

# Does it have to be blood, sweat and tears?

That's what the menopause means to many women. Need it mean the same for you? We don't know because doctors don't know. Medical research has virtually ignored the female climacteric. Joan Webb investigates the mystery behind the menopause and Margaret Clare talks to two women who have gone through it

**A**t any given time, in hospitals and universities all over the country, doctors and researchers are spending their energies and our money on finding out just how the female body ticks. And since many of its processes are geared to a time cycle, tick is the operative word. Unfortunately, when the clock begins to run down, so does the researchers' interest.

The menopause might seem a dramatic – even melodramatic – event in most women's lives, but apparently to many medical men it is a predictably dreary process which fills their surgeries with slightly overweight ladies complaining of hot flushes and palpitations.

What treatment exists is fairly standard: pills to adjust the hormonal balance, and – if the patient is lucky – a friendly word to keep her smiling through.

And that's all. It is not surprising that women are beginning to think that it's not enough. After all, there are only two facts of female life that have to happen to all women: puberty and the menopause. The events in between – marriage, sexual love, giving birth – are not experienced by every woman. And while it goes without saying that the research being done in these fields must go on, can we not have something more than a few hormone pills to right the research balance elsewhere?

On the face of it, there is plenty of information available to women. But ask almost any woman who has experienced "the change" if it happened the way she expected from prior knowledge and available information, and she will probably admit to being surprised by her own bodily reactions. This is mainly because the menopause is quite unpredictable.

It is simply not true that the busy, outgoing woman, who is calm and efficient and leads a full and happy life, is going to sail through the change with no trouble, while the nervous, inward-looking woman is going to have a bad time. It may work out that way – but nobody can say for sure.

One doctor cited two patients as an example of the unpredictability of the female climacteric. The first was a busy professional woman holding a senior job in an advertising agency.

Her comment was: "I hardly noticed it happening. I was so involved with my work and my family commitments that I simply didn't have time to feel ill." She was lucky.

There is, in fact, no guarantee that her style of life acts as a magic charm to ward off the ills of the change. Another woman in similar circumstances had the opposite story to tell. She was an industrial correspondent on a national newspaper, and for her the change of life meant just that – she had to give up her job. For her, a keyed-up, highly professional existence involving press conferences and top-level talks couldn't help her through. In fact, the very pressures of her job, combined with an appallingly bad menopause, wreaked havoc with her life for some years.

**W**hat does "having a bad menopause" mean? Obviously, with a condition as highly subjective as this, it can mean different things to different women. Menopausal symptoms can run the gamut from hot flushes to depression and sweating, excessive blood loss during a period, worry over "missed" periods and nights of insomnia.

They can be inconvenient and frightening. But perhaps the worst part of any woman's menopausal pattern is the "hidden" symptoms – tension, irritability and emotional instability.

With the hormonal changes taking place in her body, it is just as likely that the emotional upheaval is also a natural part of the change – just as it is a natural part of puberty. The resemblance ends there. For as Marion Crawford, lecturer in Mental Health at Bristol University, puts it: "The menopause means a loss all round." Whereas puberty indicates – for all its inconvenience – growth, promise, a positive development into young womanhood, the menopause means the negation of all these things. At the change a woman can feel physically "castrated" in a way which can never happen naturally to a man.

Marion Crawford's research into the menopause is part of a six-year study she is undertaking on ageing. She is concerned with the psychosocial effects the menopause has on women, and one of the main points she makes

is that scarcely any research has so far been done in this field.

She quotes the GP's typical example of a time-wasting patient as a menopausal woman, and gives another telling instance of a recent examination in which 120 out of 121 medical students decided that a 44-year-old woman going to her doctor with vague aches and pains was menopausal, concluding that no further diagnosis or treatment was necessary. It is not surprising that the wilder shores of Women's Lib believe that doctors deliberately disregard "female" complaints!

This is a view which makes an exaggerated claim to prove a valid point. There have, in fact, been research studies into relieving the symptoms of menopause – and even delaying it indefinitely with replacement therapy. This means that a woman's periods – and her actively fertile life – are prolonged by hormone tablets which replace the oestrogen loss suffered at the menopause.

**I**n America, the best-selling book, *Feminine Forever*, pushes the concept of "the ever-young pill" to gullible middle-aged women who fear the loss of their looks and attractiveness. What they perhaps fail to understand, however, is that the pill carries with it known risks which are rather more damaging than a few wrinkles and a breakout of the hot flushes. It can also cause thrombosis and other worrying side effects.

A few years ago a research project was set up at the department of Obstetrics and Gynaecology at Leeds University to look into the effects of replacement therapy. Mr. Ronald R. Macdonald, who was in charge of the research, has since pointed out that although oestrogens induce a sense of well-being and relieve many of the unpleasant symptoms of the menopause, the benefits to be gained are not truly convincing in the light of the known risks.

One of the ironies of the menopause is that women's health is likely to suffer whichever way they look at it. Those who get through it with few symptoms and no treatment still have to face the fact that they are not only on the brink of old age, but also are liable to suffer certain really serious illness for the first time in their lives. This is because the oestrogen continually produced throughout their fertile life acts as a preventive against illnesses such as angina and coronary thrombosis. In the years following the menopause, women become *naturally* more at risk from these diseases, whether oestrogen therapy is used or not.

A major problem bugging further research into the menopause is the practical impossibility of getting to the areas of the body which control the female fertility cycle. For instance, it is impossible to inspect the pituitary gland which master-minds the whole menopause operation. And doctors are obviously unwilling to tamper with the ovaries unless they have to be removed (and since this induces an artificial menopause with many of its attendant complications, it is avoided by doctors as far as possible).

Only by removal can they be subjected to tests which could throw more light on the mysterious physiological changes which take place in a woman's body at menopause.

Another argument against replacement therapy is that it requires a regular and precise measurement of the hormone levels – and this is both complicated and expensive.

And while, in the best of all possible medical worlds, a routine cervical smear and gynaecological examination is obviously a good thing, if it has to be done every month or so the whole business becomes impossible, as the researchers found when they attempted a more detailed trial with patients at Leeds Infirmary.

Almost the best a woman can expect at the moment is to be told to keep a stiff upper lip when her breasts are beginning to sag and her vagina is starting to shrink, although local treatments with hormone preparation can help matters.

For most of them it is a pretty miserable time in their lives. Husbands are often unsympathetic – and it is not surprising, since so little is known about their wives' symptoms. If they go to a doctor, it is to be told too often, and with perhaps a touch of impatience, that "It's your age". And many women run the extra risk of thinking the same themselves and so ignoring a serious symptom such as irregular bleeding.

The sense of loss they feel in their own bodies is paralleled by family circumstances, too: children are leaving home, husbands are often at the height of professional success and elderly relatives die. Not only is a woman's active role as a mother ended, but also her ability to conceive. So Nature underlines the point rather forcibly. Finally, to lose the physical tokens of her femininity is depressing for every woman and for some it is sometimes positively traumatic.

Is it any wonder that for many women the menopause means Blood, Sweat and Tears? So why don't the doctors do something about it? Why don't they care?

"I found the whole thing a complete nightmare. I felt miserable most of the time."

"I didn't feel depressed. People told me that at 45, I looked more youthful than ever."

Lydia and Kate are mother and daughter, now aged 70 and 49 respectively. Both are basically healthy women, leading normal married lives with stable and happy family relationships.

Yet the menopause struck at them in entirely different ways. One suffered agonies – and there appear to be at least 57 varieties of misery, discomfort and disorder associated with this experience – and the other got through so easily and lightly that she hardly noticed anything at all.

Here are their own personal stories of the "change" in life.

Kate: When I first saw the doctor about it he said briskly, "It's nothing. You're a strong and sensible person – and a married woman with children. You'll be able to take the menopause in your stride."

Stride indeed! It was more like a limp and a collapse. I found the whole thing a complete nightmare. First, there was the itching all over my body. I scratched and scratched. At night it was terrible. My husband thought it was bed-bugs until I explained and enrolled him as a fellow-scratcher. Neither baths nor ointment helped at all.

I began to suffer from flatulence, too – "winds of change" my husband called it. I'd

never had it before and I found it very upsetting in public.

Then came the flooding. Fourteen days non-stop at one time. Then a few weeks' respite followed by another ten days of it. I just never knew when the flooding would start and end.

To make matters worse, there were nose bleeds as well. The doctor didn't consider them serious, but I found them very weakening. Hankies and tissues proved useless, so I took to carrying a towel round with me. I'll never forget that day when I lunched at a restaurant with a friend. We were just going when the waiter came running after us waving this large, blood-stained towel. I'd left it on the chair. I nearly died of shame.

I felt miserable most of the time – low-spirited, irritable and out of tune with everybody. I even slammed down the receiver on the phone after an argument with my sister – something I'd never done in my life before.

I put on weight, too, and developed plump forearms and a bulging stomach. I tried exercises and diets, but without success. I felt so weary that everything was an effort. I was often too tired to put on my corset, let alone go out and face the world. Cancelled dates became a feature of my life.

Hot flushes – sometimes four or five a day – didn't help to encourage public appearances. Nor did the awful reddish marks that came on the side of my neck. They looked even worse when I powdered them over, and though I wore polo-necked jerseys, they didn't cover up the marks entirely.

And guess how long the whole wretched business dragged on for? Nearly three years. At first I told nobody, except my husband and my doctor, what I was going through. My two children, both in their 20s, remained in blissful ignorance, their only comments being, "The old girl's a bit snappy tonight", or "Gosh, Mum's getting a real maxi tum these days, isn't she?"

As time passed, I did open up a little. Curiosity got the better of me. I wondered if all women suffered as I did and I began to talk to any of my friends who were prepared to reveal personal details.

Some, it seems, escaped with hardly a scratch but others, I discovered, had even worse experiences than mine. Some suffered cardiac disturbances and complained of hearts thumping like tom-toms and flashes of light like Blackpool illuminations before their eyes. Some went all "weepy" and couldn't stop crying. Several couldn't tolerate sexual intercourse any more. One woman kept sweating and another used to develop hot flushes daily for over five years.

Strange mysteries of Nature! What did animals do, I wondered, until I learned that they don't outlive their reproductive powers in the same way. It seems a uniquely human female affliction. Now, at 49, I'm just beginning to feel my normal self again, but relief brings with it two major regrets.

First, I regret that I kept so quiet about it and suffered so much and so long in silence. I felt almost guilty about the whole thing. I am sure you wouldn't find men enduring such private little hells of prolonged misery: they'd soon stop treating it as a secret, and get it publicly recognised and organised.

Secondly, I regret that no professional help was forthcoming. Modern science appears to have by-passed the menopause, leaving it

shrouded in mists of Victorian reticence and almost mediaeval mystery. I do feel that we should campaign for research and reforms, therapy and treatment, and that we should declare war on all doctors who dismiss it as "nothing" and who cannot even spare a word of sympathy for women who are passing through this incredibly unpleasant and frightening experience.

Lydia: I can't think why Kate had such a dreadful "change". I was told that widows and nuns sometimes had a bad time of it, but I thought that married women with sound constitutions and sunny natures usually managed better. It just shows how unpredictable it is and how small a part heredity seems to play in the event.

I'm happy to say that I had an almost painless menopause. Mine began at 44, two years earlier than Kate's, and it first showed itself when I had a period lasting over six days. (My normal ones lasted between three and four days.) Then it came on again unexpectedly after a fortnight.

This was rather a nuisance as we were at the seaside at the time and the "curse", as we called it then, stopped me from swimming. I also ran out of "curse-rags". There were no supermarkets in those days and the local chemist's was shut on that particular afternoon. I vividly recall my efforts at a home-made sanitary towel, achieved by sewing a handkerchief round a wad of cotton-wool. That's the only problem I remember connected with my menopause!

After that the "curse" didn't come again for another two months. Then just a trickle three months later – and that was the end of it all.

I must confess that my varicose veins got slightly worse that year – one more grape was added to that unsightly little bunch of grapes just below the back of my right knee. But this did not worry me unduly.

I also acquired two more wrinkles to expand the crow's feet near my eyes. But these would probably have come anyway.

I didn't feel depressed and I didn't put on weight. And after it was all over my husband and I found it a great joy to have intercourse with no risk of childbearing. People told me that, at 45, I looked more youthful than ever, and my doctor said that some post-climacteric women did take on a new lease of life and enjoy renewed energy and vigour.

I suppose I was just one of the lucky ones. I remember a friend of mine felt rather bad about hers and went into a nursing-home for it. I don't think women do this nowadays.

But I've been most concerned over my daughter's troubles, and Kate's unhappy experience prompts me to offer two pieces of advice to women: (1) Hang on to your husbands! An understanding partner like Kate's is worth his weight in gold at those times, when women need especially to be cherished and comforted. (2) Nag your doctors: I agree with Kate that something ought to be done – and soon. Kate, like me, is "just a housewife", but what happens to women who work outside the home, particularly those with heavy responsibilities involving important decisions and professional relationships?

If Women's Lib means anything at all, then its programme should include plans to solve the mysteries of the menopause, to rescue thousands of suffering middle-aged women and, in short, to change the "change". □

# you

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