

Menopause symptoms and breast cancer

The menopause is a natural part of ageing that usually occurs between 45 and 55 years of age, as a person's oestrogen level declines. Some treatments for breast cancer can cause an earlier menopause and/or significant menopause symptoms.

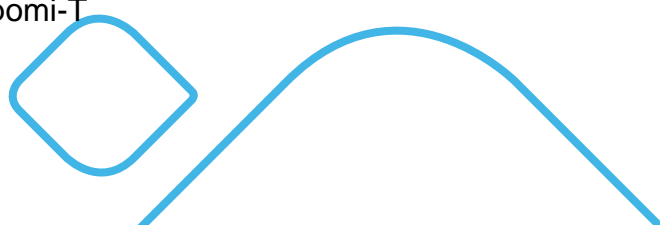
Some breast cancers (known as oestrogen receptor or ER positive breast cancers) are stimulated to grow by the hormone oestrogen. Several breast cancer treatments reduce levels or block the action of oestrogen, which in turn can cause menopausal symptoms.

People having chemotherapy may have an earlier, more sudden menopause, regardless of the type of breast cancer they have. Symptoms are often more intense than when the menopause occurs naturally. This is also the case for those having their ovaries removed with surgery or suppressed with hormone drugs such as Zoladex or for those advised to stop taking hormone replacement therapy.

Coping with menopause symptoms

Hot flushes and sweats: (You may notice your own trigger factors amongst the following examples)

- Wear cool layers of clothing. Avoid tight fitting and synthetic clothes.
- Use a fan to keep cool or cooling sprays or wipes.
- Drink cool fluids and keep well hydrated to avoid headaches.
- Avoid spicy foods, alcohol, caffeine and smoking.
- Try to give yourself plenty of time to complete tasks so that you are not feeling pressurised or anxious.
- Avoid /be aware of the effects of changes in temperature such as hot baths, hot rooms, hot drinks and hairdryers.
- Try complementary therapies such as acupuncture, yoga or herbal remedy sage tablets
- Vitamin E taken with Omega 3, pollen extract or pome-T



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- We advise good weight management, as obesity can increase hot flushes/sweats.

If you are struggling to cope with hot flushes and sweats and cannot use hormone replacement therapy (HRT), see your GP, who may consider suitable medication for your symptoms after consulting the British Menopause Society guidelines and/or refer you to the RUH Oncology Menopause service(see below).

These drugs can take up to 6 weeks to improve symptoms, so try to persist with taking them. Certainly, if symptoms have not improved after this time they are unlikely to help. However, it is worth having a review by your doctor to try another short course of a different drug.

We advise caution with some antidepressants if you are taking Tamoxifen, for example Paroxetine, Fluoxetine, Sertraline and vitamin E with Omega 3, may interact, so **do not take these without discussing with your GP or pharmacist first.**

Palpitations

This is an awareness of your heart pumping faster or harder than usual. It can be unpleasant and you may worry that there is something wrong with your heart.

They can happen during a hot flush or after having caffeine, alcohol or smoking. You may be aware of them during an anxiety attack and dealing with an underlying concern may help the symptoms.

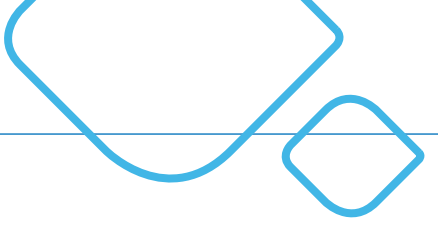
Palpitations are not usually a sign that anything is wrong but it is worth getting them checked out by your GP to be sure.

Difficulty sleeping

- Try to develop a good sleeping pattern.
- Avoid screen time close to bed such as TV, laptops, phone and iPad.
- Wear clothing and use bedlinen designed to absorb moisture.
- Specialist bedding items with a cooling effect, for example, pillows, sheets, mattress covers/toppers and low tog duvets are available in most large department stores and on line.
- Turn off radiators and sleep with open windows.
- Fans at bedside
- Read/listen to relaxing music
- Breathing and relaxation exercises
- Cognitive behavioural techniques (CBT) via an app, such as SLEEP-IO or self-refer on NHS website
- Taking magnesium glycinate can improve sleep

Mood changes/irritability and memory lapses (“brain fog”)

- Relaxation classes, mindfulness, Yoga, Tai Chi, CBT

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- Physical exercise and change of diet
 - Counselling service/talk to your doctor or Breast Clinical Nurse Specialist (BCNS) if you suspect depression
 - Seek help with relationship, financial or work issues.
 - Change how you remember things-use of electronic reminders or write things down.
 - Keep the brain active with crosswords, word searches, Sudoku and puzzles.
 - Look after your gut microbiome by eating a mixed Mediterranean style diet with plenty of plant based foods, fermented foods and Kefir.

Joint aches and pain

- Maintain a healthy weight.
- Regular weight bearing exercise such as walking will help maintain bone density.
- Pilates or yoga can help with joint aches
- Maintain good levels of calcium (you can check if you are having enough in your diet through the Royal Osteoporosis Society on line calculator) and vitamin D (800 – 1000 iu daily).
- Take simple regular pain relief, for example, paracetamol.
- Discuss with your hospital doctor or BCNS about switching to a different anti oestrogen therapy or having a treatment holiday to see if symptoms improve.

Skin changes and hair loss

- Seek medical advice if you see patches of hair loss or baldness due to menopause.
- Use body moisturisers if skin is dry and high factor sun cream.
- Consult your optician or GP if dry eyes develop.
- Some women report an itching or strange sensation of crawling on the skin.
- Skin can become oily, acne prone or facial hair may develop.
- Take vitamin D, as low levels can cause hair thinning

Vaginal dryness and painful sex

- Use non -oestrogen vaginal moisturisers every 1-3 days (**e.g. Replens, Sylk or Yes, available at local pharmacy**) to lessen discomfort and promote natural ‘good’ vaginal bacteria which reduces risk of developing thrush and urinary tract infections.
- Use an emollient cream (e.g. E45,Diprobase,Cetraben) to clean the vulval area.
- If your skin is irritated, emollient cream can be kept in the fridge and dabbed on to cool and soothe the skin as often as needed.
- Wear loose fitting cotton underwear and avoid using fabric conditioner

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- **Use vaginal lubricants to make intercourse more comfortable, as they help reduce friction that can lead to pain (e.g. Sylk, Astroglide, Pjur, Yes, available at local pharmacy)**

Decreased sex drive

- Talk to your doctor or BCNS
- Make use of support groups
- Refer to a Sexual and Relationships therapist
- Vaginal lubricants/dilators/vibrators
- CBT

Contact details and resources

Breast Clinical Nurse Specialists at RUH 01225 824057 for a referral

Macmillan Combined Specialist Menopause/Oncology clinic – **RUH (NHS) refer via GP**

Dr Kate Kerr - Specialist Menopause Clinic (**private**) – Bath Clinic – contact secretary

Hannah Jennings- 07341 672072 or email:hannah@hjadmin.com

Dr Rebecca Bowen+ Dr Kate Kerr-Combined Oncology Menopause Clinic (**private**) Bath Clinic
- 01225 838865

Menopause Matters www.menopausematters.co.uk

The British Menopause Society www.thebms.org.uk

UK NICE Guidance 2015 www.nice.org.uk/guidance/ng23

Women's Health Concern (Menopause Wellness Hub) www.womens-health-concern.org

Breast Cancer Now breastcancernow.org

CBT—Myra Hunter and Melanie Smith "**Managing hot flushes and night sweats - A cognitive behavioural self-help guide to the menopause**, Routledge, 2013.

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If you would like this leaflet in email form, large print, braille or another language, please contact the Patient Support and Complaints team on 01225 825656.