

A Review on Longitudinal Prospective Study of Women's Life During the Menopausal Transition and Perimenopause

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Abstract—Perimenopause is the transitional phase leading up to menopause, where a woman experiences symptoms like irregular periods and hot flashes while still having menstrual cycles, while menopause is the point in stretch when a woman's menstrual periods entirely stop for 12 consecutive months, marking the end of her reproductive years; essentially, perimenopause is the "around menopause" stage, and menopause is the actual cessation of menstruation.

Index Terms—Lifestyle changes, Diet, Exercise, Hydration, Sleep hygiene and Stress management.

I INTRODUCTION:

Perimenopause is the transitional time around menopause. Menopause is when a woman's periods stop. It's marked by changes in the menstrual cycle, along by means of other physical and emotional symptoms. This time can last 2 to 8 years. It is a natural process caused when your ovaries gradually stop working. Ovulation may become erratic and then stop¹⁻³. The time of a woman's life when her menstrual cycles permanently cease and she is unable to conceive is known as menopause. Menopause is a natural aspect of ageing for women; it is not an illness nor a pathology. The menopausal transition is the period of time preceding menopause. The transitional stages of perimenopause and menopause both signify the end of your reproductive years. In contrast, the absence of either symptom is known as premenopause. Additionally, menopause and perimenopause might raise cholesterol levels. This is among the factors that put postmenopausal women at much greater risk for heart disease⁴⁻⁶.

Causes⁷⁻¹⁰:

Perimenopause in addition menopause are caused by natural changes in hormone levels, particularly estrogen and progesterone. Other factors that can underwrite to early menopause include: Family history: Women with a family history of premature menopause are more likely to experience it themselves. Smoking: Smoking can cause menopause to start 1 to 2 years earlier than in non-smokers. Cancer treatments: Chemotherapy or pelvic radiation therapy can damage the ovaries and cause menopause. Surgery: Removing the ovaries (oophorectomy) or uterus (hysterectomy) can cause menopause. Autoimmune diseases: Some autoimmune disorders, such as rheumatoid arthritis, can cause premature menopause. Genetic disorders: Genetic disorders such as Turner syndrome can cause ovarian abnormalities and predispose to early menopause.

Symptoms¹¹⁻¹²:

Menopause and perimenopause can result in a variety of symptoms, such as: Menstrual changes: An irregular period is frequently the initial indication of perimenopause, and eventually, you will no longer have periods at all. Mental health: Mood swings, impatience, anxiety, depression, and a sense of diminished self-confidence are among the symptoms. Physical symptoms include headaches, joint and muscular aches, hot flashes, sweating at night, trouble sleeping, and weight gain. Skin changes: You may get adult acne or experience dry, oily, or itchy skin. Vaginal changes: During intercourse, you could feel pain and dryness in your vagina. Changes in your urinary system: You can have frequent UTIs or feel the urge to urinate. Additional symptoms include

tinnitus, hair loss, sensitive teeth, sore gums, and palpitations.

Complications¹³⁻¹⁵:

Complications associated with perimenopause and menopause primarily include an increased risk of cardiovascular disease, osteoporosis (weakened bones), urinary incontinence, vaginal dryness, mood swings, sleep disturbances, and potential issues with sexual function due to declining estrogen levels; these complications can significantly impact a woman's quality of life.

Stages of perimenopause and menopause¹⁶:

The stages of perimenopause and menopause are typically considered as: perimenopause (the transition phase), menopause (the point where periods stop), and post menopause (the time after menopause); with perimenopause being the period leading up to menopause, marked by irregular periods and fluctuating hormone levels, while menopause is defined as 12 consecutive months without a period, and post menopause is the time following that point where a woman no longer menstruates.

Easing the discomfort¹⁷:

To help manage the uncomfortable symptoms of menopause, focus on your diet, exercise and lifestyle changes. You can also talk to your doctor about medications that may help or hormone replacement therapy. According to the North American Menopause Society, there are things you can do to help prevent and decrease those pesky hot flashes. Limit alcohol, caffeine and spicy foods – these can be hot flash triggers, Stay cool – keep your body temperature cool by dressing in layers and drinking cold water during the day, Keep your body weight at a healthy number – choose plant-based, whole foods over processed, high-fat foods, Don't smoke – it increases the risk of osteoporosis, heart attack and stroke, Engage in plenty of routine exercises – it can relieve hot flashes and reduce the risk of fractures

Diagnosis¹⁸:

A doctor may also perform a blood test to check hormone levels (particularly follicle-stimulating hormone, FSH) to confirm the transition, although this alone isn't definitive due to fluctuations during perimenopause, and menopause is officially diagnosed

after 12 months without a menstrual period. Clinical diagnosis: Most often, a doctor will diagnose perimenopause based on a woman's reported symptoms and changes in menstrual cycle, without needing extensive tests, especially if she is around the typical age range for menopause. Hormone level checks: Blood tests can be used to measure hormone levels like FSH and estrogen, which can help support a diagnosis, but levels fluctuate during perimenopause so a single test might not be conclusive. Menstrual cycle changes: Irregular periods, heavier or lighter bleeding, spotting between periods, and changes in cycle length are key indicators of perimenopause. Menopause diagnosis: A woman is considered to be in menopause as soon as she has gone 12 consecutive months without a menstrual period.

Treatment¹⁹⁻²⁰:

Menopause and perimenopause can be treated with over-the-counter (OTC) and prescription medications. In order to prevent uncomfortable symptoms from abrupt hormonal spikes and decreases, oestrogen (hormone) therapy works by restoring normal oestrogen levels. Even the risk of osteoporosis may be decreased by certain types of oestrogen. You can get oestrogen over-the-counter or with a prescription. Notably, some of the over-the-counter choices might not be regulated by the Food and Drug Administration (FDA). Oestrogen occurs in a variety of forms, such as oral pills, lotions, gels, and skin patches, and is typically coupled with progestin.

II CONCLUSION:

To ease the transition through perimenopause and menopause, focus on lifestyle changes like maintaining a healthy diet, unvarying exercise, adequate sleep, stress reduction practices like meditation or yoga, and managing vaginal dryness with water-based lubricants; if symptoms are severe, consult your doctor about potential hormone therapy options. perimenopause is the transitional phase leading up to menopause, marked by irregular periods and fluctuating hormone levels, while menopause is the stage where menstrual periods permanently cease, signifying the end of a woman's reproductive ability, and both are natural parts of aging with potential physical and emotional symptoms that can be

managed through lifestyle changes and medical interventions if necessary; a woman is considered to be in menopause as soon as she has gone 12 consecutive months without a menstrual period.

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