Menopause and HIV

Last updated: December 8, 2022

Together, we can change the course of the HIV epidemic...one woman at a time.

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What Is Menopause?

Menopause: Point in time when *a woman's menstrual periods have stopped*

- Often called "change of life"
- Menopause is a normal part of a woman's life

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What Is Menopause?

- **Perimenopause**: time of transition leading up to a woman's final menstrual period
- Women usually experience menopause between ages of 38 and 58; average age is 51
- Some evidence that women living with HIV may experience menopause earlier
- Symptoms may be more intense for women living with HIV, but no definitive proof of this
What Is Menopause?

• **Changes of menopause begin** when:
  – Ovaries (female reproductive organs containing eggs) naturally begin to slow down making **estrogen** and **progesterone** (female sex hormones)

• When women **near menopause**:
  – Estrogen levels drop
  – Stop having regular cycles
  – Eventually can no longer get pregnant

• Women have **passed through menopause** when:
  – Body has completed these changes (one to several years)
  – Has not had period for 12 months in a row

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Symptoms and Conditions Related to Menopause

*During perimenopause*, hormone levels rise and fall unevenly. Women may experience:

- Increasingly irregular periods
  - Change in frequency, duration, amount
- Hot flashes, night sweats
- Mood swings
- Depression
- Irritability
- Vaginal dryness
- Forgetfulness
- Trouble sleeping, fatigue
- Lack of sexual desire
- Skin changes including:
  - Thinner skin
  - Wrinkling
  - Acne

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Symptoms and Conditions Related to Menopause

• Women living with HIV who experience sweats at night
  – May be *misdiagnosed as having menopause-related hot flashes*
  – Their sweats may be result of HIV

• Vaginal dryness can be mistaken for a yeast infection

• Keep track of menstrual cycles
  – Report any changes to health care provider
  – Can avoid incorrect diagnosis or hormonal treatments that may not be necessary
Symptoms and Conditions Related to Menopause

• Women living with HIV may experience menstrual cycle changes even if not going through menopause
  – Speak to health care provider if you have any symptoms described above
  – Find out if related to HIV, menopause, or both
  – May be helpful to have hormone levels checked

• Medical concerns that can develop after menopause:
  – Osteoporosis (bone loss)
  – Cardiovascular (heart) disease
  – Urinary incontinence (leaking, more frequent urination)
Hormone Replacement Therapy (HRT)

Replacing estrogen a woman’s body no longer makes can relieve symptoms of menopause

• Women who have a uterus usually take estrogen with progesterone (hormone replacement therapy, HRT)
  – Used to be recommended, but long-term use now questioned; research shows increased cancer risk
  – May be appropriate for a short time
  – Patches, creams, vaginal rings may not carry same risk

• Women who had uterus removed can take estrogen by itself (estrogen replacement therapy, ERT)

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Hormone Replacement Therapy (HRT)

• Talk to provider about HRT
  – Provider needs to know *all* drugs and treatments you take, including over-the-counter and street drugs, herbs, etc.
  – Provider also needs to know whether you smoke cigarettes

• *HIV drugs can reduce effectiveness of hormones*
  – Includes birth control pills with estrogen and progesterone

• Estrogen can also cause lower levels of HIV drugs
  – Risk for rising viral load, HIV drug resistance

• Women taking HIV drugs have *good results using birth control pills and other hormonal contraceptives*
Alternative Treatments

- Complementary/alternative therapies for menopausal symptoms:
  - Traditional Chinese Medicine (e.g., acupuncture, Chinese herbs)
  - Eating foods that contain plant-based estrogens (also called phytoestrogens; e.g., soy, flax seeds)
  - Herbal or botanical supplements (e.g., black cohosh, red clover, dong quai, kava, ginseng)
  - Antidepressant drugs and/or counseling
  - Mindfulness training

- Some may have unwanted side effects or interact with HIV drugs
  - Often not regulated by U.S. Food and Drug Administration (FDA)
  - Not required to prove effectiveness in the same way as standard therapies

- Consult skilled practitioner and let regular provider know what you are doing

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Keeping Healthy After Menopause

• Eat a healthy diet and maintain a healthy weight
• Have bone health checked; ask provider about specific treatment to prevent bone loss:
  – Calcium supplements
    • FDA recommends women over 50 take ≥1,200 mg calcium/day
    • Calcium supplements may interfere with certain HIV drugs
    • Speak to your provider before taking them
  – Prescription drugs to prevent bone loss
• Have vitamin D level checked; take supplements as instructed by provider
• Quit or cut down on smoking

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Keeping Healthy after Menopause

- Quit drinking or use alcohol moderately
- Be physically active:
  - Aerobic or cardiovascular activity for 30 minutes, 5x/week (brisk walking, etc.) can prevent cardiovascular disease
  - Muscle-strengthening activity 2x/week can prevent bone loss
- Mammogram every 1-2 years
- Pelvic exam as often as recommended
  - With cervical cancer screening test (for those with a uterus)
- Get your cholesterol, triglycerides checked regularly
- Get screening test for colon cancer

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Menopause may signal the end of a woman’s fertility, but it is not the end of her femininity or sexuality

- Some women experience mild, tolerable symptoms
- Others’ symptoms are severe; impact quality of life

Decisions about treatment options are up to each woman

- Discuss concerns, questions with provider to weigh risks and benefits

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To learn more, and for links to articles featuring more details, please read the full fact sheet:

- [Menopause and HIV](www.thewellproject.org)

For more fact sheets and to connect to our community of women living with HIV, visit:

- [www.thewellproject.org](www.thewellproject.org)
- [www.facebook.com/thewellproject](www.facebook.com/thewellproject)
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