



BY CARY BARBOR

Not Your Mother's Menopause

EARLIER GENERATIONS SUFFERED THROUGH IT IN SILENCE. THOSE DAYS ARE GONE!

Many of our mothers didn't dare speak even to their doctors about "the change." Today, information on hot flashes and night sweats flows freely from the press, and it's a relief—even an amusement—to share our experiences of menopause, insomnia and other side

effects with friends. *More* asked two experts to have a talk about menopause—and let us listen in.

MORE What was your mother's menopause like?

HUTCHERSON My mother's generation did not speak the word.

MOORE The few times my mother broached the subject, she called it the change of life. She wouldn't even utter the word to me, and I was already a full-fledged doctor when she was going through menopause. She would ask me for help with her symptoms without ever saying it. Today, the women I speak with are quite open and well-informed. The word is on the covers of magazines, it's on TV and in ads; it's everywhere.

HUTCHERSON This openness is emblematic of how women in midlife handle other life events now too. We educate ourselves and are empowered by knowledge, we share experiences with our peers, and we make our choices.

MORE Some women even talk about menopause as a rebirth. Do you agree?

HUTCHERSON Oh, I agree. It is a rebirth. You finally wake up and say, I've spent my entire life taking care of everybody else. Now, it's time to focus on me. Also, we are more confident. We know what we want and don't mind asking for it. My patients who are in their fifties have said that even though going through this transition can be difficult at times, it's still better than being in their forties.

MOORE Many women I talk to get what Margaret Mead called the postmenopausal zest. As Lauren Hutton put it, "The blood is no longer going down, so it's going up to your brain," which is not biologically correct, but metaphorically it's pretty accurate.

MORE But do you find there can be a sadness about the finality of it, particularly for women who never had children?

HUTCHERSON I do find that with

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Hilda HUTCHERSON, MD, 52, is an ob-gyn and a professor of clinical obstetrics and gynecology at Columbia College of Physicians and Surgeons in New York.



Donnica MOORE, MD, 44, is a women's health expert and advocate, and founder and president of Sapphire Women's Health Group, a multimedia women's health education and communications firm.

patients, as well as friends, who did not have children. Often their reason for not having children was not finding the right partner.

MOORE The perfect guy never came along.

HUTCHERSON So take Mr. Almost Perfect! My best friend fits this picture—she's single now and really regrets it and has gone through menopause. When she met my husband, she said, "How in the world could you fall in love with a man who wears polyester pants?" I said, "Honey, I can buy him different pants." She's looking for perfection and, of course, not finding it.

But once your period stops coming, reality sets in. And it can be very depressing for women, except for the ones who decided years ago that they didn't want a baby. Women can do technological stuff now and get somebody else's eggs

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The Conversation

NOT MOM'S MENOPAUSE

and have a baby. But eventually, the realization that motherhood is not going to happen comes along. I have four children, and when my menopausal symptoms started, even I felt a sense of sadness. It's the finality of it.

MOORE Do women have realistic expectations about menopause?

HUTCHERSON My patients say they've read scary stuff about it, and then it's not as bad as they thought it would be.

MOORE About one in three women have no symptoms that interrupt their quality of life. So a significant number of us sail through.

MOORE But for those who do have pesky symptoms?

MOORE Well, each hot flash usually lasts a few seconds—up to about a minute. But a minute can be a long time when you're acutely uncomfortable. Labor pains last less than a minute too. Eighty percent of women have hot flashes that resolve in five years.

HUTCHERSON Though I have heard of them lasting as long as 20 years. [Gasps, followed by laughter]

MOORE Symptoms vary among women, and vary by the day or moment.

HUTCHERSON Some symptoms are intense enough to need medical treatment. Others can be treated with home remedies, such as ice packs.

MOORE There are women who get symptoms so intensely that they say to me, "I cannot live like this." For them, luckily, there are now many options—estrogenic or nonestrogenic medications, and acupuncture, soy products, and more.

MOORE How do you handle yourself in public while having a hot flash?

HUTCHERSON Most people don't

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notice unless you lose your cool. If you just take it in stride—remove your jacket or find a tissue and blot your forehead, nobody really notices. But if you huff and puff and start to panic then people will notice. And most people aren't going to say anything—especially men. Men are going to turn their heads. They get kind of embarrassed by it.

MOORE Women have been uncomfortable until recently. But I've been in meetings where men have said they can tell whenever a woman is in menopause.

HUTCHERSON Oh, they also say they can tell when a woman is about to have her period.

MOORE They can tell everything.

HUTCHERSON But I tell men that the number one thing they need to know about menopause is that jokes about it can be hazardous to your health. Menopause causes an increased fracture rate in men.

MOORE We're allowed to joke about it; you're not.

MOORE Right. It's one of those kinds of things.

MOORE To talk a bit more personally, Dr. Hutcherson, you're in menopause, and Dr. Moore, you're starting perimenopause. So how is it going?

HUTCHERSON I feel very good. I ex-

pected to have a lot of hot flashes and night sweats and not be able to sleep and be depressed—all the things my patients complain about. I get some hot flashes but I just ignore them. I say, okay, this is only going to last a little while. I take a few deep breaths and keep going.

Most people don't notice that you're having a hot flash unless you lose your cool. Just take it in stride—remove your jacket or find a tissue and blot your forehead. Nobody really notices.

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Once in a while I'll have a hot flash in a meeting and I will blot my forehead and it's done. The bottom line is, I really don't care at this point whether somebody sees me have a hot flash or not. I don't care what they think.

MOORE I feel the same way.

HUTCHERSON I've alive, I'm healthy and this hot flash is going to pass. Attitude helps me a lot. Sure, sometimes at night I'll wake up and I'll throw the covers off and a few minutes later I'm cold and I'll put the covers back on. But I just keep going. And I'm happy, because I know that there are women who really do suffer. I've treated some of them.

MOORE Are you experiencing the increased energy that people talk about?

HUTCHERSON Hell, no.

MOORE I'm sorry. Did you miss the part where she's an ob/gyn with four children? Did you miss that part of the conversation?

[Laughter]



HUTCHERSON There are some nights when I have to stay up late, because I'm writing a book and have so many jobs. And I'm exhausted. When I was in my thirties I could stay up all night and work into the afternoon the next day and be fine. I don't have that same energy. I work out with my trainer twice a week and try to get in some aerobics at least another couple of times a week so I don't fall apart and can get through my very, very busy day. But I haven't had a big energy boost. No.

MOORE I am not worried about menopausal symptoms. For one thing, my mother had hardly any. But I'm also not afraid to get treated if I have bothersome ones.

MORE What about mood swings?

HUTCHERSON Mood changes lean towards depression for women who have them. Most women don't get an increase in mood swings with menopause, but I've seen more depression than anger. Women just feel low.

MOORE Depression is not associated with menopause except in women who have had previous depression, previous severe PMS or some kind of negative major negative life event simultaneous with menopause. Also, I think some of the low feeling stems from sleep deprivation.

HUTCHERSON Definitely. Another life stressor that happens at this time is relationship issues. This may be the first time a woman steps back from a long relationship and realize that there is something wrong here. That often happens around menopause.

MORE One of the downsides of being a patient these days is that there is so much confusing, contradictory information out there.

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MOORE I like to quote Mark Twain, who said, "Be careful about reading health books. You may die of a misprint." It's very important not to base decisions on the study du jour. The findings may not apply to you. For example, in the Women's Health Initiative study that showed an increase in breast cancer among women taking hormones, the average age at which the women had begun taking the hormones was 51, which is much older than many of the women who were on hormone therapy who panicked.

HUTCHERSON There are many half-truths floating around. The best way to get at what's best for you is to talk to your own doctor. Everyone is different. Your doctor knows you and knows your history. Every woman with breast cancer, for instance, now thinks she can never use estrogen products again; that may not be the case.

MOORE I agree. Your health care provider knows best. Everything else is background. Also, women should always write a list of questions for the doctor. We have no problem bringing a list to the grocery store—why won't we bring one to the doctor's office? Prioritize the questions in case time is limited, but absolutely bring them,

and ask them.

Some women see more than one doctor—an internist and a gynecologist, let's say—and get conflicting advice from the two. It's okay to speak up about that. Say, "My other doctor told me something different; would you mind calling

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her and discussing it?" Doctors are bound to know the most information about their specialty and less about other fields. Your gynecologist may know more about hormones, for instance.

HUTCHERSON Yes, get your doctors talking to each other. That's part of their job.

MORE What about sex during menopause?

MOORE This generation of women has dashed the myth that menopause is end of your sexuality.

HUTCHERSON Yes, there's a huge difference between the generations. In my mother's day, women weren't talking about sex, and no one would admit to masturbating. Today, women are having sex-toy parties.

MOORE And this openness is a boon in many ways. Studies have shown that the number one factor in a healthy sex life is good communication with one's partner. And the number one barrier is a lack of communication.



The Conversation

NOT MOM'S MENOPAUSE

HUTCHERSON Yes, but as men age they may start to have problems with erectile dysfunction or what have you. And when men have trouble, they may not want to talk about it. They may withdraw. Then women may start to take it personally: I'm not attractive enough; he doesn't want to have sex with me. Meanwhile, the women themselves may be running into issues—vaginal dryness may make sex painful, or they begin to have less intense orgasms, and are getting—understandably—angry about that. It's really unfair: We need our orgasms! But for some women sex after menopause is better. They're not worried about getting pregnant anymore. The kids are out of the house. There's more time and opportunity. And we have treatments if you lose desire—we can do something about that most of the time.

MOORE Lots of sex—with or without a partner—is a great treatment for vaginal dryness! It also helps headaches, depression, arthritis, cramps. It's great aerobic exercise—good for flexibility and circulation...

HUTCHERSON ... great for sleep problems...

MOORE So it's worth pursuing and keeping up with—with or without a partner.

MOORE Menopause seems to be a real boon for marketers. What do you think about these menopausal products—wicking pajamas, the Chillow, and so forth?

MOORE These people wouldn't be in business if women weren't buying these products. And I'd like to think that consumers are benefiting from them. I'm all in favor of capitalism. Having said that, though, wicking pajamas are the

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same thing as high-performance athletic training wear. So it's not as if somebody invented a new material just for menopausal women. They just put a cute name on it. I'm personally in favor of sleeping in the nude, which has the same benefit and is far less expensive.

MOORE And your husband probably appreciates it.

[Laughter]

MOORE What about herbal treatments for symptoms?

MOORE I put things like wicking pajamas in a whole different category from herbs.

HUTCHERSON I wouldn't suggest women just go out and buy a herb without speaking to their doctor, because herbs are medicine.

MOORE If something is strong enough to have an effect, it's strong enough to have a side effect. And when you buy herbal preparations, you may be buying seven different products. So with many herbal products you may be double- or triple-dosing. Estroven, for example, which is the most commonly sold herbal product for menopause, is not one ingredient. Its main ingredient, though, is black cohosh, and while either product may work for many women, I'm concerned about people who are taking both Estroven and black co-

hosh. You're getting a double dose.

If it works for you, most doctors are going to say that's great. I don't fix things that aren't broken. Starting with an herbal preparation for hot flashes, especially for women who have mild to moderate hot flashes, is a reasonable approach.

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HUTCHERSON With direction from a professional...

MOORE Exactly. Talk with your doctor, and it needs to be in your medical record. But I never argue with somebody who tells me that something works for her. Can I prove whether it's a biological effect or a placebo effect? No. Do I care? No.

MOORE Considering all we know and don't know about menopause, what's on the horizon in terms of research?

MOORE We know plenty about this topic, but we always wish we knew more. I would like to see more work on estrogen and cardiovascular health—maybe looking into genetic variations and genetic testing, finding women who are at highest risk. This research would have huge implications.

HUTCHERSON Sex! We always need to know more about sex—more research on women and sexual pleasure. We need good orgasms through every stage of life. **M**