Menopause doesn’t have to be uncomfortable

Menopause, the end of a woman’s menstrual period, is a natural part of a woman’s aging process. Hormone levels fluctuate during this time, which can lead to symptoms throughout the body. Each woman may have different signs or symptoms during menopause as it affects every woman differently. Treatment during menopause is not necessary unless symptoms become bothersome, unmanageable or severe.

Located within the Sanford Women’s Health Plaza, the Sanford Women’s Center for Midlife Health focuses exclusively on care for women in the stages leading up to menopause, during and after menopause. Sanford has one of the only midlife health programs in the region, with a team of experts working closely with patients to ease the journey through menopause and midlife. Our physicians, nurse practitioners and certified nurse midwives offer each woman support and specialized, individualized information in areas including:

- Comprehensive wellness education
- Internal medicine
- Management of menopausal symptoms
- Well-woman gynecological care
- Sexual health and menopause
- Nutrition and menopause
- Introduction and midlife
- Genetics
- Mindfulness and sleep
- Bladder health and female pelvic prolapse
- Sexual health and menopause

Sanford Women’s Center for Midlife Health offers a six-session Menopause Care Series for women seeking menopause care and education. Covering questions, symptoms and life during and after menopause, sessions are led by medical professionals certified by the North American Menopause Society. Sessions take place on Tuesdays from 5:30 to 7 p.m. and focus on specific topics.

Menopause Care Series dates and topics:

- Nutrition and menopause
  January 17 and March 28
- Introduction and midlife
  January 24
- Genetics
  February 21 and June 27
- Mindfulness and sleep
  February 28
- Bladder health and female pelvic prolapse
  March 21 and May 23
- Sexual health and menopause
  April 18 and April 25

Cost is $10 per session or $45 for six sessions. Call (605) 328-7155 today to register.

For more information, visit sanfordhealth.org, keyword: midlife or call the Sanford Women’s Center for Midlife Health.

SANFORD OFFERS MENOPAUSE CARE SERIES

MANAGING STRESS DURING THE HOLIDAYS

It’s important to find a balance with everything going on.

The holidays can be a busy, stressful time. Make your to-do list a combination of getting things done, enjoying the holiday season, finding some moments to relax and creating family memories. When making your holiday to-do list, find out your family’s favorite holiday memories and make these things a priority in your holiday planning. Keep in mind that to enjoy the holidays you and your family members need to take care of yourselves. The main way to do this is to get your rest — don’t skimp on sleep to get things done as this will only add to everyone’s mental and physical stress. Here are some ideas for your holiday to-do list:

Recharge for energy

- Make it a priority to get a good night’s sleep.
- Take moments to breathe and stretch; especially when you feel tense.
- Relax by driving around to look at holiday lights with family or friends.

Fit a little movement into your day

- Make physical activity in your day doable; schedule in 10 minutes here and there of moving.
- Enjoy cooking or baking with family members and add some singing and dancing to music while in the kitchen.

Enjoy time together

- Have everyone join in the gift-wrapping. Every age can help. It’s not about the perfectly wrapped gift. It’s about the joy in giving the gift.
- Relax and watch a favorite family movie together.

Holiday stress comes from worrying about the future and what you should do versus what you are doing. Instead, this holiday season have a plan to fit in what matters most to you and your family and embrace the moments that make memories.

For more life balance tips, call the Sanford Mutch Women’s Center for Health Enrichment.
CAUSES OF ABNORMAL BLEEDING ARE DIVERSE
Patient, doctor work together to monitor bleeding

Abnormal uterine bleeding is a common indication for office and emergency department visits for women during their reproductive years and into menopause. Women who experience heavy uterine bleeding are likely to seek early medical attention. Women with light, irregular menses, or post-menopausal bleeding, however, may delay seeking medical evaluation. To rule out a potentially serious situation, it is important not to ignore this sign and to seek appropriate medical care.

Diagnostic evaluation and treatment are tailored to each patient. A detailed medical history will be taken at the initial evaluation, including personal and family history, menstrual cycle details and past or current episodes of abnormal bleeding. Common initial blood tests are a complete blood count, pregnancy test and hormone levels. Pelvic ultrasound, magnetic resonance imaging and computerized tomography are important imaging tools.

For patients at risk of uterine cancer or pre-cancer conditions, sampling of the lining of the uterine cavity, endometrial biopsy, is required.

Treatment of abnormal uterine bleeding depends on final diagnosis, and the patient’s age, future fertility desires and coexisting medical conditions. Multiple treatment options are available for patients with abnormal bleeding due to benign conditions. Hormones, including oral contraceptive pills, injectable contraceptives and medicated IUD, are the most effective pharmacological treatment.

Successful treatment requires a good relationship between patient and doctor with the ultimate goal of solving the problem with the least invasive treatment option, while addressing the patient’s needs and respecting their preferences.

CAUSES OF ABNORMAL UTERINE BLEEDING ARE DIVERSE AND INCLUDE:

- Bleeding disorders
- Cancers of the uterus, cervix or vagina
- Fibroids
- Infections of the uterus or cervix
- Polycystic ovarian syndrome
- Polyps
- Pregnancy and pregnancy abnormalities like miscarriage and ectopic pregnancy
- Side effects from intrauterine devices or birth control pills

SURGICAL OPTIONS MAY:

- Preserve the organ, but the treatment may be a contraindication for future pregnancy, such as with removal or elimination of the lining of the uterine cavity
- Remove the organ via hysterectomy
- Restore the pelvic anatomy with procedures such as fibroid removal

For more information or to schedule an appointment, call the Sanford Women’s Obstetrics and Gynecology Clinic.

IMPLICATIONS OF POLYCYSTIC OVARIAN SYNDROME ARE FAR-REACHING

Early diagnosis is important for all women of reproductive years

Polycystic ovarian syndrome (PCOS) is a hormone disorder found in an estimated 5 to 15 percent of reproductive-aged women. However, as it focuses on the appearance of the ovary, the term polycystic ovarian syndrome can be misleading.

The actual diagnosis is more inclusive and requires two of the following three criteria be met:

- Polycystic-appearing ovaries on ultrasound (more than 12 follicles, 2 to 8 mm in size, per ovary)
- Androgen excess (male hormones)
- Irregular cycles or amenorrhea
- Polycystic-appearing ovaries on ultrasound (more than 12 follicles, 2 to 8 mm in size, per ovary)

Women with PCOS frequently seek fertility care due to chronic menstrual cycles without ovulation. However, the implications of PCOS go far beyond fertility, and it is crucial that diagnosis is made early for all women of reproductive years, including adolescents.

Left untreated, women with PCOS are at increased risk of developing uterine cancer, diabetes, metabolic syndrome and heart disease.

Clinical indications of PCOS may include:

- Obesity, weight gain, insulin resistance, infertility, acne and increased hair growth in areas including the face, abdomen and inner thigh. Obstructive sleep apnea and mood disorders may also accompany the condition.
- Conditions like adrenal hyperplasia may mimic PCOS. A thorough medical history, examination and lab work help differentiate conditions and guide treatment options.

PCOS treatment depends on the patient’s symptoms and goals, as its cause is not well defined. Cornerstones of treatment are lifestyle modification and weight loss. In an overweight patient, even a weight loss of 5 percent may help restore normal menstrual cycles and improve hormonal balance.

Sanford Health Fertility & Reproductive Medicine Clinic is proud to offer a multidisciplinary clinic specifically for women with PCOS.

For more information or to schedule an appointment, call the Sanford Health Fertility & Reproductive Medicine Clinic.

IMPROVE OVERALL HEALTH WITH WEIGHT LOSS

Losing weight is risk-free and can greatly cut down stress incontinence

Obesity is a public health problem accounting for $100 billion in annual health care spending. Currently, more than half of American women are considered overweight, with a body mass index of 25 to 29, or obese, with a BMI of 30 or greater.

As a common parallel diagnosis, the rate of urinary incontinence rises along with obesity. With its prevalence increasing at a rate of 6 percent per year, many studies point obesity as an independent risk factor for pelvic floor disorders in general and stress urinary incontinence in particular.

Obesity increases intra-abdominal pressure, weakening pelvic floor musculature. Transmission of increased bladder pressure through the urethra results in leakage.

An increased BMI of 5 points is associated with a 20 to 70 percent increased risk for stress incontinence. Over a 10-year follow-up period, the odds of new onset stress incontinence increased by 7 to 12 percent for each point increase in BMI.

However, a recent large-scale study found a loss of 5 percent of body weight was associated with an average of a 50 percent reduction in stress incontinence.

Incontinence quality of life measures are markedly worse for obese patients. A number of effective options exist to treat stress incontinence and weight loss should be considered a first-line intervention. A number of other improved health outcomes may accompany decreased incontinence.

Always consider overall health and risks, but in losing weight there are no risks, no drugs, no surgery involved.

For more information or to schedule an appointment, call the Sanford Female Pelvic Medicine & Reconstructive Surgery Clinic.