Vaginal and Urinary Symptoms of Menopause

Vaginal and urinary problems that arise during and after menopause are both common and treatable.

Genitourinary Syndrome of Menopause

During menopause, levels of estrogen, an important hormone in women, naturally go down. As a result, the walls of the vagina become thin, dry, and sometimes inflamed. In many women, this leads to symptoms of vaginal burning, irritation, pain (especially during sex), bleeding, or discharge. Some women also have urinary symptoms, such as pain when urinating and urinating more often than usual. Together, these symptoms of the genital and urinary tract systems are called genitourinary syndrome of menopause. This syndrome is also sometimes called vaginal atrophy or atrophic vaginitis.

When to See a Doctor

Many women who have vaginal and urinary symptoms during menopause do not see their doctors because they believe it is just a normal part of aging. But if the symptoms are bothersome, treating them can improve quality of life. Also, it is important to rule out other, more serious conditions that can cause vaginal pain and bleeding as well as urinary symptoms.

Treatments

Treatments for genitourinary syndrome of menopause include both nonhormone and hormone options. Many women start by using over-the-counter vaginal lubricants or moisturizers, which contain no hormones. Lubricants are generally used to help with sex, while moisturizers can be used at all times to help with general feelings of dryness. Continued sexual activity can also help with vaginal symptoms.

If lubricants and moisturizers are not enough, hormone treatment in the form of estrogen can be added. Estrogen can be delivered either through the vagina (vaginal estrogen) or via a pill or skin patch (systemic estrogen).

For treating vaginal and urinary symptoms, doctors generally recommend trying vaginal estrogen first. Vaginal estrogen comes in different forms including cream, tablet, or ring inserted into the vagina. This way, estrogen goes directly to the vaginal area without having to go through the bloodstream first. This lowers the chance of health risks from estrogen, as studies have shown that estrogen may increase the risk of blood clots as well as some cancers in women.

Although vaginal estrogen can help with genitourinary symptoms, it may not be enough for women who have other symptoms of menopause that affect the whole body, such as night sweats or hot flashes. These women may need estrogen treatment by a pill or a skin patch. All women who take estrogen this way (and who have not had their uterus removed) should also take progesterone.

Talk to your doctor about the benefits and risks of estrogen and progesterone treatment during menopause.

There are a few nonestrogen hormone medications available to treat vaginal atrophy. Ask your doctor if these medications may help you.

FOR MORE INFORMATION

American Congress of Obstetricians and Gynecologists
www.acog.org/Patients/FAQs/The-Menopause-Years

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