



About perimenopause and menopause



Everyone will experience perimenopause and menopause differently.

Perimenopause

Perimenopause is the time leading up to and just after your final period (menopause). It can begin years before your final period.

Perimenopause often starts in your 40s, but can start earlier or later. On average, perimenopause will last for 4 to 6 years, but everyone is different and it can last between 2 to 10 years.

During perimenopause the levels of oestrogen and progesterone, which are hormones produced by your ovaries, begin to fluctuate (change). This causes your periods to change (become irregular, heavier or lighter), and many people start experiencing symptoms.

Many women say they feel confused, uncertain and not like themselves during perimenopause.

Menopause

Menopause is a point in time – your final period. You know you've reached menopause when you have not had a period for 12 months, with no other medical reason for it.

Your periods stop because your ovaries have stopped releasing eggs and producing the hormones oestrogen and progesterone.

The average age of menopause is 51, but it is typical for menopause to occur between the ages of 45 and 55. Some women might go through the menopause transition earlier or later.

Some people will reach menopause due to some cancer treatments, or surgery that removes both ovaries.

For trans, intersex, non-binary and gender diverse people who are born with ovaries, the timing and experience of menopause can vary depending on your individual biology and medical care you are receiving, including aspects of gender affirming care.

Postmenopause

Postmenopause starts after menopause and continues for the rest of your life.

Symptoms

About 1 in 2 women report mild to moderate symptoms. Around 1 in 4 women have symptoms severe enough to affect their daily activities, and around 1 in 4 have no symptoms.

You might experience a combination of physical, emotional and/or mental health symptoms, or no symptoms at all.

If you have symptoms, they will usually start in perimenopause, unless you have medically induced menopause which can bring on symptoms suddenly.

For some women, symptoms might continue into postmenopause. This means symptoms can continue anywhere from 2 to more than 10 years.

Physical symptoms can include:

- changes to period frequency or heavier or lighter bleeding
- hot flushes and night sweats
- sleep problems and changes in sleep patterns
- joint and muscle pain
- vaginal dryness or discomfort
- bladder (wee) problems
- dry or itchy skin
- weight gain around your stomach.

Mental and emotional symptoms can include:

- low mood and mood changes
- less sexual desire
- brain fog or forgetfulness
- anxiety and depression.

In postmenopause, some menopause-related symptoms will ease. However, for some people symptoms can continue for years.

Management and treatment

There are many things you can do to help relieve and manage symptoms. What works best for you will depend on your health, lifestyle and personal preferences.

Healthy lifestyle changes

You might choose to try these everyday activities to improve your overall health and help you cope with some symptoms:

- stopping smoking and vaping
- limiting alcohol and caffeine intake
- improving your diet and maintaining a healthy weight
- putting in place good sleep routines
- being physically active
- looking after your mental health and wellbeing
- dressing in layers to help with hot flushes
- recording dates and reminders to help you feel on top of things.

Treatment options

There is a range of evidence-based medical treatments for managing menopause-related symptoms.

Talk to your doctor about treatments that might be suitable for you.

- Hormone treatments are prescription medicines, available in various forms, that add back some of the hormones that are declining in your body. This includes Menopausal Hormone Therapy (MHT) which can be a safe and effective treatment for hot flushes, night sweats and vaginal dryness.
- Non-hormonal treatments are prescription medicines that don't contain hormones and may help treat hot flushes, night sweats or mood changes.

There are also psychological therapies, such as Cognitive Behaviour Therapy or CBT, and non-prescription medicines, such as paracetamol and ibuprofen, that might help reduce the impact of menopause-related symptoms.



Getting help

There are many qualified health professionals who can support you during the menopause transition.

If you have menopause-related symptoms that are impacting your life or worrying you, it is important to talk to a doctor. There are treatment and support options that can help, and your doctor can make sure you receive accurate diagnosis and appropriate care.

Not all health issues and concerns experienced in your midlife are due directly to the menopause transition. Some symptoms can also be due to other health conditions or issues.

More information and support

Visit health.gov.au/perimenopause for more information on perimenopause and menopause.

On the website you will find real stories, resources, a guide for talking with your doctor, a link to a symptom checklist, and information in a range of languages.



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