

## Step 1 - Menopause Symptoms - 7 Dwarves - MP3-3 Audio Transcript

Hello again!

I'd like to start this section by telling you about a workshop I was speaking at and where the organiser, speaking to the audience, happened to say "**women have significant and different needs**". Wow! That really struck home!

Can you see that women's health in general and menopause in particular, really highlights this point? So, when you're having that conversation with male colleagues, managers, execs, senior partners, whoever and they say, '*so what? what's so special about women?*'; you can tell them that it's the whole reproductive element of women's biological make-up that sets them apart - this is their '*significant and different need*'; they're not asking for special treatment and, actually what women tell me is that they 'just want to get on with their jobs' and they could do that so much more easily if they knew there was information and support somewhere that they could log into, talk to someone who understood, etc. and I'm happy to repeat myself that never before in our history have employers been faced with a growing and ageing population and never before has the effects of menopause on women in the workplace been discussed - it does not appear on any health agenda, yet! (I'm working on that!) □

This one, single phrase is so very important, in my view, for the support and progress of women throughout their working lives: "*women have significant and different needs*".

*I'll leave that one with you to ponder and we'll move on...*

---

Now, let's have a laugh with Disney's Seven Dwarves - this image always raises a giggle - laughter is good for you! I'll just set them out for your here so that you can commit them to memory □

*Itchy, Bitchy, Sweaty, Sleepy, Bloated, Forgetful and... Psycho!*

### How would **YOU** feel?

Menopause symptoms can be  
a major source of distress



And, as I've said before, women recognise many of these symptoms on a regular or monthly basis but the closer you get to that magic age of 52, or twelve months without menstruation, the more intense the effects of the symptoms seem to be - I call it the *tsunami!* Everything coming together creates that feeling of being overwhelmed and unable to cope.

It's also worth remembering that women could be totally unaware of all this stuff happening... that all these symptoms now bunching up together can also be classified as '*hormonal anarchy!*' In reality they come under the label of peri-menopause. But, it's that lack of *awareness, understanding, recognition* that I'd like to highlight here and it's this '*ignorance*' that seems to create so many challenges in the workplace and at home.

I'd like you to spend a moment or two considering the implications of not knowing about the true extent of hormonal anarchy. The effect it can have on productivity; think disciplinary procedures (we'll cover this more later but I'd like to sow the seed, now, to get you thinking) - what often seems to be quoted is 'lack of concentration and increased absenteeism' and generally in the same sentence.

Women may well recognise the flushing and sweating and those other symptoms highlighted in the Disney cartoon but they have absolutely NO IDEA that 'the change' is having such a profound effect on them, biologically *and* emotionally. It came as a huge surprise to me, too and, now I've got to the bottom of all this, I know how easy it is for the wheels to fall off and not realise how low the stocks are on the WD40!

And now, I not only want to share this information with you but I also want to highlight the fact that from hereon in, women, as they age, will undoubtedly start making a trip or two to see their doctor to address individual ill-health problems that may crop up from time to time when they are post-menopause; like **Type 2 Diabetes**, for instance (very common for 50+ women - more about this later), **osteoporosis** (oestrogen deficiency at menopause is the cause here - 20% bone density lost during menopause and around 2% per annum after that) and, the classic, **cardio-vascular disease** (stroke and vascular problems, also caused by oestrogen deficiency). You see, these wretched hormones have a lot to answer for!

Just think of the *advantages* this knowledge gives women; knowing their hormones have something to do with degenerative disease, they can take preventative action sooner, rather than later, with opportunities all over the place, including taking a look at current lifestyle. I cover **degenerative diseases** later in the course as well as lifestyle information; so, make a mental note of the importance of recognising this, to prepare you for that conversation.

For now, though, let's have a look at the Symptom sheet... you can see I've separated the symptoms into 'physical' and then 'emotional/behavioural' but more than that, I have now made some connections, as you will see on the transcript and which I will talk about now...

OK - let's start with the 'Emotional/Behavioural' section where there seem to be, in my view, more connections.

Let's first look at **Mood Fluctuations**... As a sub-heading, I would incorporate:  
*anxiety, depression (hormonal), tearfulness, anger, hostility, aggression and... irritability*

Before we analyse this, let's bring in some other symptoms and look at:

### **Poor Coping Skills plus Feeling Overwhelmed and Out of Control...**

Would you agree with me that the blame for the symptoms above, can be put fairly and squarely, at the door of the following?

*insomnia, short term memory loss, lethargy*

Thank you for agreeing! And let's just pinch the symptom '**fatigue**' from the Physical list, plus I think we'll throw in, for good measure, a dash of **forgetfulness** and let's not forget **stuttering** (also pinched from the Physical list).

What else, oh, yes, **poor concentration** and even **panic attacks** fit in here, too. Are you ready to stick your neck out and say what you think is the root cause? Go on, I dare you! You're not going to be wrong on this one, not with what you already now know. Yes, it's hormones!

A lot of these symptoms have a profound effect on women working through menopause and I'll cover it more in the section on Menopause at Work but hopefully you're beginning to see where I'm going with this.

Let's look further: on the Physical list, we've also got '**rise in cholesterol**' and this can be linked to '**weight gain**' which often results in **Type 2 Diabetes**. Why is this happening? Why at menopause? It happens because metabolism starts to slow down. No eggs, means no babies, means no requirement for a lot of energy and activity. The metabolism slows down, women don't need so much food as it takes longer to digest but they will need **more protein** as they age. What is also happening is that the cell structure is also changing - instead of cells readily accepting food and converting it to energy, the cells now have a huge desire to store the food as **FAT!**

Imagine for a moment how this revelation will affect women in active jobs where they are required to maintain high fitness levels, such as the police, fire & rescue service, etc. but don't think for one moment that this won't affect other women - it affects all women! And, this takes us back to that phrase, 'women have significant and different needs' - especially at menopause and I know from experience and talking to many FitPro's that 'working out' down the gym for hours, sweating your socks off, does not generally result in a fit and healthy body - it can have the opposite effect.

It's time to factor in a chat with a FitPro who understands this and can create a programme especially for you. Take note!

We have now covered most of the **Emotional/Behavioural** symptoms, most of them are now self-explanatory and we've covered some of the **Physical** symptoms but I think it's worth mentioning **under and over-active thyroid**. This is a very common situation when it comes round to menopause. This condition shares many similar symptoms with peri-menopause and also takes about ten years to reach a stage where you take yourself off to the doctor for a diagnosis, so, I'm really just flagging this up as another consideration when talking about age-groups and peri-menopause.

What else - oh, yes, **headaches and migraine**. This condition often raises its ugly head at peri-menopause. The causes are many and varied. Two that I'm familiar with are hormones(!)

and psychosomatic. What do I mean by the latter? Well, generally, it means that there is something going on in your life that you are not completely happy about - it may be a job, a relationship, where you live, the car you drive, anything but there's a trigger, a switch, that clicks on when one of these things is really bothering you and hey-presto! a headache or migraine.

It used to happen to me and I could always rely on one of my 'bad head' situations lasting up to 72hrs, until I sussed out the cause. Once I knew my 'trigger', I was headache free for months. It still happens now and again but at least I now know the reason. I can't always control it but I know I'm going to feel out of things for a couple of days and to take action accordingly - lighter duties, for instance.

Many experts will tell you that headaches generally have an emotional source - the trick is working out what is the trigger or switch that causes your headache or those of your colleagues and staff.

I think the rest of the symptoms are self-explanatory and I'll come up with some solutions towards the end of this course.

Don't forget to make some notes about your own thoughts on this section, ready for the Q&A later on.

I recommend you keep a copy of the Symptoms sheet ready on your computer to ping off to colleagues and keep a copy in your drawer for when you are having a 1:1 conversation, perhaps in an assessment, along with **Traffic Lights** which I shall speak about next. Both Symptoms and Traffic Lights should be considered as vital tools in your Menopause Tool Box.