy blankets.
- Use cotton sheets and wear cotton night clothes.
- Keep your bedroom cool.
- Avoid hot drinks, caffeine, alcohol and spicy foods if these seem to preempt a hot flush.
- Sit near open doors or windows.
- Smoking has been associated with higher rates of hot flushes, so advise cessation.
- Exercise. Some women have found that regular exercise helps ease hot flushes. Exercise can also help you sleep better.

Vaginal dryness

- Personal lubricant
- Vaginal Oestrogen creams (prescription required)
- Avoid perfumed soaps as they may act as an irritant

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Peri-Menopause Self Care

Natural Therapies

- **Black cohosh** – a herb available from medical herbalists, naturopaths and health food shops which some studies have shown to be effective in reducing hot flushes and night sweats. Available as a tablet, capsule or can be mixed with water. Safe in women with breast cancer. Women with aspirin sensitivity should not use Black Cohosh. Some women have found that black cohosh can relieve vaginal dryness, nervousness, and depression. There have been some reports of liver function abnormalities in users. Long-term safety use has not been studied.
- **Phytoestrogens** – a plant hormone found in some foods such as soy, flaxseeds and supplements which some studies have shown to be effective in reducing hot flushes. Long-term safety use has not been studied.
- **Acupuncture** - particularly useful for mood changes and hot flushes. Contradictory research results about the benefits of acupuncture.
- **St John's Wort** - A herb which is useful in treating menopausal mood swings, improving sleep, relaxation, and reduced depression and anxiety. Can be brewed in a tea or taken in pill or liquid form. Always check with your doctor before taking as it may interact with other medications you are already taking.
- **Ginseng** - a herb used to treat menopausal symptoms of fatigue, anxiety, and stress because it's considered a "normalizer" and an "energizer." You can take ginseng in different forms including tea, powder, and extract.
- Mindful breathing and yoga

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