

MODULE SIX – AUDIO RECORDING TRANSCRIPT

DEPRESSION IN MID-LIFE WOMEN

Mental Health? Or Menopause?

Let's take a look.

By building on the information you already have on this subject and the huge importance it holds for me, knowing that women are poorly informed, I think you'll appreciate this recording. Let's just go over what we already know:

- Depression is twice as common in women than men, and occurs at times of hormonal fluctuation, including in the menopausal transition (Professor John Studd, Consultant Gynaecologist)
- Many women experience 'hormonal depression' as opposed to mental health depression during menopause
- Stress and anxiety are also exacerbated at menopause
- It is recommended that doctors DO NOT prescribe anti-depressants for women going through menopause (NICE Guidelines)

And, here is a bit about me plus some further information for you to consider, all of which will help you make your own decisions.

Having been diagnosed with mental health depression myself during mid-life and it was several years before I was introduced to the fact that such a thing as 'hormonal depression' exists, especially as there is a much simpler treatment path for hormonal depression.

It is also unfortunate that the very people that we go to for help are also poorly informed on this subject. I'm talking about GP's, of course. Your doctor will more often than not present a diagnosis of mental health depression. If this is happening to you or has already happened to you and you'd like a second opinion, or at the very least, have your doctor believe what you are saying is true, give them the link to Professor Studd's paper, as set out below.

I had no idea that I was going through menopause (peri-menopause) at the time. That experience of a mis-diagnosis took years from my life and untold misery for my husband and kids.

This is what happened: I was diagnosed with depression; referred to a psychiatrist (a scary time, especially as I didn't discuss any of this with my husband – I didn't know how to). I was offered anti-depressants which, once I'd been told would take two or three years to come off them, I

declined. Was he experimenting on me? It's also worth noting that at no time during the consultation with the psychiatrist did he suggest that my hormones may have something to do with it.

Anyway, I declined the anti-depressants and asked what else was on offer and was told about a talking therapy called CBT – cognitive behavioural therapy. I had no idea what this was about either but went with the flow and found it to be both useful and distressing. However, it wasn't until I was voted onto the Medical Advisory Committee of The British Menopause Society (BMS) where I sat alongside top consultants in every 'ology' you can name (many specialists recognise the connection with menopause: heart health, for instance). This re-affirmed my own views that we should treat menopause from a holistic perspective. In other words, understand menopause from both a physiological and psychological perspective. These wretched hormones are very powerful and take you on such a roller coaster ride.

Interestingly, at this time, I also self-diagnosed with bi-polar syndrome. This is a serious mental health issue; it was difficult for me to understand, I couldn't explain it to myself, but I felt it was 'transitional' as opposed to a long-term illness (bi-polar is considered a long-term illness). Imagine my surprise and appreciation after I had discussed this with Prof John Studd, whilst interviewing him, as he confirmed that this situation is quite normal in women going through menopause! See his blog on the subject here: <http://www.studd.co.uk/depression.php> Show this to your doctor.

In the NICE Guidelines on Menopause, published in October 2016 they quite clearly recommend to doctors that they DO NOT prescribe anti-depressants for women going through menopause. Unfortunately, they have not heeded this advice and continue to prescribe. I write this for your own awareness. Please wake up to the fact that women have options!

In my quest to acquire a deeper understanding of depression at menopause, I set out to find supporting research. Click on any of the links. They are all unanimous in their agreement that women are twice as likely to experience anxiety and depression throughout their working (and reproductive) lives. It's cyclical! My own conclusion to all this data is that depression in women is more likely to be hormonal than mental health related and Prof Studd very kindly bears this out for me.

And now, you are better informed on this subject and should feel more confident when discussing with your GP (or your employer). Don't allow them to convince you otherwise. Be happy in the knowledge that you know your own body better than anyone and you know how your monthly cycle behaves and even though this cycle is all over the place as you transition menopause, once you pin down the symptoms that you are about to menstruate (even if it doesn't), from the information in this recording and everything else you have learned on the How to Survive journey, you are better informed and can now make better decisions to improve life.

Don't continue to suffer in silence!

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making sense of menopause

To close this section, here is the research I spoke about earlier – gender differences also get a mention.

- <https://www.mentalhealth.org.uk/statistics/mental-health-statistics-men-and-women>
- <https://www.psychologytoday.com/blog/hide-and-peek/201205/the-7-reasons-why-depression-is-more-common-in-women>
- <https://www.health.harvard.edu/womens-health/women-and-depression>
- http://www.who.int/mental_health/prevention/genderwomen/en/



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