



A Support Guide

The Menopause at Work



Why have we created this Support Guide?

Menopausal people are the fastest growing demographic in the workplace, yet many struggle to manage the psychological and physiological changes their bodies are going through. According to Occupational Health & Wellbeing (Personnel Today) a quarter of menopausal people will experience debilitating symptoms; from hot flushes and night sweats to increased anxiety, and for some, it forces them out of the workplace completely. These individuals are likely to be at the top of their game but without the right support, at the right time, they can stop reaching their full potential. It's important for us to address the taboo, to attract and retain strong talent. Research has found that more than 70% of people experiencing the menopause have no idea what support is available to them at work and feel isolated.

It might not always be obvious who is experiencing menopause symptoms. The menopause affects most women and other people who have a menstrual cycle. This can include:

- Trans people – 'trans' is an umbrella term used to describe people whose gender is not the same as the sex they were assigned at birth
- People with 'variations of sex development' (VSD) – some people might prefer to identify as intersex or use the term 'differences in sex development' (DSD)
- Those who identify as non-binary – non-binary people do not think of themselves as simply male or female

We support everyone equally. This is particularly important because someone might talk about their gender identity when discussing their menopause symptoms and might not want it more widely known. We talk about other reasons someone might be reluctant to talk about it later in this Support Guide.

What is the menopause?

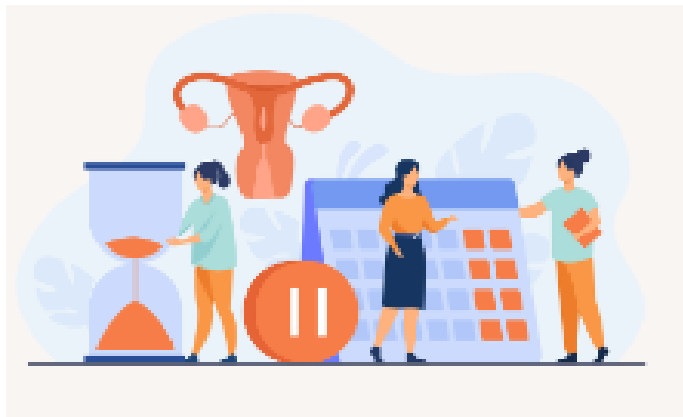
The menopause is the time when a person stops having periods and can no longer get pregnant naturally. The ovaries stop releasing eggs and no longer produce the hormones oestrogen and progesterone.

'Menopause' is traditionally defined as having occurred when a person has not had a period for 12 continuous months (for individuals reaching menopause naturally).

It usually occurs between the ages of 45 and 55. Between 40 and 45 it is known as early menopause but for some individuals, it may occur before the age of 40. This is known as premature menopause, or premature ovarian insufficiency.

Changes can also be brought about by treatments for cancer (e.g. chemotherapy), through removal of the ovaries and by some types of hormone therapy. People with some genetic conditions are more likely to experience a premature menopause.

Symptoms can appear years before periods stop, as the body makes its changes leading up to the menopause. This is called the 'perimenopause' or 'menopause transition'.



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Symptoms of the perimenopause

A lot of people think of the menopause as 'just getting hot flushes' or a time when periods 'just stop' but it's so much more than that for some people. Some of these are lesser known symptoms, which is why it's important to bring awareness to them.

Common symptoms of the perimenopause are:

- Anxiety and feeling unable to cope.
- A loss of confidence / low self-esteem.
- Mood swings.
- Problems with memory or concentration (brain fog).
- Hot flushes, which can be short, sudden feelings of heat or cold, usually in the face, neck and chest. They can make you sweaty or dizzy and make your heart beat faster.
- Night sweats.
- Difficulty sleeping, which may be a result of night sweats, making you tired and irritable during the day.
- Headaches, including worsening of existing migraines.
- Muscle aches and joint pains.
- Changing body shape.
- Skin changes, including dry and itchy skin.
- Repeated urinary tract infections (UTIs) and/or the frequency needing to go to the bathroom.
- A change in the pattern of periods. They may get lighter or heavier, happen less often or more often, or become unpredictable. Eventually, periods will stop altogether.

Everyone has their own unique experience with the menopause and which symptoms they experience. Around 75% of people will get symptoms; for 25% of those, they will be severe and they can have a big impact on daily life, which can affect work performance and interpersonal relationships.

Symptoms can last for months or years, and can change with time. For example, hot flushes and night sweats may improve, and then someone might develop low mood and anxiety. There are things people can do to help with symptoms and there are treatments to replace the missing hormones. We cover support and resources available in this Support Guide.

Case Studies

Healthtalk has videos of women talking about living with menopause and perimenopause and what helped them. It covers many topics, including:

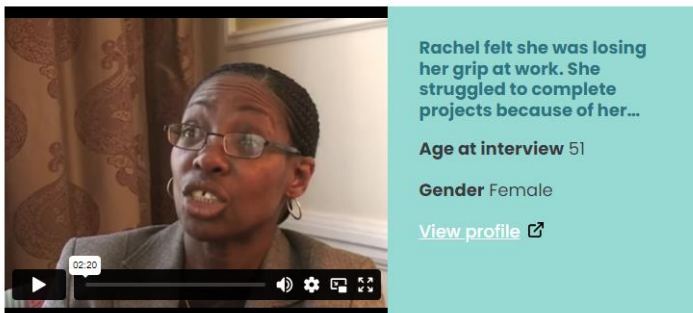
- changes in periods
- memory and concentration
- emotions and mental health
- HRT (hormone replacement therapy)

We have included some of these stories in this Support Guide but you can head to their website to read more:

<https://healthtalk.org/experiences/menopause/work-and-the-menopause/>

Meet Rachel... (transcript is below)

This is not an interactive video. Visit <https://healthtalk.org/experiences/menopause/work-and-the-menopause/> to watch the video, if you wish to.





“From a work point of view I was finding it a struggle, not day to day processes but if I have a specific project that was on board that needed to be completed within a time scale or I needed to gather information, I felt lethargic. I felt that I wasn’t being assertive and I felt that I was like losing my ability to think things through. That definitely affected me, that side I noticed and that’s when I said, ‘Well what’s happening here, why is this affecting me?’ Well, it’s affecting your brain isn’t it really, and you feel incapable... like I couldn’t function. I wasn’t functioning as well as I should be and obviously you don’t want your employers to think that they’ve assigned you a piece of a piece of work and you’re not able to do it. But with serious concentration and time I mean I was able to complete whatever it was that I was doing or had to do but I felt it a struggle. I felt that I was losing my grip.”

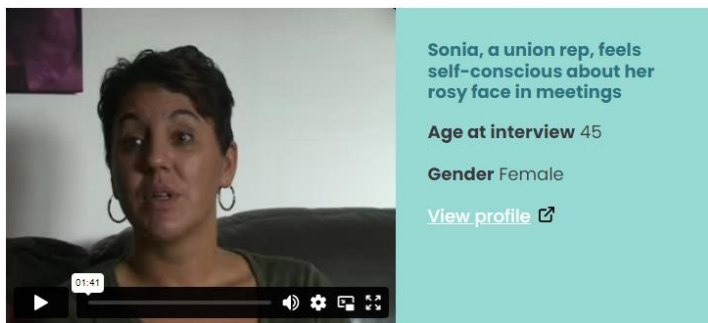
And with your work colleagues, any change in the way you related to them?

“With my work colleagues I felt that what people spotted in me was how quiet I became, not that I was always chatting a lot in the office but for a period I said very little. I contributed not very much to general conversation and I always had done and I don’t know whether or not I was becoming a little bit withdrawn.”

In a public environment where presentation matters, people sometimes feel exposed by their inability to conceal the often unpredictable, unpleasant and highly visible physical symptoms of the menopause. Hot flushes and sweats, for example, are not only an obvious sign of the menopause, but can make individuals feel acutely self-conscious, particularly when working with younger staff members or male colleagues.

Meet Sonia... (transcript is below)

This is not an interactive video. Visit <https://healthtalk.org/experiences/menopause/work-and-the-menopause/> to watch the video, if you wish to.





“Hot flushes... occasionally they were happening whilst I was working and at home. Especially at work if I was in a meeting or something because I’m a union rep, so I have to attend meetings at different times during my course of work. So I’d be in a meeting and all of a sudden I would just have a hot flush for no apparent reason. So that became a bit of a problem.

I would just all of a sudden be in a situation, like I said mainly when I was in meetings or whatever usually close proximity with somebody. And I could just feel myself building up, from my stomach coming up and then all of a sudden I’d have this rosy face. And it would stay there for twenty minutes or so afterwards, I’d come out of the meeting and I’d just be sat there and I’d be thinking, ‘How can I cool down?’”

Were you aware of it in the meeting. Did you feel it come?

“I could feel it, yeah, I could feel it and I was aware that other people could see it as well because I would go in, in front of them and I’d be quite normal and then all of a sudden this would build up and it was like it was quite embarrassing. And in other social situations as well when I was around other people, friends and stuff.”

Did anybody say anything?

“No, they would just sort of comment say, ‘Oh, you’ve got a red face’ and I’d just say, ‘Yeah, I just feel a bit hot’ and just start waving my hands.”

For people in jobs where they have to stand all day or do physical training, the unpredictability of periods can be very difficult. Heavy bleeding and pain can cause discomfort and potential embarrassment. One woman found it difficult in her job to go to the toilet when she had an unexpected period.



Meet Barbara ... (transcript is below)

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“It’s just part and parcel of life and you’ve just got to get on with it. But for me I found it quite hard because I was with guys and I was having to still march eight miles with a pack on my back and do a basic fitness test of running three miles in a certain period of time, although I got a bit longer because I was a woman and because I was older. But every month it was a complete struggle and I had to time everything. Anything I was doing I had to think about what time of the month is it, am I going to have a period then or not. And it got to such where I didn’t know when I was going to have a period and how bad it was going to be. I can remember one day and I was doing before the run you have to some exercises which are sit ups and press ups and I was doing the sit ups and you have a guy holding your feet and I did the sit ups and I got up and of course there was blood underneath. And I thought ‘argh’. And it’s an embarrassment but of course I’d still got to do the run.

So a lot of it meant that I was out in the field and it’s just not the most convenient of places..”

How did you deal with it all?

“You used a spade and that was it. There’s no toilets or anything and you’ve got to make sure you’ve got everything with you and because I was flooding all the time. I used to make sure I’d take my knickers but I’d have my Tampax and I’d have some towels with me because I thought that if I’m going to be out



for so long I may not be able to go, I might start leaking and I don't want it to come through my trousers and you've got to live in those trousers for the next week."

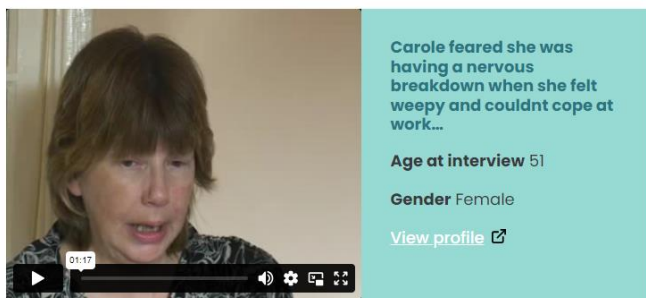
So do you feel it affected your career in any way?

"In the early days, no, but I would say in the last five years, definitely. Definitely. I mean I left the Army because I thought the Army changed a lot in thirty years . One of my last tours was with an Infantry Battalion and I was still expected physically to do the same as the men. Well, I mean I was over 40 then and to go out on an eight mile march, I was the oldest woman in the battalion of six hundred people but I was expected to keep up at the same rate. Well, physically any person over 40 is going to find it harder than a 20 year old but as a woman dealing with changing life and changing hormones, it was even more so and I thought 'This is time for me to leave, I can't keep up with these people. And in the Army you have to carry on doing all the fitness until you're 50. So I think for a lot of women there's not many women staying till that age."

People's emotional symptoms during the menopause vary. Some have no symptoms at all, others have mood swings, anxiety and depression. These symptoms can be frightening and surprise many individuals adding to the burden of hot flushes and irregular periods. They talked about these symptoms and how they affected their lives.

Meet Carole ... (transcript is below)

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“By the end of the following summer, I’d started to notice that I was getting... I wouldn’t say ‘depressed’ but I was getting quite weepy, I was having trouble concentrating on work.

And I found I just couldn’t cope with things and I started getting a bit tearful. This went on for about another four months towards the end of 2006 and everything got on top of me. I thought I was slightly depressed, then the hot flushes started and they’d been going on for about 3 or 4 months, mainly during the day, not any at night at the time, but then I found I couldn’t concentrate on things, I had no co-ordination, I couldn’t do two things at once. I’d be out in the kitchen thinking I’ve opened the drawer, yes, what am I getting, other times I could do two or three things at once but this was just getting me down.

I think you start to think “what the hell is wrong with me?”, have I got some disease.. the big C...what is making me like this? Am I depressed? Am I going to have a nervous breakdown? I thought I was going to have a nervous breakdown until I found the website and I read the forum and I thought ‘thank goodness, there’s hundreds of women like me, I’m not going bonkers, I’m not going mad, this is quite normal’. It’s not abnormal, you’re not mad, you’re not stupid, you’re just going through a stage of your life and you’re not the only one.”

Some people’s personalities changed as emotions threatened their sense of balance and wellbeing. Some felt uncharacteristically depressed and even subdued. They used phrases like “this isn’t me”, “I’m not the way I’d normally be”, “it’s not like me”, and “normally I’m quite a sensible person” to describe this new, changed identity. One woman found herself “crying over things” which wouldn’t have bothered her before; another felt disconnected from her emotional self, as if she were “floating and watching” herself shouting. Confused by irrational emotions, individuals understandably wondered “what’s happening to me?” Several were so worried about how they felt and concerned that it might be depression that they consulted their GP.



Emotions at work

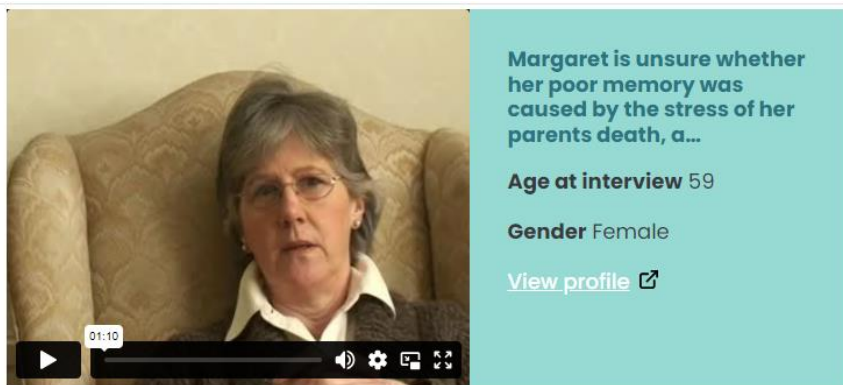
Anxiety, low self-esteem, loss of confidence and insecurity threaten to undermine a person's status in the workplace.

Some individuals can suffer debilitating mood swings and anxiety which have a significant effect on quality of life. The postmenopausal period can bring longed-for relief when the symptoms become milder. It's important to remember, however, that feeling low, angry, irritable and upset, and losing confidence can also be signs of clinical depression and we encourage anyone experiencing these symptoms to talk to their GP.

Alongside physical symptoms, individuals talked about how forgetfulness, poor concentration, mood swings and tiredness undermined their confidence, authority and ability to function effectively in the workplace.

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“I’ve always had a good memory. I’ve been able to remember phone numbers, names, addresses, all kinds of, just the information of daily life. And I couldn’t remember words. I couldn’t remember where I was supposed to be. I had to start writing everything down. I thought it was stress. I thought it was because of losing mum and dad and that... that it would come back.

And in fact it has come back a bit better but that’s mainly because I’ve been studying so I’ve been making myself remember stuff because I’ve been having to take three hour exams and things. Really had to concentrate. And now I’m approaching 60 and it is better but I said to my husband the other day, I’m really worried about the fact that I start a sentence and I can’t remember what I was going to say and that I find really quite worrying and whether that is a hormonal thing or whether that is a result of coming off the HRT. I really don’t know or whether it’s the beginning of something to do with getting much older. I don’t know.”

Effects of poor memory and concentration

Forgetting words, appointments, keys, people’s names and birthdays, or doing “silly things” like filling the bath up with cold water are frustrating. People felt disconnected and a “little bit out of town” when they couldn’t remember even simple everyday things. They talked about their memory being “shot to pieces”, about their brain being “in a vacuum”, of having a “huge hangover” and “cotton wool for a brain”.

Poor memory, forgetfulness and difficulty concentrating can cause problems at work and at home. Individuals had difficulty taking in and processing information, finding the right word, remembering details, spelling, answering emails, and organising tasks. They felt “bombarded” when asked to take on too many tasks and embarrassed when they forgot what they were saying in the middle of a conversation or couldn’t recall what people had told them.



Loss of memory and poor concentration can be frightening. When memory and organisational skills are affected by the menopause, it can feel like working is almost impossible. Trying to hide memory losses can be exhausting and add to the stress of the menopause. Individuals wondered whether their inability to remember things might be not just an unwelcome menopausal symptom but a sign of something more sinister. One questioned whether her poor memory had to do with the menopause, getting older, or the “plaques in my brain starting to fur up”; another found her recent misspellings out of character and wondered if it was an “early sign of dementia”.

Why people might not talk about their symptoms

We understand that people might not talk about their menopause symptoms at work because they:

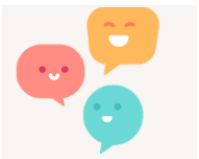
- feel it's a private or personal matter
- feel their symptoms might be embarrassing to share with others
- do not know their line manager well enough
- are not sure if their line manager will be sympathetic
- feel they will not be taken seriously
- are worried about confidentiality
- think they will be seen to be less able to do their job
- are worried that job security or promotion opportunities might be taken away
- are worried about outing themselves as a trans person, non-binary person or a person with variations of sex development (VSD)



The role of personal responsibility

When facing personal struggles that impact work, it's important for a person to acknowledge their own role in managing these challenges. Recognising the signs that we're struggling is the first step towards seeking help. Whether it's menopause-related symptoms like memory lapses, difficulty concentrating, or any other health issue, understanding our own needs is important.

Taking personal responsibility means being proactive about our health and wellbeing. This might involve scheduling an appointment with our GP to discuss symptoms and potential treatments. It also means exploring strategies that can help mitigate the impact of these struggles on our work, such as adopting organisational tools or adjusting our work habits. Please speak to your manager if you need support – please don't struggle alone. Our staff are encouraged to also speak to any member of the HR team for need advice and support.



The supportive role of managers

Managers play an important role in creating a work environment that supports individuals facing personal struggles. This support begins with fostering open communication, where employees feel comfortable sharing their challenges without fear of judgment or repercussions.

When a manager notices an employee struggling, they'll initiate a welfare conversation. This conversation will be approached with empathy and understanding, focusing on how the workplace can support the employee. Managers can also signpost employees to professional help, such as a GP, and explore adjustments that can be made within the workplace.



Collaborative solutions

So we've talked about the part an individual plays in seeking support and help, and also those of our managers. Now it's about bringing those both together.

Taking personal responsibility when struggling is a critical step towards managing the impact on our work and wellbeing. However, this journey is not one to be walked alone. Managers and HR play a crucial role in providing support, guidance, and understanding. By working together, we can develop strategies that address personal struggles while maintaining professional responsibilities.

Our goal is to create a workplace where everyone feels supported and empowered to overcome challenges, fostering an environment of mutual respect and understanding.



What support is available?

Speak to a health care professional

A GP, nurse or pharmacist can give advice and help with the menopause or perimenopause symptoms.

There are also menopause specialists who have experience in supporting anyone going through perimenopause and menopause. To find the nearest NHS or private menopause specialist, information is available on the British Menopause Society website (this lists NHS and private specialists).

Talking therapies like counselling or CBT (cognitive behavioural therapy) can help with symptoms of menopause and perimenopause. Individuals can get NHS talking therapies without seeing a GP first.

Visit <https://www.nhs.uk/service-search/mental-health/find-an-nhs-talking-therapies-service> for more information.



The main medicine treatment for menopause and perimenopause symptoms is hormone replacement therapy (HRT), which replaces the hormones that are at low levels. A GP will discuss this and any risks.

Non-hormone medicines

There are non-hormone treatments if symptoms are having a big impact on your life and you cannot, or choose not to, have HRT.

Talk with a GP about these medicines and their side effects, and if they might be suitable.

Mood symptoms

- Antidepressants can help with mood symptoms if someone has been diagnosed with depression or anxiety.
- Cognitive behavioural therapy (CBT). Cognitive behavioural therapy (CBT) is a talking therapy which can help with:
 1. low mood and anxiety caused by menopause and perimenopause
 2. some physical symptoms like hot flushes and joint pain
 3. You can get NHS talking therapy without going to a GP first. Visit: <https://www.nhs.uk/service-search/mental-health/find-an-nhs-talking-therapies-service>

Lifestyle changes to help menopause and perimenopause

Eating well, exercising and looking after your mental wellbeing can help with symptoms during perimenopause and menopause.

It can also help you keep as well as possible in the future.

Do

- get plenty of rest, including keeping to regular sleep routines
- eat a healthy diet
- have calcium-rich food like milk, yoghurt and kale to keep bones healthy

- exercise regularly, try including weight-bearing activities where your feet and legs support your weight like walking, running or dancing
- do relaxing things like yoga, tai chi or meditation
- talk to other people going through the same thing, like family, friends or colleagues
- talk to a doctor before taking herbal supplements or complementary medicines

Don't

- do not smoke
- do not drink more than the recommended alcohol limit

Ways of improving memory and concentration

There are some simple strategies which people have found useful in improving their memory and concentration. These included writing things down, making notes and 'to do' lists, keeping a diary, having a calendar in the kitchen with everyone's birthday on it, and using spell check. Just sharing experiences of memory problems with other people can be reassuring. Summarising information by drawing diagrams or 'mind maps', using word or letter associations, or simply repeating important points can be useful memory aids.

As tiredness can affect memory and concentration, it's important to try and reduce the effects of symptoms on sleep. There is no evidence that HRT can improve memory loss, but people who use it may find it indirectly improves their memory by relieving hot flushes, sweats and other symptoms which disrupt sleep.

Many people find their memory and concentration returning to premenopausal levels as symptoms ease and sleep is restored after the menopause. Any concerns about memory should always be discussed with a GP.

Other resources and information:

- Our website: <https://edenfutures.org/wellbeing/> has information, tools and guides about the menopause and is regularly updated.
- www.menopauseandme.co.uk – This provides a symptoms checklist and how to prepare for a menopause consultation.
- [Menopause matters](#), which provides information about the menopause, menopausal symptoms and treatment options.
- [Daisy Network](#) charity, which provides support for people experiencing premature menopause or premature ovarian insufficiency.
- [Menopause Café](#), which provides information about events where strangers gather to eat cake, drink tea and discuss the menopause;



- The Menopause Support Network (<https://menopausesupport.co.uk/>) - provides free support, advice, and information to individuals experiencing menopause symptoms.
- Henpicked Menopause Support (<https://henpicked.net/menopause-hub/>) offers expert advice and support to individuals experiencing menopause symptoms.

If you are affected by the menopause, please speak to your manager if you need support – please don't struggle alone. Our staff are encouraged to also speak to any member of the HR team for need advice and support.