



Edinburgh Menopause Clinic

Vaginal and bladder symptoms after the Menopause

Almost all women notice changes after the menopause in the vaginal and bladder tissues. The symptoms they often experience include:

- vaginal dryness, soreness or irritation
- vaginal discomfort during intercourse
- urinary urgency (needing to empty the bladder urgently, even if is not full)
- urinary frequency
- nocturia (getting up frequently during the night to pass urine)

These symptoms, although rarely connected to any serious conditions, are often very distressing. Many women may feel uncomfortable about discussing these symptoms with anyone, or consider them to be a normal acceptable part of the process of menopause; these problems are however often very easily treated.

In the majority of cases these symptoms are due to a fall in the levels of the hormone **estrogen** which occurs in all women when their periods stop; the hormone estrogen is responsible for maintaining the health of vaginal and bladder tissues, and the lack of estrogen leads to a thinning of the wall of the bladder and the skin of the vagina, leading to dryness, discomfort and urinary symptoms.

Treatment

The most effective treatment for these problems is to replace the estrogen which is lacking; this is done with either **local estrogen replacement** or **hormone replacement therapy (HRT)**.

- **Local estrogen replacement:**

Estrogen can be given very effectively by the vaginal route in the form of tiny vaginal tablets (Vagifem®), a cream or a soft plastic ring (Estring®) which sits inside the vagina and is changed at three monthly intervals. This method of delivery of estrogen to the tissues is very safe as only a tiny amount of the hormone is absorbed into the bloodstream. Studies have suggested that this route has no significant increased risk of breast cancer, stroke or blood clots. Estrogen given in this way can be continued indefinitely, as long as symptoms are a problem.

• **Systemic HRT:**

If you are experiencing other unwanted menopausal effects such as hot flushes or sweats, you may benefit from traditional HRT which has a systemic (whole body) effect as well as helping vaginal symptoms. This can be prescribed by your GP although not all women can, or choose, to take it. HRT has some small risks – it very slightly increases your risk of breast cancer, stroke and blood clots in the legs or lung. Other side effects include breast tenderness, fluid retention and period-type bleeding.

• **Non-hormonal treatments:**

If you wish to avoid hormones, or for any reason are unable to use them, there are other ways to improve the vaginal symptoms which occur after the menopause. These include general measures such as avoiding contact between the vaginal skin and soap, wipes, perfumes, talc and man-made fibres. Vaginal lubricants such as Replens® or Sensilube® can be very helpful and are not limited to use during intercourse. Emollient lotions such as Dermol 500® may be helpful for washing and moisturising vaginal skin. These preparations are available to buy from a chemist, from your GP or from a family planning clinic

How to get help

If you are experiencing any of the problems mentioned, speak to your GP or local well-woman/family planning doctor or nurse who is likely to be able to help. Before any treatment is started however, your doctor is likely to examine you and check for any other skin conditions which may be causing these symptoms, although these are generally much rarer. Similarly, if you receive estrogen replacement treatment and it does *not* help your symptoms, there may be another cause and your doctor may wish to investigate this further.

