Common Issues in the Menopausal Woman

Vaginal Health Care
Sexual Dysfunction
Hormone Replacement Therapy
Objectives:

• Develop awareness of key vulvovaginal and sexual health issues that menopausal women experience
• Formulate systematic clinical evaluation for vulvovaginal and sexual health issues
• Explore current therapy options
Menopause

- Implies permanent cessation of ovulation and menses
- Is recognized to have occurred after 12 months of amenorrhea with no obvious pathologic cause
- May be spontaneous or surgically induced
- 6,000 women reach menopause every day
Key Clinical Issues

Vasomotor Issues
Vulvovaginal Issues
Sexual Function Issues
Hormone Replacement Therapy
Vasomotor Issues

• Hot flashes and night sweats are the most frequent reported affecting 75% of transition and postmenopausal women in the U.S.

• Symptoms described as sudden wave of heat, increase in HR, core body temperature $^\pm 0.1-0.9\degree$ causing vasodilatation and sweating

• Causes – Freedman, et al., propose that theory that “thermoneutral zone” is receptive to E & P levels
Vulvovaginal Issues

• 1/3 of U.S. women experience vulvovaginal changes during transition and postmenopausal stages
• Symptoms – unpleasant odor, redness, dryness, irritation, vaginal bleeding, pain during intercourse
• Causes – vaginal atrophy, vulvovaginitis, lichen sclerosis, typically caused by loss of vaginal estrogen leading to increase in vaginal pH and thinning of tissue
Vaginal Atrophy Complaints

- Urinary Incontinence
- Recurrent UTI
- Pain with intercourse
- Vaginal itching/pain/discharge
Vaginal Atrophy

Atrophy: The Clinical Picture

- 2 years since natural menopause
- Loss of labial and vulvar fullness
- Pallor of urethral and vaginal epithelium
- Narrow introitus
- Minimal vaginal moisture
- Loss of urethral meatal turgor

Source: Medscape
Before: Epithelium is thick, healthy, full of estrogen

After estrogen loss: Epithelium is thin and dry
Treatment Options for atrophy

- Localized Estrogen Cream
- Estring
- Mona Lisa Touch
- Vagifem
- Osphena- estrogen like compounds that act both as weak estrogen agonists in some organ systems and as estrogen antagonists in others
Local vaginal therapy

Estring Therapy

Estrace Cream
Mona Lisa Therapy ®
Mona Lisa ®

- Gentle laser energy that stimulates a healing response and increase moisture
- Simple, painless laser energy
- In office, no anesthesia
- No side effects
- Symptom relief has been reported after one treatment
Histological Outcome

Before

2 months post 1 Treatment
(same enlargement)
Mona Lisa Therapy ®
Vulvovaginitis

Lichen Sclerosis
Pelvic Organ Prolapse
Sexual Issues

- 49% of women report sexual concerns during transition and postmenopause
- Symptoms – decrease in sexual desire, dyspareunia, decrease in quality or ability to orgasm
- Causes – psychological, sociocultural, interpersonal, biological, physiological
Clinical Evaluation

Pelvic Examination
Hormone Evaluation
Pelvic Examination

- Distribution of pubic hair reflects androgen level
- Pale, thin endometrium at introitus to vaginal reflects lack of Estrogen
- Sensitivity or introitus suggests vulvovaginal pathology
- Visible clitoris and labia minora attenuation suggest vulvar dystrophies
- Evaluate bladder, rectal, and uterine decensus
- Speculum exam of cervix
- Bimanual
Serum Hormonal Evaluation

- Estrone
- Estradiol
- FSH
- Free/Total Testosterone
- Progesterone
- SHBG
- DHEA-S
- TSH
Therapeutic Interventions

• Health promotion and lifestyle modifications
• Complementary and alternative medicine: Soy, Red Clover, Black Cohosh
• Supplements: Vitamins, Minerals
• Over the counter therapy: Topical Progesterone, DHEA, Melatonin
• Bio-identical HRT: Patches, Gels, Pills
• Compounded HRT: Creams, Troches, Pellets
Southeast Urogynecology

Dr Robert Harris
Dr. Steven Speights

800-696-7059
Ovation Women’s Wellness
Monroe, La   Grenada, Ms   Jackson, Ms
844-Ovation
Partnership in Women’s Wellness