

# Hot flushes



Hot flushes, the most frequent symptom of menopause and perimenopause are viewed as a hallmark of the climacteric. They are sudden or mild waves of heat on the upper part of the body that last from 30 seconds to a few minutes, caused by a decreased estrogen production during menopause.

Hot flushes are reported with considerably lower frequency among Asian women, possibly due to their diets, which are rich in substances called phyto-estrogens(plant oestrogens). Commonly complained by urban women and younger women who are surgically menopausal, hot flushes are generally more intense than in older women, and they may last until the natural age at menopause.

## Description

Hot flushes are typically experienced as a feeling of intense heat with sweating and rapid heartbeat, and may last from two to ten minutes for each occurrence. The sensation of heat usually begins in the face or face and chest, although it may appear elsewhere such as the back of the neck, and it can spread throughout the whole body. In addition to being an internal sensation, the surface of the skin, especially on the face, becomes hot to the touch. This is the origin of the term "hot flush," since the sensation of heat is often accompanied by visible reddening of the face.

The hot flush event may be repeated a few times each week or constantly throughout the day, with the frequency reducing over time. Hot flushes may begin to appear several years before menopause starts and last for years afterwards. Some women undergoing menopause never have hot flushes. Others have mild or infrequent flushes. The worst sufferers experience dozens of hot flushes each day. In addition, hot flushes are often more frequent and more intense during hot weather or in an overheated room, the surrounding heat apparently making the hot flushes themselves both more probable and more severe.

Severe hot flushes can make it difficult to get a full night's sleep (often characterized as insomnia), which in turn can affect mood, impair concentration, and cause other physical problems. When hot flushes occur at night, they are called "night sweats." As estrogen is typically lowest at night, some women get night sweats without having any hot flushes during the daytime.

## **Treatment**

Try to avoid individual triggers such as strong emotions, hot liquids such as tea or coffee, chocolate, alcohol, spicy foods, synthetic or tight clothing and heat. Wear light cotton clothing. Use fans. Have a cold shower. Practice deep, slow abdominal breathing, taking six to eight breaths per minute. Exercise: walk, swim, cycle every day for about 30 minutes. Perform some relaxation activity such as listening to music, yoga, meditation.

Dietary changes might have a positive effect in relieving hot flushes. The consumption of soy products has many health benefits, including decrease in hot flushes, protection against breast cancer, menopausal symptoms, heart disease and osteoporosis.

If the above measures are not successful to stop or decrease night sweats and hot flushes considerably, then you should see your doctor to discuss other possible options.

Non-hormonal options such as Clonidine or Venlafaxine work well for some women.

The most effective therapy for hot flushes is Menopausal Hormone Therapy which contains estrogen and progestogen. Tibolone is also a useful agent. Your doctor will need to assess your symptoms and will perform certain tests to ensure that it is safe to prescribe hormone therapy for you. They will also discuss the side-effects with you to enable you to make an informed choice for your individual needs. For many women, the benefits of HT far outweigh the risks. It is usually safe when it is used for a short duration at the appropriate dose and started early in the peri or post menopausal period.