

# Everyone experiences menopause differently



As a woman approaches perimenopause, subtle changes begin to occur due to fluctuations in estrogen production and less frequent release of an egg (ovulation).

## The menstrual cycle

During a woman's reproductive years, two hormones made by the ovaries – **estrogen** and **progesterone** – play an important role in the menstrual cycle. These hormones cause the lining of the uterus (endometrium) to thicken and prepare to receive a fertilized egg. If a fertilized egg does not arrive, the ovaries briefly stop making these hormones. Then the endometrium is shed and a woman has a menstrual period.

What's considered a normal menstrual cycle varies from woman to woman. However, **it's important to see a doctor or healthcare provider if any of the following abnormal patterns occur:**

- periods that are extremely heavy, especially if abnormal
- periods that last for more than seven days or two days longer than usual
- fewer than 21 days from the start of one period to the start of the next
- spotting or bleeding between periods
- vaginal bleeding after intercourse

Abnormal bleeding during perimenopause can also be caused by other health conditions, such as infections, fibroids, thyroid dysfunction or even cancer. Fortunately, a variety of treatments are available for these conditions, including hormonal and nonhormonal medications. If abnormal bleeding is due to cancer, early detection increases the likelihood of successful treatment. Even when not cancer, heavy or prolonged bleeding may contribute to a reduction in red blood cells (anemia), resulting in feelings of fatigue and weakness and a negative impact on health and quality of life.

A detailed list of possible signs and symptoms of menopause is provided in the activity on the next page. Remember that some of the listed symptoms may not be related to menopause at all. They could be due to some other underlying health condition or even to normal aging.

Changes to the menstrual cycle during perimenopause/the menopause transition

Cycles become shorter than normal

Number of days of bleeding may be fewer or greater and blood flow may be heavier or lighter

Cycle length may vary by seven days or more

Periods are occasionally skipped

**Activity: Self-assessment of signs and symptoms<sup>3</sup>**

Please indicate how bothered you are now and in the past two weeks by any of the following signs or symptoms.

This assessment covers the time period of _____ to _____ .	Not at all	A little bit	Quite a bit	Extremely
I have hot flashes				
I have night sweats				
I have difficulty getting to sleep				
I have difficulty staying asleep				
I get heart palpitations or a sensation of butterflies in my chest or stomach				
I feel like my skin is crawling or itching				
I feel more tired than usual				
I have difficulty concentrating				
My memory is poor				
I am more irritable than usual				
I feel more anxious than usual				
I have more depressed moods				
I am having mood swings				
I have crying spells				
I have headaches				
I need to urinate more often than usual				
I leak urine				
I have pain or burning when urinating				
I have bladder infections				
I have uncontrollable loss of stool or gas				
My vagina is dry				
I have vaginal itching				
I have an abnormal vaginal discharge				
I have vaginal infections				
I have pain during intercourse				
I have pain inside during intercourse				
I lack desire or interest in sexual activity				
I have difficulty reaching orgasm				
I have bleeding after intercourse				
My opportunity for sexual activity is limited				
My stomach feels like it's bloated or I've gained weight				
I have breast tenderness				
I have joint pains				

It's important for women of all ages to report any changes, especially those that are very bothersome, to their doctor or healthcare provider. Unfortunately, only a relatively small percentage of women seek medical help to treat menopausal symptoms.

 **Activity: Questions for your doctor or healthcare provider**

Prepare a list of questions for your doctor or healthcare provider.  
Some common questions to ask include:

- What is the most likely cause of my symptoms?
- What kinds of tests or exams might I need?
- Is my condition likely temporary or long-lasting?
- What treatment options are available?
- What do you recommend for me and why?
- Should I see a specialist?
- What sources or websites do you recommend for trusted information?

Write your questions here:

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**Not all doctors are used to treating women during the menopausal years.**

If you feel that you are not getting the help you need, ask for a referral to a doctor or healthcare provider who specializes in menopause treatment.

**Tips: Preparing for a visit to the doctor or healthcare provider<sup>4</sup>**

- Use the assessment on the previous page to make a list of any menopausal signs or symptoms you are experiencing. Include any that may be unrelated to menopause.
- Consider inviting a friend or family member to go along. Sometimes it's difficult to remember all of the information provided during a visit.
- Share personal information, including any major stresses or recent life changes or events.
- Take along a list of all medications, including prescription and nonprescription drugs, vitamins and supplements. Note the dosage of each.

Related topics that may be discussed at an upcoming doctor visit include the following:

- decline in fertility
- birth control during perimenopause
- urinary tract infections
- urinary incontinence
- pelvic floor physical therapy

References:  
1. Casper, RF. Patient education: Menopause (Beyond the Basics), May 14, 2024. [www.uptodate.com](http://www.uptodate.com)  
2. The North American Menopause Society. The Menopause Guidebook, 9th Edition, 2020. [www.menopause.org](http://www.menopause.org)  
3. The North American Menopause Society. Extract from: Menopause health questionnaire, 20245. [www.menopause.org](http://www.menopause.org)  
4. Mayo Clinic. Menopause – Diagnosis & treatment, May 25, 2023. [www.mayoclinic.org](http://www.mayoclinic.org)

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