

# **MENOPAUSE IN BLACK WOMEN**

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*For the South Yorkshire Integrated Care Board*

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- Portfolio General Practitioner in both the National Health Service and the private sector.
- Specialising in women's health, sexual and reproductive health, and menopause care, sit on the Rock My Menopause Committee within the Primary Care Women's Health Forum and a member of the British Menopause Society.
- Actively involved in the RCGP North-West London Faculty Board, lead initiatives promoting Equality, Diversity & Inclusion.
- Advocates for health equity, notably through the HEAL courses initiative, addressing health issues affecting the Black community.
- Beyond her medical career, Dr. Johnson-Sogbetun serves as a GP tutor and examiner at Queen Mary's University of London Medical school.

# Menopause In Black Women

## Case Study

- Adwoa, a 49-year-old second-generation immigrant from London, is a busy mother of two teenagers and a banker.
- Lately, she's been experiencing intense heat sensations, discomfort, brain fog and mood instability, along with vaginal dryness and urinary issues.
- She is a single mother and so provides alone for her family and she is worried that she might lose her job.
- Juggling her roles as a mother and professional, she's struggled to address her symptoms.



# Menopause In Black Women

## Case Study

- When she tried discussing it with her mother, she was encouraged to overlook them, Ghanaian Women are supposed to be strong she reminds her. Feeling isolated, she eventually decides to seek medical help.

As her Clinician, how would you help Adwoa navigate through her symptoms and concerns?



# Menopause In Black Women



- Menopause typically presents challenges for women of all races. Various factors in Black women compound these challenges.
- As in Adwoa's case cultural, religious, and biological factors contribute to the complexity.
- Unfortunately, Black women have often been underserved in healthcare provision.
- Often have worse experiences of healthcare from diagnosis to treatment.
- We'll explore the disparities for Black women and how to address them.

# What Is Menopause?

- Menopause is a natural biological process that marks the end of menstruation and fertility in women, typically occurring between the ages of 45 and 55.
- The primary cause of menopause is the decline in ovarian function, leading to decreased production of the oestrogen hormone.



# Causes of Menopause?

- Aetiology of natural menopause involves complex interplay of genetic, environmental, and hormonal factors.
- Other causes of menopause include
  - ✓ Oophorectomy (ovaries removal surgery)
  - ✓ Chemotherapy and radiation treatment
  - ✓ Primary ovarian insufficiency

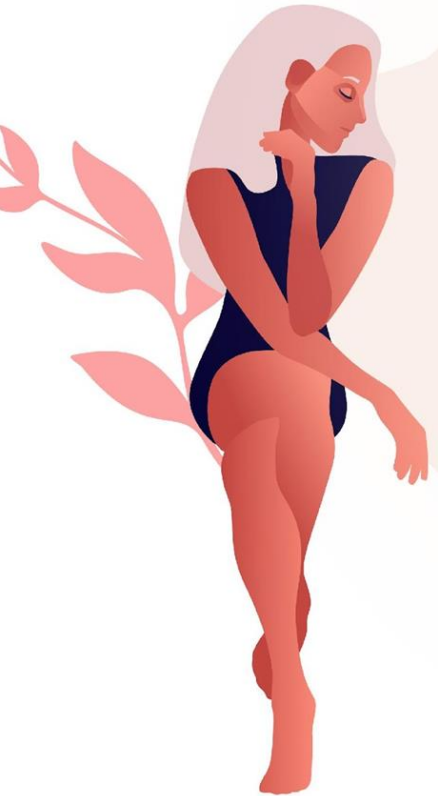


# Symptoms of Menopause

- Irregular Periods
- Vasomotor Symptoms (Hot Flashes and Night Sweats)
- Vaginal Changes
- Sleep Problems
- Mood Changes
- Changes in Libido
- Urinary Tract Symptoms
- Joint and Muscle Pain
- Cognitive Changes
- Headaches



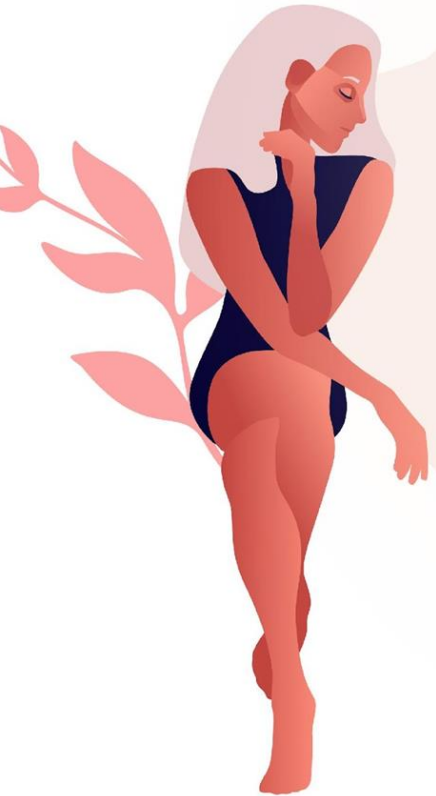
# Symptoms of Menopause (In Black women)



- Black women can experience menopause differently.
- Understanding these variations is important for proper healthcare management.
- Black women may present with vague, non-specific symptoms like all-over body pains and increased fatigue.

# Symptoms of Menopause (In Black women)

- Black women, may experience more severe vasomotor symptoms and sleep disruptions compared to white women during menopause.
- Epigenetics, generational trauma, cultural beliefs, and religious practices influence both the manifestation and interpretation of menopausal symptoms among Black women.



# Complications of Menopause

- Increased Risk of Cardiovascular disease
- Increased Risk of Osteoporosis
- Genito-urinary Syndrome of the Menopause
- Increased Risk of Sexual dysfunction
- Increased Risk of Dementia
- Changes in bleeding patterns in perimenopause



# What Is Distinctive About Menopause In Black women? Epigenetics and The Impact Of Generational Trauma



- **Epigenetics** is the study of heritable changes in gene function that do not involve alterations to the underlying DNA sequence but impact gene expression and traits.
- Generational trauma heightens stress-related conditions in women through inherited stress responses.
- Epigenetic modifications may contribute to disparities in menopause for Black women.
- Menopause health outcomes can be influenced by generational trauma.
- Behavioural patterns shaped by trauma can impact reproductive health and menopause.

# What Is Distinctive About Menopause In Black women?



## **Black Women:**

- Black women have earlier menopause (49.3 vs. 51 years in White women).
- They experience longer menopausal symptoms (10 vs. 6.5 years in White women).
- Three times more likely to face premature menopause (before 40).
- Disparities rooted in structural racism, discrimination and high stress.

# What Is Distinctive About Menopause In Black women?

- Black women often suffer from higher allostatic load than Caucasian women which can result in more severe menopause symptoms.
- They also have the highest prevalence and longest duration of hot flashes and night sweats, which are also more severe.



# What Is Distinctive About Menopause In Black women?

- Cultural beliefs and attitudes impact Black women's help-seeking behaviour.
- Menopause is stigmatised and taboo in many minority communities, hindering open discussion.
- Menopause can be seen as a loss of fertility and femininity, adding to societal pressures.
- Expectations for women to endure silently and not complain about health issues exist.
- Lack of knowledge (medical research) about menopause in WOC, HRT, and language barriers hinder access to information and healthcare.

# The Mental Load Black women Carry

- Misogyny and patriarchy
- Family and cultural expectations
- Perceived potential and false comparisons
- Hidden traumas (infertility, miscarriage, divorce, sexual abuse, domestic violence, unexpected singlehood, anxiety about the biological clock )
- Socioeconomic challenges



# Menopause Management In Black women



- Addressing disparities
- Tailored treatment plans
- Comprehensive symptom management
- Education and empowerment
- Community support networks
- Advocacy for inclusive research and policies

# Menopause Management In Black women



- Lifestyle modification
- Hormone Replacement Therapy
- Non-hormonal medications
- Supplements
- Vaginal oestrogen

# Menopause Management In Black women: Lifestyle Modification



- Physical Activity
- Manage Mental Load
- Self-Care
- Quit Smoking
- Moderate alcohol and caffeine intake
- Healthy Diet and Supplements

# Hormone Replacement Therapy



- Oestrogen deficiency is the main cause of perimenopausal and menopausal symptoms, and HRT primarily involves oestrogen replacement.
- Estradiol, a natural body-identical, yam-derived oestrogen, is used in various forms like tablets, patches, gel, and sprays (systemic HRT).

# Hormone Replacement Therapy



- For women with womb tissue, progesterone counters oestrogen's effects on the womb lining.
- Body-identical progesterone, like Utrogestan, is available. Other options for progesterone, include the IUS (e.g., Mirena) or synthetic progesterone which can be combined with a patch or taken separately.
- Testosterone may be included in HRT to address low sex drive, although not routinely.

# Benefits of Hormone Replacement Therapy



- Relief from Menopausal Symptoms
- Improved Bone Health
- Heart Health
- Mood Stabilisation
- Relief from Genitourinary Symptoms
- Ongoing Research on HRT providing Protection from Dementia

# Menopause Management In Black women: Hormone Replacement Therapy

- Proper education is essential for Black women considering HRT, as many may have reservations.
- There are many entrenched myths in communities of colour particularly about the safety of HRT.
- Black women are less likely to receive hormone replacement therapy (HRT) than white women, and this can extend healthcare disparities.

# Menopause Management In Black women: Hormone Replacement Therapy

- HRT could improve lipid profiles, endothelial function, and arterial stiffness, lowering heart event risks in Black women many of whom are already high-risk groups for CHD.
- Treatment decisions regarding HRT should be individualised, with close monitoring and regular follow-ups to optimise benefits while minimising risks.

# Menopause Management In Black women: Cultural Competence

- Healthcare providers must tailor care to diverse cultural backgrounds, adopting a culturally competent approach.
- Understanding and respecting cultural beliefs are essential for effective communication and patient-centred care delivery.
- Culturally competent care has been shown to correlate with higher patient satisfaction and improved healthcare outcomes.

# Menopause Management In Black women: Cultural Competence



- **Clinical Curiosity:** Take an interest in patient's lives and not just their symptoms.
- **Integrated, Trauma-Informed, Care:** Respect and include cultural factors and an understanding of potential added challenges such as minority trauma into healthcare discussions to align with the patient's background.
- **Open Communication:** Foster a safe and judgment-free space for the patient to openly discuss concerns, experiences, and expectations regarding menopause
- **Symptom Recognition:** Actively listen to and acknowledge symptoms reported by women.
- **Education and Awareness:** Provide clear and culturally sensitive information about potential causes, diagnoses, and treatment options for menopause.

# Conclusion: AWAKE

**A** : Acknowledge the unique experiences and challenges Black women may face during menopause

**W** : Witness and understand the cultural factors influencing menopause experiences within communities of colour

**A** : Address healthcare disparities impacting menopausal outcomes for Black women

**K** : Keep advocating for holistic care, considering physical, mental, and emotional well-being

**E** : Empower Black women through culturally competent support and resources

**Questions?**

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