



Preparing Women with HIV for Menopausal Transition

Oral Abstract Presentation

Christina Joosten Counsellor University Hospital, Ghent, Belgium

Counselling HIV+ people: History in 2 big jumps

- Counselling young people on how to cope with a fatal disease
- 2. Chronic disease: ageing , co-morbidities, therapy compliance are big issues







Menopause

Menopause facts

- No more follicles grow into mature egg cells
- Ovaries stop producing oestrogen
- Monthly cycles and menstruation stop
- WHEN is menopause starting? Just after the last menstruation

BUT

Pre-Menopause facts

- Several years before menopause, due to fluctuating female reproductive hormones there are early signs:
 - Migraine
 - Hot flashes
 - Night sweats
 - Irregular unpredictable menstruation
 - Mood swings
 - Problems with memory and cognitive functioning
 - Depression and anxiety

Menopause facts

- Protective effect of oestrogen ceases:
 - Stress resistance decreases
 - Skin, hair, nails lose flexibility
 - Body shape alters, body fat tends to accumulate in the belly region
 - Atrophy of the vaginal and urinary tract: infections, incontinence, changing body smell, painful intercourse
 - Decline in libido
 - Risk for Cardio Vascular Disease rises sharply
 - Bone Mineral Density decreases
 - Impact on mental health

Menopause for the HIV+ woman

- More frequent and more serious hot flashes and night sweats (= sleep deprivation)
- Co-morbidities ask for special attention
- Early menopausal Bone loss + medication induced bone loss ask for prevention and attentive follow up
- Mental issues + problems with memory + sleep disturbances can hamper activities in daily life and therapy compliance
- Changed self perception / self esteem can change relational and sexual functioning

How can we help these women cope?

- Be attentive to early signs
- Inform: Menopause is a natural ageing fase, not an HIVsymptom
- Most of the symptoms disappear within 2 years after menopause
- If possible: go for lifestyle adaptations and patience
- If necessary: go for Hormone Replacement Therapy

Lifestyle adaptations

- Stop smoking
- Stop drinking alcohol
- Avoid extra stress
- Eat more vegetables, legumes, fruit
- Eat less carbohydrates
- Walk daily
- BMI under 20 is an extra risk for osteoporosis
- Wear cotton at night
- Communicate with your partner

Eat less **Move more** Repeat

Dear colleagues,

Inform yourself, Ask your patients

Thank you