

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/advances-in-womens-health/menopause-genitourinary-symptoms/67535/>

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Menopause Care: Addressing Genitourinary Symptoms

Announcer:

This is *Advances in Women's Health* on ReachMD. Today, we'll learn about the genitourinary symptoms of menopause and strategies for addressing them with Dr. Monica Christmas. Dr. Christmas is the Associate Medical Director for the Menopause Society, an Associate Professor of Obstetrics and Gynecology, the Director of the Center for Women's Integrated Health, and the Director of the Menopause Program at the University of Chicago Medicine. Here she is now.

Dr. Christmas:

Historically, genitourinary symptoms like vaginal dryness or irritation, urinary frequency or urgency, pain associated with any type of vaginal penetration, and even recurrent urinary tract infections weren't historically asked about or inquired, and maybe they were not only underreported, but hence undertreated as well.

I think the pendulum has really swung, which is really exciting. Many residency and medical school programs across the gamut of fields—so it's not just OB/GYN like my field, but primary care, really anybody that sees and cares for midlife women—have built into the curriculum for learners aspects of the symptomatology that affect midlife women.

The genitourinary symptoms can be later onset, so it might not necessarily be that somebody in the perimenopause or menopause transition is experiencing them. It might be something that they experience later on.

Local vaginal estrogen most people can use. It's very, rare that there are circumstances where it is contraindicated. But for the vast majority of people, you actually can use it. There are four different types. There's a vaginal cream, there's a little vaginal tablet, there's a vaginal insert, and a nifty vaginal ring, and that's kind of nice because the ring goes in the vagina, it stays in place for 90 days, and at the end of 90 days, the person would remove it, throw it away, and put another one in.

There are also two non-estrogen options available on the market. One is oral ospemifene. It's an oral pill that's a SERM—a selective estrogen receptor modulator. It acts like estrogen on the vaginal tissues, but it isn't estrogen. So for someone who really doesn't want to put something in the vagina, that oral pill works really well for managing vaginal dryness and pain that can be associated with any type of vaginal penetration.

And then the last prescription option is a steroid suppository, prasterone. It works really well as well. And so for patients that would prefer not having an estrogen option, that is available to them. It does metabolize down to some estrogen and a little testosterone as well, but it is just intracellularly absorbed, meaning it's only being absorbed at that level of the vaginal walls and bladder.

For people that just have mild symptoms, using a vaginal moisturizer can be helpful. Some of the hyaluronic acid-based moisturizers have found to work very well. Typically, you would need to use them at least three times a week. Certainly, they could be used more if needed. And then a vaginal lubricant is something that you would use just with sexual activity. So the lubricant would help reduce any friction associated with vaginal penetration.

So there are lots of options. There's absolutely really no reason that anyone should suffer. Ane thing that can happen, though, is that when anything is perceived as painful, our body tenses up, and over time, that tensing up—especially because our vaginal muscles are some of the strongest muscles in our entire body—those muscles can become so tight that it becomes hard to relax them. And pelvic floor therapy can be really helpful in helping people relearn how to relax their pelvic floor. So that's another option that can be helpful for people that start to have very tight, high-tone pelvic muscle contractions.

Announcer:

You just heard Dr. Monica Christmas discussing how to treat genitourinary issues during menopause. To access this and other episodes in our series, visit *Advances in Women's Health* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!