

ABOUT MENOPAUSE AND VASOMOTOR SYMPTOMS (VMS)

What is menopause?

Menopause is a natural occurrence within the reproductive cycle for women and is diagnosed after menstrual periods have stopped for one year, on average around the age of 51 (ranging from age 45 – 55).^{1,2} The menopause transition refers to the span of time when menstrual cycle and hormonal changes occur, beginning with variation in the length of the menstrual cycle and ending with the final menstrual period.¹ Post-menopause is the time after the final menstrual period.¹

During the menopausal transition, experiences can range widely.³ Some women may have mild or no symptoms while others may have severe symptoms.³



What are vasomotor symptoms (VMS) due to menopause?

Vasomotor symptoms are also known as hot flashes and night sweats are the most commonly reported symptoms of the menopausal transition.¹ Hot flashes are intense heat sensations that come on suddenly (usually in the face, neck and chest) and can last 1-5 minutes.¹ A hot flash may also be accompanied by sweating, chills, anxiety and heart palpitations.¹ Night sweats are hot flashes that occur during sleep.¹

VMS are the most common symptoms of menopause for which women seek treatment.^{1,17} VMS can last for a median of 7.4 years – and, in some cases, for 10 years or more.^{8,16}

On average, women may experience 17 hot flashes and 11 night sweats per week, but actual frequency varies widely, with some women experiencing up to 20 hot flashes a day.^{4,5}

What's the science behind VMS?

The hypothalamus acts as the body's internal thermostat and regulates temperature.¹ In the hypothalamus, there are certain neurons (KNDy neurons) which play an important role in temperature control.⁶ To keep this internal thermostat in check, the body needs a balance between the hormone estrogen and a brain chemical called neurokinin B (NKB).⁶

During the menopause transition, this balance becomes disrupted.⁶ When this occurs, KNDy neurons increase signaling to the thermoregulatory center in the hypothalamus telling your body you're hot when you're not.⁶ In response, the hypothalamus triggers hot flashes and night sweats to cool the body down.⁶

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Who might be impacted by VMS?

By 2025 an estimated 21 million women in the US will have experienced VMS.¹ The severity, frequency and duration of VMS can vary widely among women in the menopausal transition.³

African American women are disproportionately impacted by VMS and can experience symptoms for a longer duration of time than white women - up to 2 to 4 years longer, specifically.^{7,8} Similarly, Hispanic women also have a higher incidence of VMS than white women, while Japanese and Chinese women have a lower incidence.⁷ Some studies have reported diets high in sugar and fat may increase the risk of VMS (vasomotor symptoms) associated with menopause.¹

DURATION OF VMS BY ETHNICITY⁸

Japanese	4.8 years
Chinese	5.4 years
Caucasian	6.5 years
Latina or Hispanic	8.9 years
Black	10.1 years

How might VMS impact daily activities?

For some women, VMS can be quite bothersome and very disruptive to daily life.⁹ Hot flashes are categorized by severity.¹ Women with frequent moderate to severe VMS report effects on their sleep, mood, concentration, work productivity and relationships, among other things.⁹ There is also psychosocial impact as a result of VMS, with some women reporting increases in irritability, anxiety, fatigue, social embarrassment and isolation, especially when becoming flushed or sweating profusely in social or work-related situations.⁹

Approximately 82% of women who have experienced menopause report that VMS negatively impacts sleep,

HOT FLASH SEVERITY¹

Mild	Sensation of heat without sweating
Moderate	Sensation of heat with sweating, but able to continue current activity
Severe	Sensation of intense heat with sweating that interferes with continuation of activity

and many women report an inability to focus and function the next day.^{9,15} Night sweats can drench bedding which may necessitate waking up to change the sheets and change pajamas in the middle of the night; these inconveniences can disturb healthy sleep for both the person experiencing it and their partner.⁹

How are VMS managed?

Despite how disruptive vasomotor symptoms can be, there is often reticence to openly discuss them due to embarrassment or religious or cultural norms.¹⁰ Additionally, some people believe nothing can be done about them, and that they are a natural part of aging that must be accepted.¹⁰ These stigmas can be a barrier to discussion with a health care provider and hinder women from seeking help for menopausal symptoms.¹⁰

Yet, there are many lifestyle-related adjustments women can make to help manage VMS, including dressing in layers, weight management, and smoking cessation.^{1,11}

Hormone therapy (HT) is the standard of care for VMS but has declined in usage.^{12,14} Since HT is not an appropriate option for all individuals, practitioners and patients may seek other treatment options.^{13,14}

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