

Complete Guide to

# Menopause

Everything you need to know & more

by

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PRACTICAL ADVICE | HOME REMEDIES | HERBAL MEDICINE



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## WHAT IS MENOPAUSE?

*Definition: A biological process experienced by women, which cause the end of menstruation.*

For a lot of women, going through menopause signifies a lot more than just the end of your period. In addition to fluctuating hormones, hot flushes, and mood swings, some women can also experience a profound sense of loss. Anxiety, depression, stress can all be triggered as they grapple with the emotional and physical changes they're going through. Others may just be happy to see an end to painful periods that zap energy and hormonal swings that cause uncontrollable laughter one minute and crying the next. Still, some may develop other menopause-related conditions they're forced to deal with as well. Lifestyle changes and hormonal therapies help many women during menopause.





*“I’m what is known as perimenopausal. “Peri”, some of you may know, is a Latin prefix meaning ‘SHUT YOUR FLIPPIN’ PIE HOLE’.”*

BY CELIA RIVENBARK

# MENOPAUSE AND ITS CAUSES

A woman's reproductive system will change as she ages, affecting the sex hormones regulating reproductive function.

The primary female sex hormone is Estrogen (in American English) or/Oestrogen (in British English). As women age, these hormones start to fluctuate, the ovaries produce less estrogen and other reproductive hormones, causing irregular periods as menopause begins. An increase in the production and release of Follicle Stimulating Hormones (FSH) is an early sign of the menopause approaches. In a normal menstrual cycle, FSH production and release increases and are sent out through the bloodstream to the ovum to stimulate follicle growth. Follicles are the small sacs in the ovaries that contain eggs. As FSH stimulates follicle growth, a lot more estrogen is created in the follicle. During ovulation, the estrogen releases and sends a signal to trigger a single follicle egg to release for fertilization. After ovulation, the burst follicle parts become Corpus Luteum, luteal cells that produce and release lots of progesterone which inhibits estrogen flow and FSH growth.

This signals the body that it is time to start the next cycle which triggers menstruation. As menstruation ends and ovulation begins, the corpus luteum dissolves and progesterone production stops, releasing more estrogen. The estrogen released sends a signal to release more follicle stimulating hormones to the follicles, triggering follicle growth and more estrogen leading up to ovulation.

As the follicles mature, fewer viable eggs remain, this is interpreted as a need for more follicle growth, triggering more FSH and estrogen. However, new follicles can't form, so follicle stimulating hormones start stimulating the mature follicles instead. This keeps the corpus luteum from building at the end of ovulation. The mature follicles stop growing and the egg doesn't get released. The follicle can't form the corpus luteum to create progesterone, so the signal to start menstruation isn't transmitted. This delays regular menstruation. Eventually, a surge of progesterone is triggered, and the menstrual cycle resumes. Eventually, the ovaries stop producing progesterone or estradiol altogether, marking the end of menstruation and the start of menopause.

# HORMONAL CHANGES:

Hormones play a significant role during the transition from Perimenopause into Menopause and will determine the kind of symptoms experienced.

Here's a basic outline of what to anticipate when:

- 30's: Hormonal changes leading up to menopause can begin in a woman's thirties as the ovaries start producing less progesterone and estrogen.
- The 40's: By their forties, Perimenopause will usually have started, and fluctuations in the duration, intensity, and frequency of periods begin.
- The 50's: By their fifties, usually Perimenopause ends, and menopause occurs.

# PERIMENOPAUSE

There are many symptoms women can experience during the months leading up to menopause. The extent to which these symptoms occur depends on a variety of factors. Lifestyle choices, other health conditions or contributing factors and genetics can all play a role in the level of perimenopausal symptoms.

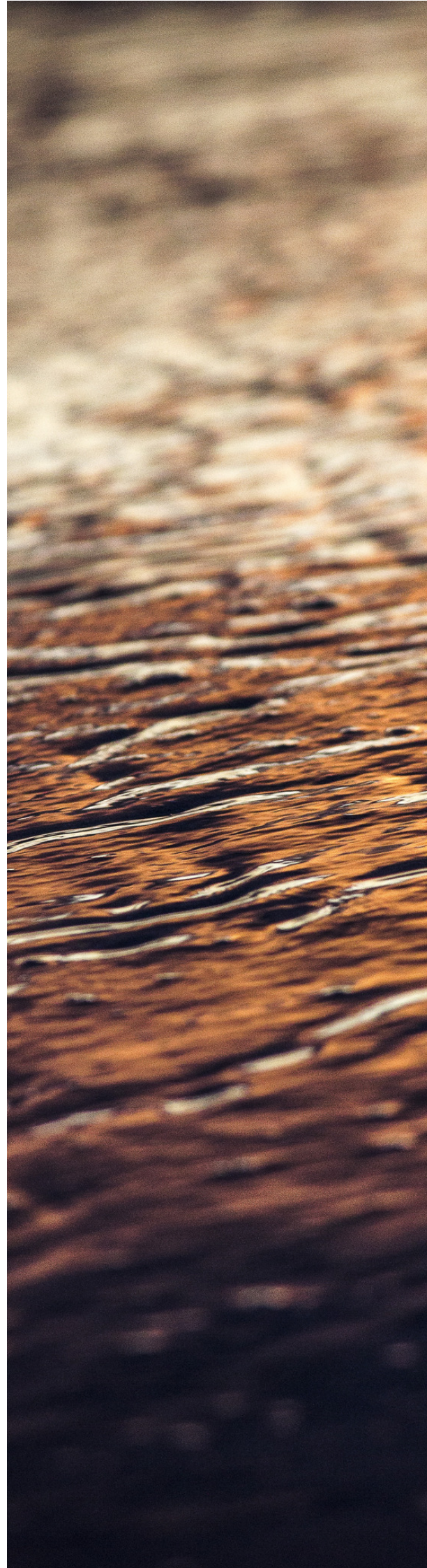
Often a significant indicator of what to expect is to know what their mother and grandmother experienced during the transition into menopause.

This change is called Perimenopause, or pre-menopause. During perimenopause, it is possible to continue menstruating right up until menopause starts, though this is less common.

Usually, periods will be irregular, often occurring only every 2-4 months. They may be longer or shorter, lighter or heavier, more painful or less painful, or fluctuate in between. It all depends on the woman and their set of circumstances.

## **Common Symptom:**

- A decrease in Breast Size
- Dry Skin
- Hair Thinning/Loss
- Hot Flushes/Night Sweats
- Irregular period
- Mood Swings
- Sleep Disorder
- Vaginal Dryness
- Weight Gain





*Every woman is different when they go through menopause, and... I didn't know emotionally how I would feel.*

BY ANGELINA JOLIE



# DIAGNOSIS & TREATMENT PLAN

At the onset of symptoms, make an appointment with your gynecologist or GP for a diagnostic exam and follow-up appointments to monitor any changes. Initial reviews are often quick, so it's important to come prepared with questions and necessary information. To get you started, here is a list of things to take and what to expect at your appointment,

## What to Do Before the Exam:

- **Track symptoms:** Make a list of symptoms and a record of how often/frequent/severe they are. Bring a written record of this with you to the appointment.
- **Medication List:** Make a list of medications/vitamins/herbal supplements you take, along with the dosage amounts and how often they're taken.
- **Moral Support:** Bring a friend or family member to help remember everything that's said and to support you in what is sometimes a stressful experience with a lot to take in quickly. Having a friend with you can make the experience less overwhelming.

- **Take Notes:** Bring something to take notes with you and keep track of relevant information or questions you might have.
- **List of Questions:** Bring a list of questions to ask your doctor. Bring a hard copy with you in order of importance in case there isn't time to ask everything on the first visit.

## General Questions to Ask:

- Do I need any tests done?
- What kinds of treatments are there to manage symptoms?
- Are there any alternative therapies available?
- Are there ways to manage my symptoms?
- What should I be doing to stay healthy?

## Questions Your Doctor May Ask:

- Are you still menstruating?
- The date of your last period.
- The frequency/length/intensity of symptoms.
- What helps alleviate your symptoms?
- What makes your symptoms worse?

## ADDITIONAL DIAGNOSTIC TESTS:

The signs of perimenopause are usually straightforward, and a diagnosis can be made based on what your doctor finds on your initial exam.

If there are still some questions or concern that something else may be causing perimenopausal symptoms, your doctor may order some additional tests.

### **They might include:**

- **Thyroid Stimulating Hormone (TSH):** An underactive thyroid or hypothyroidism can symptoms like those experienced in Perimenopause. A test to rule it out may be given.
- **Follicle Stimulating Hormone (FSH) & Estradiol (Estrogen) Test:** Elevated FSH levels are usually a good indication of perimenopause. Lower levels of estrogen are as well, so both tests may be conducted.

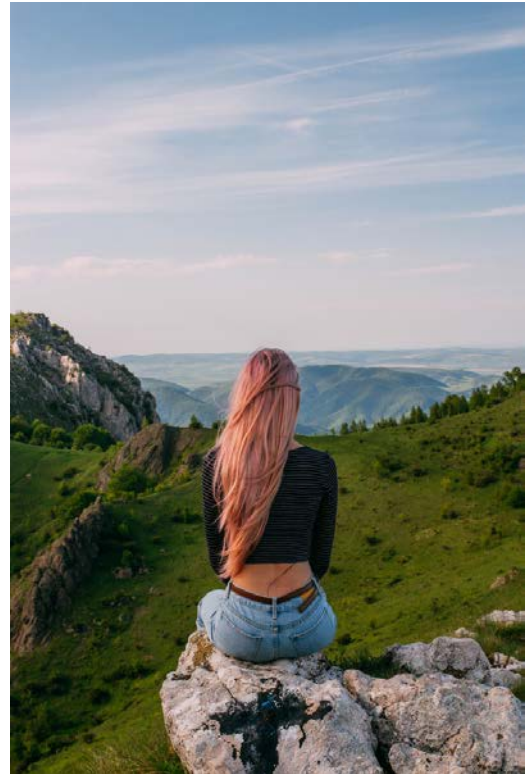


*I had a bit of a male  
menopause. It  
started at the age of  
18 and continued  
until I was 45.*

BY IAN MCSHANE

# PREMATURE MENOPAUSE

*Definition: The early onset of menopause before age 40, caused by either surgical procedure or illness.*



## Risk Factors

The average age for menopause is 51 and usually, begins between the ages of 45-55. Premature menopause is menopause that starts before the age of 40.

Menopause is a universal biological process that women go through. However, early onset of menopause or premature menopause is often triggered by an external force, like surgery or a related health condition, or even a genetic predisposition. Some other risk factors can also play a role in early menopause, some of which are avoidable, like smoking.

Certain health conditions create a higher risk for premature menopause as well, including respiratory problems, or history of heart disease.

Here is a breakdown of different factors that can either contribute to or cause premature menopause.

## Health & Environmental Factors

Early menstruation:

Over the past 30 years, the percentages for hormone-based conditions that trigger first menstruation have continued to rise. Menarche (the first menstrual cycle) that occurs before the age of 9, and Precocious Puberty (the development of sex characteristics before age 8) are both happening more frequently and raise the risk for premature menopause. Researchers suggest this could be due to several external risk factors.

The Casario & Hughes study from 2007 reported that the rise in early menstruation rates could be due to the following factors:

- Psychosocial Stress
- Pediatric Obesity
- Environmental Toxins: Chemical cleaners, skin, and hair product exposure.
- Assisted Reproductive Technology

## CHAPTER 4 | PREMATURE MENOPAUSE



### Cardiovascular Disease Rates

Heart disease rates have gone up considerably. From 1990-2020, they're projected to rise from 28.9% to 36.3%, becoming the number one cause for life expectancy rates decreases.

Premature menopause is linked to higher risks for heart disease, along with osteoporosis.

### Mortality Rates

A recent study of women in the US found the death rate in women who have experienced nonsurgical related premature menopause went up considerably compared to women who went through menopause at age 50.

- Before Age 40: 50% Higher Mortality Rate than the woman over 50.
- Ages 40-49: 35% Higher Mortality Rate than Woman over 50.

### Surgical Procedures

- Hysterectomy: Surgery to remove the uterus. The sudden launch into menopause makes side effects like hot flashes even more intense due to the abruptness of the change.

- Partial Hysterectomy: The uterus is removed, but the ovaries are left intact. Periods end, but menopause doesn't immediately kick in. A woman's ovaries still function, release eggs and, progesterone and estrogen production continues.

- Bilateral Oophorectomy: Like a hysterectomy, this procedure causes menopause to begin immediately, with no transition time to adjust to symptoms.

### Other Health-Related Causes

Primary Ovarian Insufficiency:

- A condition that creates premature menopause in 1% of women.
- The ovaries stop producing the reproductive hormones needed for menstruation and ovulation.
- Can be caused by genetic predisposition, autoimmune disorders, and sometimes for no reason.
- Hormone therapies are often used until a woman reaches the typical age for the onset of menopause.



## CHAPTER 4 | PREMATURE MENOPAUSE

### **Radiation/Chemotherapy**

Undergoing radiation or chemotherapy can trigger the onset of menopause and its symptoms afterward. Although it is not a permanent condition, and a woman may return to regular menstruation and hormone production.

### **Reducing Exposure to Toxic Chemicals**

Exposure to certain environmental chemicals and toxins can have a profound effect on our health.

There are over 800,000 human-made chemicals we're exposed to daily that impact our health in ways we are only beginning to understand. Beyond the environmental impact we've already seen from toxic chemicals used in conventional manufacturing and other industry practices, chemical exposure from products we use every day causes severe damage to our body systems and function.

These harmful chemicals are used in pharmaceuticals, foods, cleaning and hygiene products, cosmetics, clothes, lotions, and other household items we use on a daily basis.

These chemicals linger in our environment, collecting in our bodies for years before our system can clear them out.

The half-life of toxic chemicals, known as Endocrine-Disrupting Chemical, or EDC's, is ten years.

That means it takes our bodies ten years to filter just half of them out of our system! EDC's inhibits regular hormone production and release.

## CHAPTER 4 | PREMATURE MENOPAUSE

This interferes with healthy reproductive function, among other body processes, and EDC raises the risk for other health conditions as well, including:

- Cardiovascular Disease
- Certain Cancers
- Early Puberty
- Infection
- Low Sperm Count
- Metabolic Syndrome
- Pregnancy Complications

### **Premenopausal & Toxic Chemical Exposure**

A recent study published by PLOS ONE Journal discovered a link between toxic chemical exposure and earlier rates of menopause by up to 4 years.

The research was done by a National Health & Nutrition Examination Survey (NHANES) that was conducted over a 10-year span using 31,575 women aged 45-55. Researchers looked at 111 different endocrine-disrupting chemicals, specifically:

- Dioxins/Furans: Used in combustion products
- Phthalates: Plasticizers, used in numerous consumer products and building materials
- Phytoestrogens: Plant-derived estrogen
- Phenolic Derivatives: Phenols or furans, industrial pollutants
- Organophosphate pesticides: PAHs, combustible product pollutants
- Surfactants: Used in pharmaceuticals and personal care products
- Polychlorinated Biphenyls: PCBs coolants
- DDT



## CHAPTER 4 | PREMATURE MENOPAUSE



According to study exposure to EDC's causes up to six times greater risk of early menopause. Researchers also found definitive links between the more rapid rate of menopause and exposure to 15 different EDC's: 9 PCB's, three pesticides, one furan and two phthalates.

Women with high levels of the 15 EDC's went through menopause 1.9-3.8 years sooner than women with the lowest levels.

To put that in perspective, exposure to carcinogens in cigarette smoke causes earlier rates of menopause by between 0.8-1.4 years compared to women who don't smoke. That means EDC's are more toxic to a woman's reproductive function and health than cigarette smoke!

### **Phthalates**

Phthalates are one of the most significant contributors to regular toxic chemical exposures.

These types of EDC's are using a variety of building and home products and probably account for the most significant amount of EDC exposure we experience daily.

Phthalates are used in:

### **Building & Manufacturing Materials**

- Plastic flooring
- Wallcoverings
- Food Processing Materials
- Medical Devices

### **Personal Care Products**

- Shampoos & conditioners, skin cleansers and lotions
- Nail polish, perfume, deodorant, cosmetics
- Hair gel, mousse, and spray

### **Home Cleaning Products & Sprays**

- Floor, kitchen and bathroom cleaners
- Disinfectant sprays, varnish
- Dish soap
- Laundry Detergent and Fabric Softeners
- Air Fresheners, deodorizers, fragrance sprays





*“I call the Change of Life "Orchids" because menopause is such an ugly word. It's got men in it for god sakes.”*

BY LISA JAY DAVIS

# HOW TO LIMIT EXPOSURE TO ENDOCRINE DISRUPTING CHEMICALS (EDC)?

Naturally, we can't remove every toxic chemical or substance from our environment. But we can limit exposure to these harsh chemicals by making simple lifestyle changes and altering our buying habits and consumer product use. Here are some easy fixes for ridding harmful chemicals from our environment and what to replace them with.

## **Eating Organic**

Eat organic fruits and vegetables without pesticides, herbicides, or fungicides, and keep gardens and plants, especially edible ones, pesticide free.

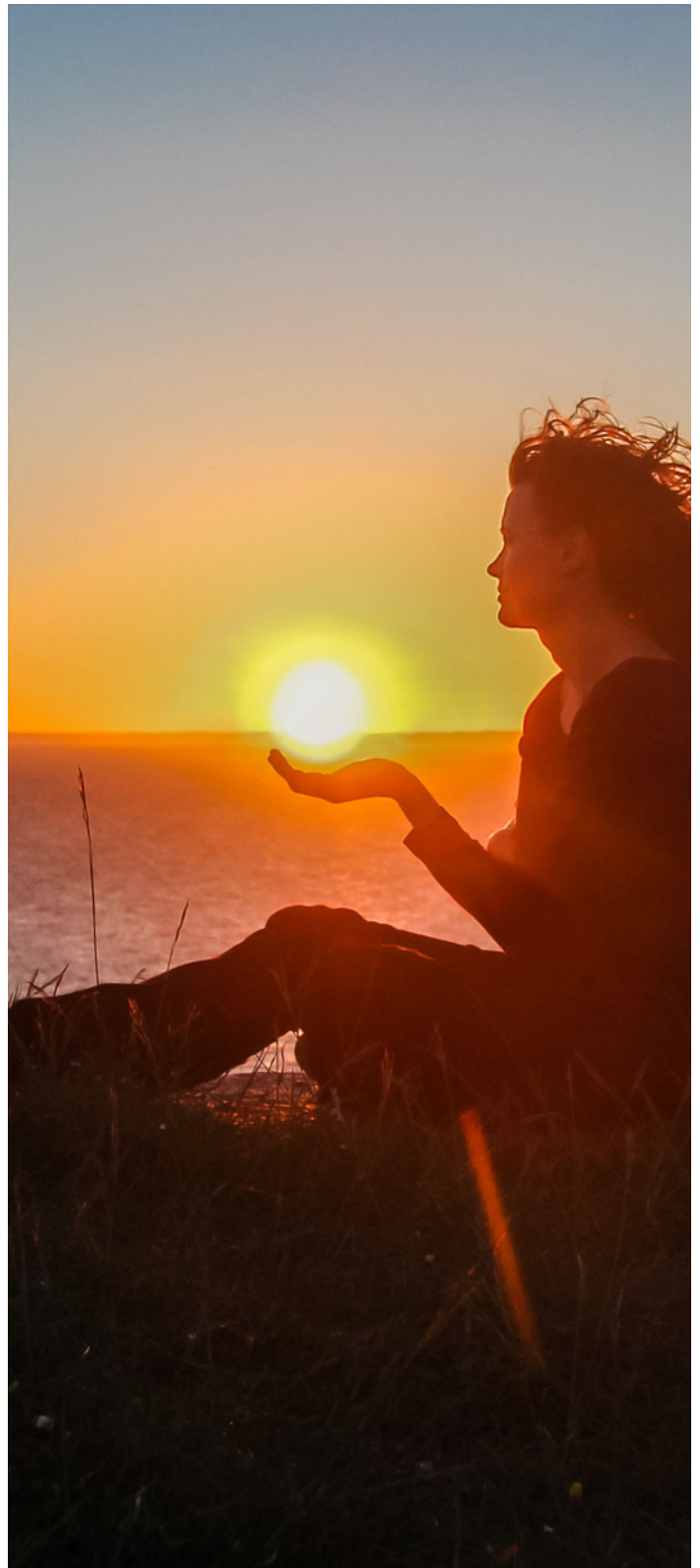
Buy organic, pastured or free-range meats and dairy products.

This will help eliminate the transfer of toxic pesticides and fertilizers that get into the fat cells and tissue of animals from commercial farms.

Eat Wild-caught or small fisher fishes in place of fish with mercury and PCBs. Don't eat canned foods that have BPA lining, which contains harmful EDC's.

## **Natural Home Care & Cleaning Products**

Replace fabric softeners and sheets, scented room deodorizers and air fresheners with natural fragrances and essential oils.



## CHAPTER 5 | HOW TO LIMIT EXPOSURE TO ENDOCRINE DISRUPTING CHEMICALS (EDC)?

This resolution goes a long way towards limiting toxins in the air and on our clothes and skin.

Use unscented, natural laundry detergent and cleaning products. Look for eco-friendly, EDC-free options in place of regular cleaning materials.

Use high-grade stainless steel, cast-iron, or enamel in place of Teflon, or non-stick pots and pans, and other cookware.

Don't use plastic wrap or plastic containers, especially when microwaving food. Replace with glass or ceramics made without EDC's.

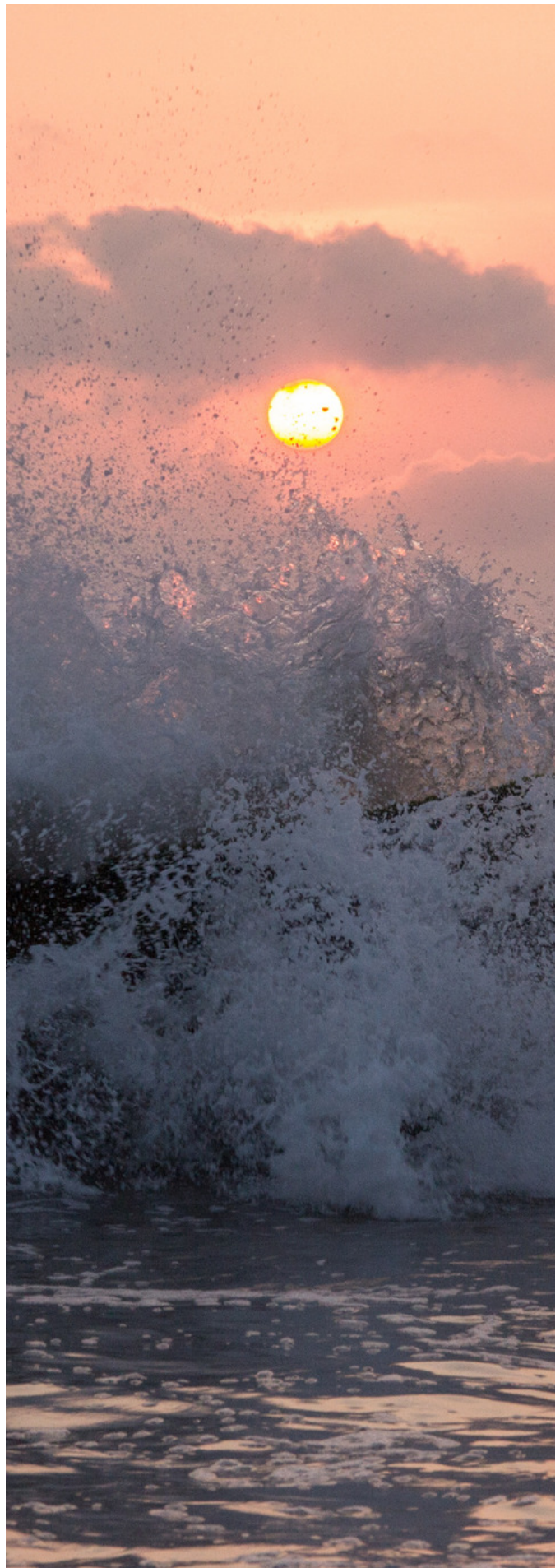
### **No More Bottled Water!**

The plastics in bottled water are incredibly toxic and negate any benefit from the spring or purified water they contain. In fact, once spring or filtered water is exposed to the plastic container, it's no longer pure or safe to drink.

The real exposure to toxic EDC plasticizers, once sealed inside the bottle is magnified triple-fold, especially the longer the shelf-life of the plastic water bottle.

Use a glass (not plastic!) pitcher with a high-end filter built in or a home filtration system that attaches to the tap that doesn't use materials with EDC's in them.

Avoid drinking from the tap without a filter as well. You can also use glass bottled water if the glass used is EDC-free.



# COMPLICATIONS INVOLVED IN MENOPAUSE

Risk factors for specific conditions increase after menopause.

It's important to be aware of what they are and how to protect your health against developing them. Here is a list of conditions that pose a higher risk after menopause.

## **1. Osteoporosis:**

The risk for osteoporosis grows as we get older and can start to develop quickly during the first few years after menopause as bone density decreases. Post-menopausal women with osteoporosis are much more likely to suffer hip, wrist, or spinal fractures because of this.

## **2. Urinary Incontinence:**

A lack of elasticity loss in the urethra and vaginal tissue which causes sudden and frequent urges to urinate. This can cause Urge Incontinence (UI), a small, spontaneous loss of urine because of an unexpected urgency to urinate. UI can also create a sudden urine spurt from sneezing, coughing, laughing, or heavy lifting (stress incontinence). It can also cause Frequent Urinary Tract Infections (UTIs).

[Click Here to See Related Natural Product](#)

### 3. **Sexual Function Problems:**

The loss of elasticity in the vaginal tissue due to estrogen losses can cause vaginal dryness. Pain and discomfort, and even some bleeding during intercourse are often experienced as a result.

Sensation loss can also happen, interfering with the level of pleasure experienced and a loss of interest in sex. To counteract this and keep the creative juices flowing, or at least to restore lost lubrication, there are water-based vaginal lubes and moisturizers that can help.

Look for products that are glycerin-free as it can cause burning and irritation in sensitive skin.

### 4. **Cardiovascular Disorders:**

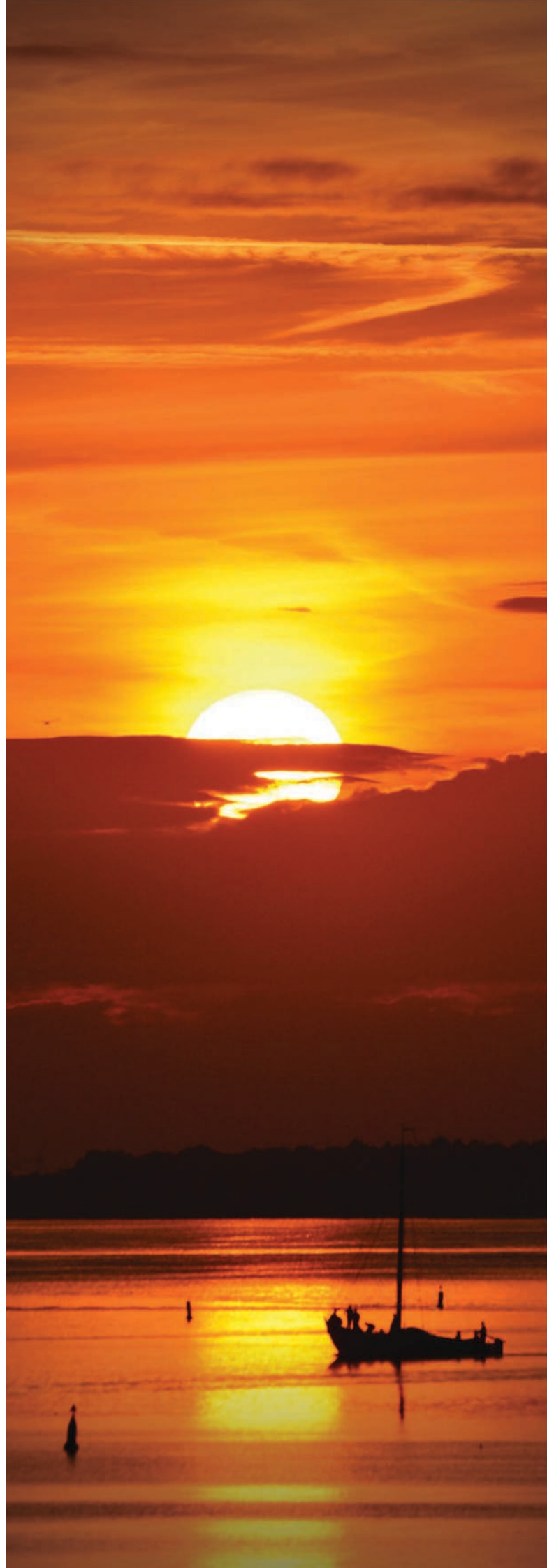
As estrogen level decreases, the risk of heart disease increases. Preventative health measures to combat risks are critical.

Discuss with your healthcare professional ways to protect your heart health like lowering your cholesterol and BP levels.

### 5. **Obesity/Weight Gain:**

The metabolism starts to slow down during perimenopause and often continues slowing after menopause and cause significant weight gain.

Adjustment to diet and exercise are often needed to maintain the weight.





*“Our mothers were largely silent about what happened to them as they passed through this midlife change. But a new generation of women has already started to break the wall of silence.”*

BY PATRICIA POSNER

# MENOPAUSE SYMPTOM RELIEF

## *Home Remedies for Menopause Symptom Relief*

Several natural substances can be used to relieve menopause symptoms. As always, check with your healthcare professional beforehand to rule out any possible adverse reactions with other medications or underlying conditions.

### **1. Hot Flashes Relief:**

#### *Black Cohosh:*

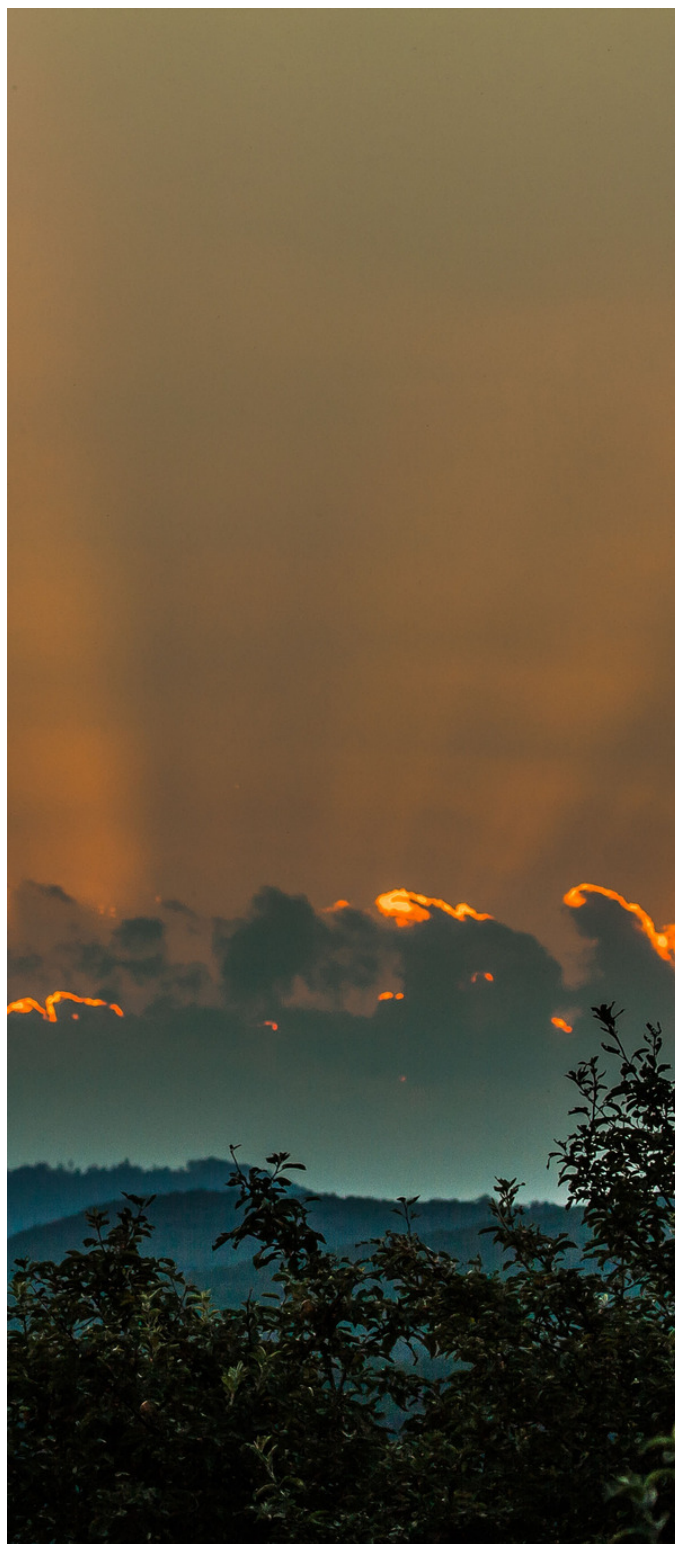
Made from the North American Black Cohosh Root and has been used for relief from menopause symptoms, especially hot flashes.

Many studies have been done, though some have been inconclusive. People with liver conditions shouldn't use it.

#### *Soy:*

There's a reason women in Asian countries have fewer hot flashes than most women, and that reason may be Soy! Menopausal women in the US are eight times more likely to experience hot flashes than those from Asian countries because of soy food.

Research shows soy offers mild relief to the hot flush sufferer in some studies. Check with your doctor before using a new supplement to rule any risk factors or health concerns.



## CHAPTER 7 | MENOPAUSE SYMPTOM RELIEF



### *Home Remedies for Menopause Symptom Relief*

#### **2. Bone Loss Prevention:**

##### *Calcium:*

Osteoporosis risks are much higher after menopause due to bone loss. The best source of calcium is in food, but supplements can make up the difference when calcium counts are low.

For better absorption, take smaller doses throughout the day.

RDA: Women over the age of 51 - 1200 mg per day, Woman under the age of 51 - 1000mg per day.

##### *Vitamin D:*

Your body can't absorb calcium without the help of Vitamin-D, so it needs to be taken in conjunction with Vitamin-D to help prevent bone loss.

Vitamin-D sources include foods, supplement, and sunlight.

To avoid skin damage and to be sure you're getting the right amounts needed, try Vitamin-D and Calcium supplements together.

RDA: Adults: 600 IU per day, Adults over age 71: 800 IU per day.

#### **3. Natural Mood Stabilizers:**

##### *Saffron:*

Saffron has been used as a mood stabilizer for 1000's of years and has shown to improve sleep quality as well.

Many studies on Saffron have shown relief from symptoms of Menopause such as mood swings, lower abdominal pains, depression, anxiety and stress. Saffron can also naturalise blood sugar which controls cravings in between main meals which in turn helps weight management.

##### *St. John's Wort:*

Treating depression with St. John's Wort has been popular for a long time in Naturopathic circles.

Used as a mood stabilizer to combat menopause-related mood swings, St. John's Wort is now also showing signs that its effects are improved significantly when used in conjunction with Black Cohosh.

Try those together to give your mood that extra boost!





### *Home Remedies for Menopause Symptom Relief*

#### **4. Other Sources for Menopause Relief:**

##### *Wild Yams:*

Yams contain nutrients that act like estrogen and progesterone-like natural compounds which may help relieve symptoms related to menopause.

Creams and supplements containing wild yams are often used as alternative hormone therapy treatments. The study, however, has been inconclusive.

##### *Flaxseed and Flaxseed Oil:*

The lignin present in flaxseed has been found to help rebalance hormonal levels in women experiencing hormonal fluctuations from menopause. Studies, however, have been inconclusive.

##### *Red Clover:*

A natural plant estrogen that many women have reported using red clover for symptom relief in menopause. Though research has found mixed results. Initial concerns over higher risk for uterine cancer, however, have not yet been proven.

**We hope you have enjoyed this eBook and that you can use the information in a way to help yourself or share it with someone who needs it. If you still have questions or concerns about your health, please don't hesitate to contact us: [hello@saffronice.com](mailto:hello@saffronice.com).**



## ABOUT THE AUTHOR



### **Matty's passion is nutrition and healing.**

At university, she studied science and medicine, and is currently finishing her second Master's degree in global health and nutrition.

With her in-depth knowledge of food science, she helps Saffronice guarantee the potency and quality of its products through the most modern testing methods available. And she also provides our customers with the very latest in scientific research and methods so they can get the most out of their products.

### **But Matty is not only a scientist.**

She is also a healer. Her grandmother was a traditional herbalist who taught Matty the old ways of using local plants and herbs (including saffron) for healing. Her grandmother inspired Matty to study the ancient medical texts of Persia, where she discovered a wealth of knowledge about the use of plants for natural nourishment and healing. At Saffronice, she helps to spread awareness of the myriad health and healing benefits of herbal medicines & foods we eat.

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