

# Women's Clinic of Lincoln

## Helping Today's Women Navigate Menopause

By Jodi Fuson

**The symptoms of menopause haven't changed much in the last hundred years or so, but life expectancy sure has. Imagine living in 1900, when the average life expectancy for a woman was 50 years—**

right around the time menopause kicks in. Today, many American women live through their 80s...with an average of 30 years spent in and after menopause.

Dr. Stephen Swanson, an obstetrician and gynecologist with 35 years of experience, helps women live with this new reality. He believes that menopause should be addressed more aggressively so women can have a more positive experience. As a 25-year member of the North American Menopause Society, he says he has gained a lot of additional insight.

Women's Clinic of Lincoln developed a program specifically to evaluate women's menopausal health and to treat its unfavorable symptoms, like vaginal dryness, increased heart disease risk, mood swings, incontinence or urinary frequency, and osteoporosis. "Opening people's minds into menopause can be a good thing," Dr. Swanson says.

Once the ovaries stop releasing eggs (or are removed via surgery), estrogen levels drop, and cells throughout the body that are stimulated by the hormone go dormant. This leads to symptoms like hot flashes, fatigue, acne breakouts, brain fog, loss of libido, and sleeplessness. For many women, hormonal therapy can help by replacing the missing estrogen.

Lori Celesky, 53, underwent a hysterectomy and ovary removal in 2015. She says it was important for her to do the research and decide what was best for her body when she prepared to enter surgically-induced menopause. Dr. Swanson and his staff were a great resource and guided her to hormone replacement therapy to combat the symptoms that quickly appeared. After beginning a daily estradiol regimen, Lori noted higher energy levels, improved focus and mental clarity, and leveling of moods.

Patient Pamela Janzen, 61, says that hot flashes were the biggest symptom she had when she started taking estrogen about 10 years ago. Now, there's no sign of them. She has trusted Dr. Swanson as her doctor since 1980. "Whatever he says, I go with it," she shares. At her annual physical, she and Dr. Swanson discuss the dose of estrogen she is taking and adjust it, if necessary. "He listens to me and takes his time," Pamela says.

Lori finds Dr. Swanson and his staff very diligent about monitoring her hormone replacement therapy, too. He checked her estradiol and FSH levels six weeks after she began therapy to make sure they were in the proper range. Dr. Swanson also tests levels before starting a woman on estrogen to confirm that she is menopausal.

Hormone replacement options include pills, a vaginal ring, and a skin patch. If a patient absolutely cannot take estrogen, Dr. Swanson helps her explore alternatives. Some

herbal remedies, like black cohosh, can help control menopause symptoms, Dr. Swanson adds.

For women who are not eligible for estrogen therapy but are experiencing vaginal dryness and bladder complications, FemTouch can help. This laser procedure regenerates tissue in the vaginal mucous layer. Women's Clinic of Lincoln doctors typically perform three 15-minute treatments over a three-month period for the best results. This in-office procedure is not painful but may cause the patient to experience a minor heat sensation.

Dr. Swanson acknowledges that women have been confused about the risks of taking estrogen, but he notes that research over the past 25 years has put hormonal therapy in a more favorable light. "Heart and breast cancer research is holding up [the value] of hormone treatment," he shares.

Blood clots were determined as one potential side effect, but when estrogen is given through the skin (transdermally), no link has been proven, Dr. Swanson explains. For increased safety, estrogen is given along with progesterone (alone, estrogen could cause endometrial cancer).

Breast cancer risk has been named as a potential side effect of the therapy, but Dr. Swanson notes that breast cancer risk goes up naturally as a woman ages and that women taking hormone replacement therapy have not been documented to see a spike outside the norm. Dr. Swanson adds that women who took estrogen in their 50s and 60s saw a lower incidence of breast cancer during the next decade of their life. "We don't know that estrogen grows breast cancer, but we do restrict it with people who have breast cancer," Dr. Swanson adds.

An important benefit of hormonal treatment is the prevention of bone density loss and osteoporosis, Dr. Swanson says. Women lose about 30 percent of their bone density in the first seven years of menopause and another 1 percent per year after that. Prevention of that bone loss can improve future mobility. And with 30 years of life after menopause, we're going to need it!

Women's Clinic of Lincoln is located at 220 Lyncrest Drive. To learn more about their menopausal services, visit [womensclinicoflincoln.com](http://womensclinicoflincoln.com) or call 402-434-3370. **WE**



Dr. Stephen Swanson