When menopause affects relationships

For women who have few or no symptoms of menopause, this time of their life may be no different to any other. But for others, menopause can bring changes which affect different aspects of their life, including their sexuality.

When a woman’s periods stop, it means her body is producing less of the hormone oestrogen. Lack of this hormone can cause many symptoms - hot flushes, night sweats, headaches, insomnia, mood swings and changes to the vagina are just a few. Women may notice that sexual intercourse is uncomfortable for two reasons - one is that the vagina becomes dryer at menopause, the other is that its lining becomes thinner, making intercourse uncomfortable or painful.

But some women don’t realise these things are normal, and may feel there’s something wrong with them. They may avoid having sex, but hesitate to tell their partner the real reason.

However, using vaginal lubricant, available from chemists, can be enough to solve the problem. (Couples should also remember that older women may need more time to become sexually aroused). Another product available at chemists helps the vagina produce more moisture - ask your doctor, women’s health centre or women’s health nurse for more information. Other options to discuss with a doctor include a hormonal cream which is applied to the vagina, and hormone replacement therapy (HRT), a medication which replaces oestrogen. Besides helping prevent diseases like osteoporosis (thinning bones) and heart disease, HRT also improves vaginal problems. But although HRT can successfully treat many menopause symptoms, it doesn’t suit all women. Some research suggests HRT can slightly increase breast cancer risk, especially if taken for five years or longer. But this is controversial and many experts believe HRT’s benefits outweigh any risk.

It’s normal for some women (but certainly not all) to lose their libido at menopause. But there can be many reasons for this and some can be remedied. If a woman has insomnia because of night sweats, for instance, it’s no surprise if she feels tired and in no mood to make love. A family doctor, menopause clinic or women’s health centre can suggest ways of coping with symptoms. HRT is one of them - it can’t restore lost libido, but can ease symptoms and increase wellbeing. It’s also true that lifestyle can influence menopause symptoms - regular physical activity, healthy food and avoiding cigarettes and excess alcohol all improve wellbeing.

Sexual problems at mid-life sometimes happen because a woman’s partner has difficulties too. Erection difficulties are common in men over 50. But just as a woman may hesitate to talk about changes to her body with her partner, he may find it hard to talk about his problems. This is such a sensitive issue for some men that they cope by avoiding sex. When this happens, a woman may believe it’s because her partner no longer finds her attractive. Yet most erection problems can be improved, sometimes with simple lifestyle changes. (Always see a doctor about
erection difficulties - they may be a symptom of arterial disease which increases the risk of heart disease or stroke). Other things can also affect male sexuality, including some prescription drugs and problems men have in their own lives, such as adjusting to retirement.

Sexual problems in mid-life usually have solutions, especially if couples can talk openly to each other, rather than hide their problems. Men can see their GP who can refer them to a specialist, if necessary. Women can see their GP or a Menopause Clinic at some large hospitals, including the Royal Hospital for Women at Randwick (02) 9382 6620. Women’s health nurses at many community health centres can provide services for women of non-English speaking background, as can some women’s health centres and Family Planning Clinics. Mid-Link Menopause Service, (02) 9843 3157, has services for women of NESB in Parramatta, Holroyd, Baulkham Hills, Auburn and Blacktown.

If you need help making phone calls in English, ring the Translating and Interpreting Service (TIS) on 131 450.