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Midlife Matters Menopause Meetings

Menopause Clinic, London

**Free online talk - Oestrogen and Covid-19 resistance**

A new series of free online talks with Professor Isaac Manyonda and Dr Vikram Talaulikar - starting Thursday 6 May 2021 on the link between oestrogen and Covid-19 resistance (with Q&A).

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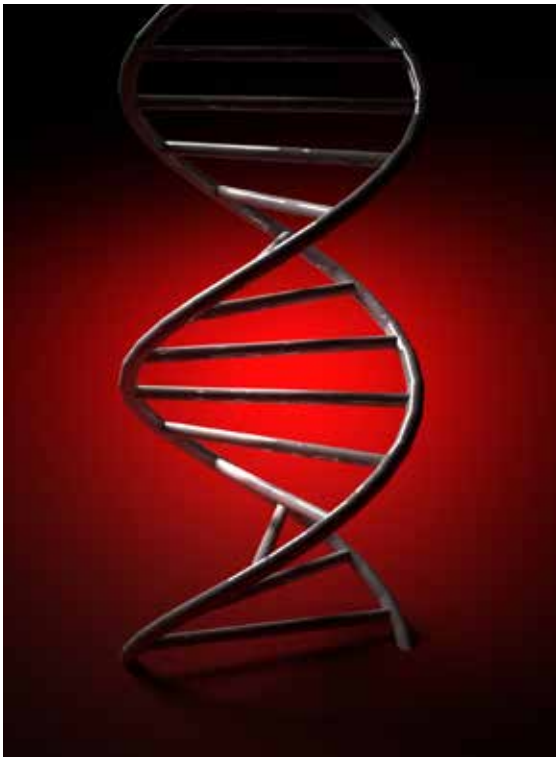
# Oestrogen: a magic bullet against Covid-19 infection?

***During the pandemic, it has become clear that women have had a lower risk of getting Covid-19 and also a lower risk of dying from it. Why? That is a question our Clinical Partners, Professor Isaac Manyonda and Dr Vikram Talaulikar (with some colleagues) set out to answer in some recent research.***

This is not only true of Covid-19 (SARS-CoV-2), the same has been shown for other epidemics that have involved the respiratory system in the past (such as MERS and SARS). Data show that around 2.4 times as many men die from Covid as women over the age range. The differences could be due to a variety of factors, including lifestyle and biology.

Women tend to have a healthier lifestyle than men (of course, there are many exceptions, but "on average"). They don't drink so much and they tend not to smoke. They also have a lower incidence of other diseases that are associated with getting Covid badly – like heart conditions and diabetes. It has been clear that such co-morbidities (things that are already present) have a significant effect on the severity of Covid infection.

It is known that women tend to have a more responsive immune system compared to men, so that the outcome and survival rates from infections or sepsis are often better in females than in males. It is likely that there is a mix of genetic and lifestyle factors relating to how this immunity works, including for viruses like Covid, and how they affect women and men differently.



Research shows that the X chromosome (of which women have two whereas men have one X and one Y) has more genes that affect immune-related responses. In fact, some 79 genes have been demonstrated to be involved in sex-based differences in immune responses. This may give women up to twice the "resistance" to things like Covid if this can be shown to be significant.

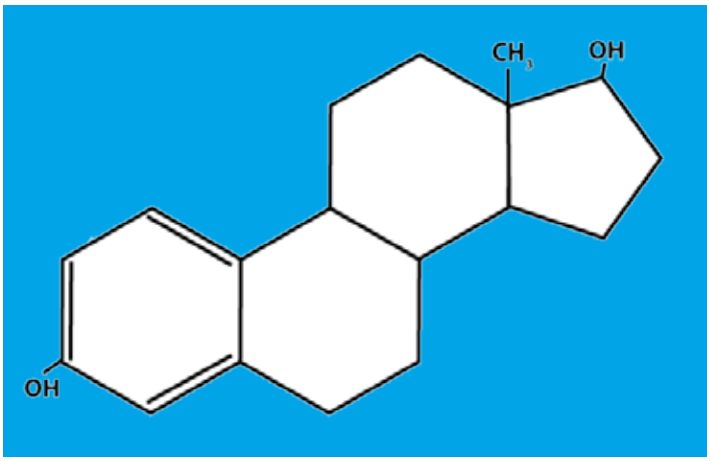
Of course, our genes control our hormones too and the "mix" of hormones in women is different from that of men. There is therefore a chance that, on top of the immune-related genes, oestrogen (women's dominant sex hormone) may play a part in resistance to Covid and other viruses. Our genes control all of our bodies, including our hormones, so it is probable that the genetic differences will cause

differences in women's and men's hormones that will result in differences in resistance.

The effect of oestrogen in women can be studied in those who are pre-menopausal (who have their normal levels of the hormone) and those that are post-menopausal (who have depleted levels). In the latter group, there will be some who are using Hormone Replacement Therapy (HRT) and it would be possible to study them against both the pre-menopausal group and those not on HRT with lower oestrogen. Very interestingly, a recent study showed that 50% fewer women died if they contracted Covid-19 infection whilst on HRT compared to those who were not on HRT.

Oestrogen affects our bodies through things called "receptors" – it works a bit like a lock and key where the oestrogen is the key that fits into the "receptor lock" to work. These receptors are not only in the sex organs (ovaries), but are also found all over the body from our kidneys through to our bones, heart and lungs – and many more.

Research on the anti-viral effects of oestrogen has shown positive results. There have been a number of papers published showing that oestrogen is effective in stopping infection. Its action seems to be on the actual mechanism of viral infection – something previously unknown about oestrogen and a group of chemicals known as SERMs that also affect the receptor sites. This research has been carried out with a variety of viruses, including Ebola and the influenza virus which is related to Covid. The effects on the flu virus were seen in both the lungs and nose and, whilst the virus was still present in subjects, its effects were strongly reduced, meaning that the severity of infection was significantly reduced.




Our small clinical trial was with women who had undergone a natural menopause. We treated them with trans-dermal oestrogen patches (the sort used in HRT) and studied their immune system by taking blood samples at regular intervals over six months. The results show a very promising effect on the immune response and certainly confirm an interaction between the hormone (endocrine) and immune systems.

A similar study comparing younger women with normal periods (and, hence, oestrogen levels), post-menopausal women on HRT and post-menopausal women not on HRT, showed similar results.

On top of the effects that oestrogen has on the immune system, it is well known that it also affects the heart and cardiovascular system. The protection it offers is, however, lost at menopause when oestrogen levels drop. It has been shown (using a randomised controlled trial) that the initiation of HRT in women early after the menopause significantly reduces the risk of mortality, myocardial infarction or heart failure, without resulting in an increased risk of breast cancer or stroke.

***a compelling argument in favour of women starting HRT close to the time of the menopause***

Whilst there is scope for more research, it seems clear that oestrogen plays an important and significant role in women's immunity – making them less susceptible than men to such things as Covid and other infections. There are also beneficial effects on heart health. This presents a compelling argument in favour of women starting HRT (in the correct form, when not medically contraindicated) close to the time of the menopause to replace the oestrogen.

You can contact the authors at the **Menopause Clinic, London**

# Valérie's story - a PCOS nightmare

***Valérie** is a friend and colleague who lives in France. She has been through a health journey that nobody should experience. The excellent news is that she is now on the road to recovery. At last, she has been heard and, after so much suffering, something has been done so she can now get her life back. This is her story …*

First, I have to explain that I'm suffering from Polycystic Ovary Syndrome (PCOS). I was diagnosed quite late in life. Nobody knew that I had been suffering from a hormonal disorder since the age of around 30. I've just had to accept that things were as they were.

It was obvious to me that there was a problem. The main thing I noticed was that I started to get fatter and fatter and my hair changed. To start with, I didn't really have pain. Pain came later. I just thought that this was a normal part of ageing.

I also had a lot of stress due to some difficult family problems and that compounded my underlying health issues. Over time, my ovaries became more painful. I thought it was because I was becoming older or perhaps because of my fast and heavy weight gain. At the same time, my fatigue increased to the point of constant exhaustion. I was very busy at work, with long and intensive hours. On top of that, I had bronchitis and a severe allergy. I thought everything was linked - but I was wrong!

My Doctor eventually advised me to consult an endocrinologist. That was about two years ago. I had to fight to obtain an appointment and to battle again to be taken seriously. The Professor who helped me 20 years ago had been replaced by another one: a woman this time. It took six months to get an appointment and, as I'm very fat, there was a misunderstanding about the motivation for my visit!

I had many blood tests to try to understand the incredible level of inflammation detected and I had a first endovaginal ultrasound. That revealed that my ovaries were big – one was 10cm wide. The Gynaecologist to whom I showed the echography and blood test results didn't understand the situation at all - he thought there had been an error. He said, as I was 50 at that moment, that I just had to wait for the menopause. He even commented, that, at 50, "What do you expect? Not surgery! Not at 50!" (without exaggeration, he must have told me that 50 times). He just noted that I was bleeding too heavily. In honesty, I left his office feeling very confused, without any answers and without any kind of help, but feeling down and totally humiliated.

***feeling down and totally humiliated***

In February 2019, I had a whole day in hospital for a full endocrinology check-up. A new endovaginal ultrasound was taken. In the report, the radiologist said that it was difficult to do (for sure, it was difficult for me too – it took 15 minutes ... I assure you that it is a very long time!). The ovary that had previously been enlarged was just 0.9cm wide this time. The second was 5 or 6cm wide. I was just told to lose weight and to do sport and they agreed to restart treatment for insulin resistance. I love sport and did go to the gym before this "adventure" started, but really I absolutely couldn't do any sport with all my problems and pain – I could hardly do normal everyday things.

This time too, there were no answers about the pain and the tiredness. My weight is an issue, but the urgent problem (pain, inflammation, heavy and long blood loss, difficulties to do the most trivial things such as peeing) was ignored yet again. I couldn't walk. I could only just about make it to the office and back home at the end of the day. I could no longer stay upright for any extended periods. I was bent in half because my stomach was so swollen and painful. I was moving like a broken old woman.

Then, I suddenly had a fever and heavy sweating and even more exhaustion! I finally had an appointment with my own Doctor. He saved my life with antibiotics. The blood test I had the following day indicated that I had peritonitis. I had to have an urgent ultrasound scan. The scan showed that one of my ovaries was now 15cm and the second one was 10cm wide. The radiologist was wonderful, telling me that she called my Doctor to ask him for my health history because she thought I had a tumour and she wanted to understand how it could be so big without having been detected before. She finally told me that she thought it wasn't a tumour (thank goodness!), but that my case was so severe that it had to be referred to an expert consultant. She listened to me!!. I cried. I cried for a long time in front of this woman, because I was heard for the first time.

I had another appointment with a different Gynaecologist and I explained briefly why I had come to consult her, what had happened with her colleague and showed her my scan. All she said was, "What a bad day. I'm tired of having to see all the complicated cases! I'm fed up!" I was stunned. I just answered, "I'm so sorry to be part of what makes your day so bad".

***"You don't want to oblige my team to do surgery on you?" … And then she pushed me out of her office.***

My age and my weight would make surgery very complicated. She said, "You don't want me to do surgery on you? You don't want to force me to do that, do you?" And with even more blame in her voice, "You don't want to oblige my team to do surgery on you? Let's go to see your endocrinologist. They will give you hormonal treatment to stop your ovaries from working. They will give you chemical treatment. Let's do that!". And then she pushed me out of her office.

I felt absolutely terrible at that moment. She made me feel that I didn't deserve to be cured. I was absolutely and profoundly defeated. I had no hope. And with the fear that brought on, things got worse again. I was just a broken thing, incapable of keeping upright. I had reached the point where I was unable to stand at the sink to wash more than one glass at a time. Everything seemed to be far away, inaccessible, complicated, impractical. I had been losing my hair for months, bleeding most of the month and couldn't urinate unless I lay down for half an hour at least. I was afraid that I might, one day, just die in my bed like an abandoned dog. I couldn't see anything around me anymore. All my energy was focused on my vital functions and it was only work that gave me a justification to continue living.

Eventually, I consulted another Gynaecologist in Lyon. He hospitalised me immediately. I had a scan the same day and an MRI the day after. The MRI confirmed that it wasn't a tumour. I was suffering from salpingitis (an inflammation of the fallopian tubes caused by an infection). I was in the hospital for ten days and had all types of examination. I then went back home and back to the office for just two weeks before returning to the hospital to have surgery. The surgery was carried out by two surgeons: the Gynaecologist and a specialist on the vital organs. They were used to working together and they did wonderful work. They did a full hysterectomy and removed both my ovaries and the fallopian

tubes. The surgery report is too complex for me to understand it all, but the list of problems they found was, to say the least, extensive.

After three months of continued suffering, the external healing was completed. I can now do almost whatever I want. I still just have weird sensations, like a stomach made from cardboard. I gained some weight of course ... I'm consulting a naturopath. She helps me to find new rules, frames of reference and ways to live. She helps me adjust my diet to my levels of activity and also helps me to formulate my nutritional needs and gives me exercises adapted specially to my needs.

I know that I wasn't "listening to me" enough. I know that I'm more used to helping others than to ask for help.

Medical personnel can be really hurtful. I was surprised that nobody listened to me seriously, even when things became so bad and that Doctors failed me. I was only helped by exceptional Doctors and Consultants. It was almost luck that I found them.

Now I'm cured. I want to have the chance to live an exciting new part of my life. I don't know if anything can be learned from my experience, but if I can help anyone with my story, I will be so happy!

# ManKind - it's good to talk

***An inspirational story and initiative from Paul Roskilly, ex-Police Officer and joint founder of ManKind (with Ian Pickard) - a men's support group now working online and having a great impact.***

I was a Police Officer for 30 years until my retirement in 2007. Whilst I thoroughly enjoyed my career, the nature of the job sometimes meant that I was exposed to stressful and upsetting incidents. One incident when I was a firearms officer contributed to me having a mental breakdown and being diagnosed with PTSD. Following treatment, which really helped, I was able to return to duty, however I still have periodic bouts of anxiety and depression.

After leaving the Police I wanted to use my experiences to help others. I became a Samaritan and a Mental Health First Aid Instructor. In 2018 I formed the Wellbeing and Performance Company, which passionately promotes better

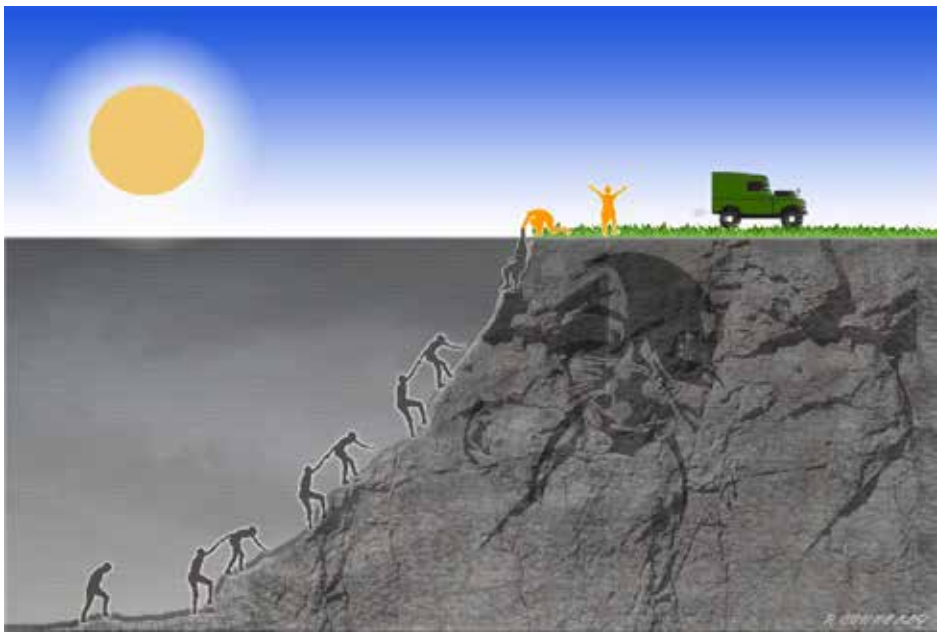
mental health in the workplace. Alongside my journey, Ian Pickard, a Health and Safety consultant in the building industry, had been witnessing something of an awakening to mental health issues within that sector. On average, two men from the sector commit suicide each day and 75% of all suicide victims are men.

***Patience, understanding, solidarity: another point of view to a lot of things***

In the Autumn of 2019, a friend of ours sadly took his own life. As often is said, this came as a total shock to his family, friends and local community.

Ian and I talked about how we could better support men who were suffering with their mental health. How could we break the stigma attached to mental health and provide a safe space to allow men like us to share their feelings and support each other.

Inspired by a project in Hampshire, we decided to form a local support group for men and **ManKind** was formed. We had our first meeting in February 2020 in a local café. The inaugural get-together attracted 12 men, some were friends, there to support Ian and I on our new venture, and some were strangers, who had come across details of our meeting on our Facebook page. We sat together in the café and, over a coffee, we just talked. Everyone shared something of their own mental health journey.



Picture by Bob Connolly

It's not always easy to talk. Even more so for men, who are battling against years of ingrained reminders to "man up". It takes real courage to admit that you're struggling. One of the group told us he had walked past the café four times before he'd been able to join us. Another had sworn to himself that he would turn up, listen to the others, but say nothing. Instead, he shared his story, feeling it was a safe space to be able to open up. We managed one more meeting and then the Covid lockdown arrived. Quickly modernising ourselves and realising we needed to move with the times, we switched to online meetings and increased them to once a week (18:30 to 20:30 every Wednesday).

One of the guys commented, "It's a non-judgemental group of like-minded, emotionally true men, brave enough to express light and dark feelings in a safe space, allowing different perspectives and sharing solid non-intrusive unanimous support. Most importantly a well-knit brotherhood".

***A place where you'll never have to apologise for admitting that you are struggling today.***

We've enjoyed welcoming the new members online. The support they give each other is both emotional and inspirational. We talk about coping strategies and available therapies, but it's the emotional bond that brings people back every week. Interestingly, some of the group have said that online meetings are easier for them to attend and they are not sure they would come if it needed them to physically walk through the door.

We also have a WhatsApp group for our ManKind community to stay in touch with one another during the week

between meetings. People can post how they are feeling and also share inspirational or supportive messages or songs (our playlist continues to grow!).

ManKind has just registered as a Community Interest Company with the intention of raising funds so we can provide appropriate mental health support to our guys. We have also developed a fantastic link with **The Old Bank Wellbeing Trust** who have been a tremendous support to us over recent months. We refer men to each other and currently have four of our group receiving counselling through them.

I asked what belonging to ManKind meant to them and the replies I got are the quotes dotted around this article. I can't think of a better way of explaining the value of what we have all created. One even wrote a short verse:

***A place where you can share the things that you are afraid to share with others for fear of being judged***

*There have been times when I've been feeling low and want to be alone,*
*I avoided going to see the ManKind team and faced it on my own.*
*But later, when my head was right, I thought, 'what a silly thing to do',*
*Because, all those lovely ManKind guys are always there for you.*
*So now, if I am feeling down and cannot see an end*
*I visit my ManKind brothers, where I know I've got a friend.*

We have just celebrated our first year anniversary and I am enormously proud of what we have achieved in that time.

If you are struggling with your own mental health, or you are worried about a man in your life, please get in touch - you will always be welcomed and heard in our community. There is no commitment required and no pressure to attend. The get-togethers are set up for people to come and go, to dip-in and dip-out as they need to. It is totally free and by sharing your story, you make it easier for others to share as well.

***A place where you can learn from other people's problems and offer your support***

I went an awfully long time without letting anyone see that I was suffering inside. I couldn't allow people to see my vulnerability, to see my "weakness".

I have realised now that there is little stronger and more powerful than allowing others to see and support you through the raw and painful days of your life, as well as share with you the best ones.

If you have any questions about ManKind or are considering starting a similar group and would like to talk it through, please do get in touch with me at **info@mankindcic.co.uk**

# The midlife mirror

***Back** in 1987 I trained to be a personal branding consultant and was one of the first in the UK, trained by the amazing Carolyn Miller who was trained in the US by Mary Spillane. Then, says Katie, I was a woman in my late 20s who, having experienced her teenage years as a period of bullying and being self-conscious about my appearance, was passionate that everybody, woman or man, should feel confident in who they were and never feel 'less' because of how they looked. My message was, and still is, you are fabulous, regardless of age, budget or size.*

I very quickly learnt that my clients didn't seek my guidance because they wanted to know what to wear. They sought me out because they were ready to change: to see themselves, sometimes for the first time, to blossom and shine. This led me to train in counselling as I realised that was what I was actually doing. And that led to a coaching qualification and to developing a five-day women's personal development and leadership programme (which I still run, now co-delivering with a man - Roger!).

As a result, I found myself working with 40 public and private sector organisations on their gender diversity agendas, which led to running my own training, coaching and consultancy company. Then, Roger and I joined forces a number of years ago which led to the work we now do with people on midlife!

It's funny how life unfolds! Mine has always been organic. I've rarely had a plan: rather I've always had my eyes wide open, been aware of the opportunities in front of my nose and followed those that have shown potential to explore, wherever they may lead me.

One of my mantras throughout life has been, "Say yes to everything and figure out the details later". Most of the time that has worked in my favour and, when it hasn't, it has offered an excellent learning opportunity for personal growth!

As I look in my own midlife mirror, what I see is that everything I've done professionally and personally has had a recurring theme running through it: be true to yourself. That is the same, whether I'm thinking of myself or working with clients or in my personal life. We have to be true to ourselves, mainly because everyone else is taken ☺. Knowing our passions (an overly used word nowadays, however it is appropriate in this context); understanding our natural strengths; and being aware of the difference we want to make with who we are, all

come together and influence the direction(s) we take in life and the decisions we make.

My constant theme, and the one that has directed and influenced all my professional decisions has been the "passion" to support people in realising their full potential – in whatever way that shows up for them. Whether it was showing them the best styles and colours that made them "pop", or enabling them to uncover their hidden dreams and visions with coaching. Or encouraging them to step up, step out and step ahead in their career, or facilitating them to work for / run a company that was value led and fit for purpose, or supporting them through the natural rite of passage that is midlife. I have always been, and continue to be, passionate for people to expand, shine and flourish.

So, as I look back and make eye contact with my reflection, I ask myself if I would change anything. I have had an interesting life for sure, not all of it positive - in fact, much of the first 30 years was hugely traumatic. However, I wouldn't change anything. I value the trauma, I acknowledge the difficult times as pivotal points in my life that have shaped me. I respect, admire and like the woman who looks back at me every morning in the bathroom mirror.

As a woman at her own midlife, so far I have a life well-lived. It's been erratic and somewhat random at times. I have made some questionable decisions (personally as well as professionally). I am, perhaps, not in the position I originally imagined I would be at the age I am now. However, I would still not change a thing. I continue to "say yes to everything and figure out the details later". I continue to challenge myself (at the age of 61, I am in the midst of doing an MA). I continue to explore what life has to offer and I still don't really have a plan. I will work for as long as people want me. That could be until next year, or that could be until I am well into my next decade (or possibly even later – look at Prue Leith, Mary Berry and Jane Fonda!).

***say yes to everything and figure out the details later***

So, I urge all of you, when looking into your own midlife mirror, never to limit yourself or your possibilities, to acknowledge your accomplishments and to focus on the first word of that phrase: midlife. You are only at the half-way point. There's a whole second half awaiting you, full of possibility, exploration, discovery and joy - go for it!

By the way, I still do personal branding and I now train others to do this as a career!

# Hypnosis and the menopause

***When you think of effective therapy for peri-menopausal symptoms, hypnotherapy is probably not the first thing that springs to mind. You probably think of HRT first, which could be likened to the loud, brash, but effective youngster who everyone has heard of. Then there is CBT, the calm, dependable member of the family. Finally, hypnotherapy, perhaps like a maiden aunt, who everyone seems to have forgotten about, but who has a lot to offer if only we would give her a chance, says Louise Coyle, Cognitive Behavioural Hypnotherapist.***

The evidence for the benefits of hypnotherapy in helping women overcome all kinds of peri-menopausal symptoms is very strong. The idea that you can change your experience of the physical symptoms of the peri-menopause simply by listening to someone talk seems to stretch our credulity, yet, in a nutshell, that is what we are doing when we practise hypnosis.

First of all, let me explain that hypnotherapy bears little resemblance to the stage hypnosis tricks that many of us have enjoyed, possibly in a bar while on holiday, or more recent TV specials. As a hypnotherapist, I always explain that I am not taking control of your mind, nor will you ever be asked to do something that you don't wish to.

Instead, hypnotherapy enables us to access those parts of our brain that are able to achieve remarkable changes in our body. Think about the placebo effect for a moment: this describes the brain's ability to heal disease or make lasting changes to our body's structure and functioning. When we practise hypnosis, it is like we can supercharge the placebo response to achieve all kinds of changes in our body and our brain. And while we are reaping these rewards, we feel calm, relaxed and peaceful.

So, what do I mean when I say "hypnosis"? What does it actually feel like? I describe hypnosis as a feeling of deep physical relaxation, with a focussing of the imagination on imagery and positive suggestions for change. It might feel different depending on the day or the circumstances, whether you are in the presence of the hypnotherapist or listening to a recording of their voice, but it is a skill that everyone can learn and everyone can get better with practice.

***deep relaxation ...***
***positive change***

Researchers have looked at whether hypnosis can help one of the main symptoms of menopause - the hot flushes. Women taking part in the study were randomly allocated to one of two groups. One group had five weekly sessions of hypnosis, the other had five weekly sessions of talking to a therapist about their symptoms (they called this group the structured attention group). The women were asked to keep diaries to record when they had flushes and how much they interfered with their daily life and they wore sensors that regularly measured skin temperature. The results showed that hypnosis sessions reduced hot flushes by as much as 80% and the women in this group also experienced improvements in quality of life and symptoms of anxiety and depression. This was a statistically significant improvement over

the control group. The benefits also lasted for up to three months when the women were followed up. The women experienced fewer flushes and the ones they did have were of lower intensity.

The way in which hypnosis works for tackling hot flushes is by getting a woman, during the sessions, to relax deeply and focus her thoughts and imagination on cooling imagery. Perhaps thinking about a cool shower or waterfall, or imagining the sensation of a cool drink slipping down the throat on a hot day. Using the brain in this way helps it to regain control over the body's internal thermostat, in much the same way as someone can learn to control the level of pain they feel using hypnosis techniques.

There is also a considerable body of research that shows the beneficial effects of learning hypnosis for reducing anxiety, tackling problems of insomnia and helping with issues such as low self-esteem and lack of self-confidence - all problems that can crop up for peri-menopausal women.

One of the useful things about hypnosis is that it can be provided either one-to-one or for small groups of women together, making it a helpful option for the business that wants to offer something of benefit to midlife women in a group setting. In fact, a few enlightened workplaces have already begun offering group hypnotherapy sessions for their staff.

***A skill for a better life!***

Once you have learned the skills of going into hypnosis, it is something that you can practice for the rest of your life that will help you to make changes in your thinking, behaviour and how you feel. A skill for a better life! If you would like any information, please contact me through my **Changing Times Facebook** page.

# That FAB feeling

***Negativity** seems to be all around us at the moment. Not surprising, really, I suppose. Wall-to-wall negative news, fears over our health and safety, being "locked away" and prevented from seeing our friends or relations and then there's possible work, financial and relationship challenges. The problem is that negativity drags us down and the continual reinforcement of the bad messages can make it even more stressful and "real". If we surround ourselves with "negative energy" it's likely to have a negative effect. Conversely, if we surround ourselves with positive energy, it will make our lives more enjoyable and altogether better! Guess what I prefer, says Roger!*

Of course, we're not talking about Clinical Depression here – if anyone feels that they might need help, then it's really important to consult a professional.

We might not want to move away from some negative people - they might be important to us, despite their "dementor-like" sapping of our energy. That's OK and we just have to be aware of it and modify our response. For others, we might just be happy to distance ourselves from them if they are not so important to us.


Identify the positive people in your contacts - and try to find more. Ones that motivate and energise you. Some will be high-energy and help drive us forward actively. Others will be positive, but more laid-back, and help us to feel emotionally and spiritually positive whilst being able to relax a bit. A good balance of the two seems like a plan!

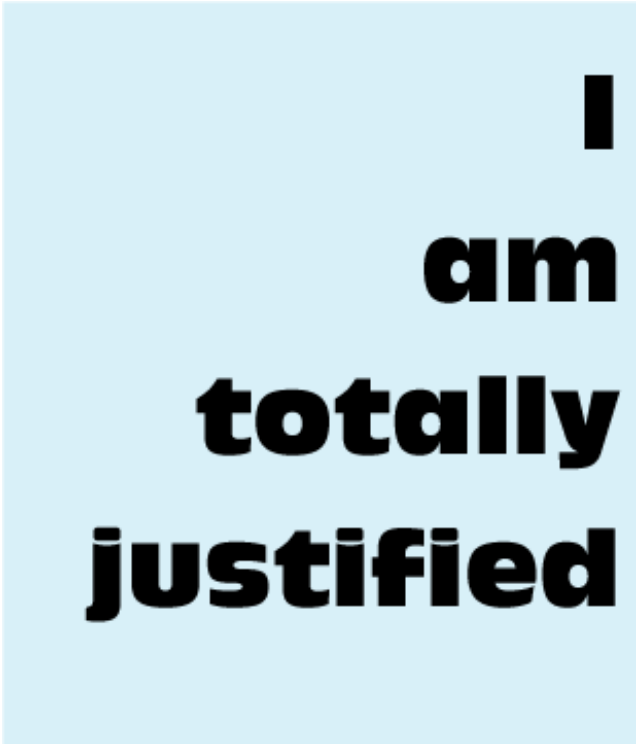
So, what else can we do to help ourselves and those around us?

The answer to that depends on whether we really want to do something. That might seem strange, but in my therapy work, I find people who are "trapped" with "golden handcuffs". They get something out of having their problems that makes them hold on to them for fear of change. For most, it's a sub-conscious thing. That internal voice (self-talk) says something like, "If I stop blaming the world and finding fault with everyone and everything, I'll have to take responsibility for things and do something about it. If I don't blame others for everything, then it's down to me!"

The first (and arguably, most important) thing, is to recognise if there's an issue and to want (really want!) to do something about it. Be prepared to take responsibility: to be the change you want to be.

One thing to watch out for is attributing blame to others and things. Most of us have a lot of people around us who are always negative. They seem able to find fault with everything and everyone - and can usually justify their own behaviour with amazing skill. "It's totally unreasonable that s/he leaves their stuff around. It's OK for me because I need to have the space because of my work ( / my hobby / my whatever)."

They are "rulers of the world" – everyone else is at fault and they have none. "Those drivers" … "those idiots who run the place" … "that stupid person" … sadly, we've heard it all too often And, should you ever question something, then you're likely to get snapped at and get a comment like, "You're always so critical and find fault in everything I say or do". If anyone were to treat them the way they treat others, it would cause huge problems.




Think about someone who always criticises. What might they get out of it? It might make them feel better "knowing" everything and everyone are so "bad". It might compensate them in some way for their low self-esteem - or, more accurately, make them ***think*** it does. In reality, it's their sub-conscious mind keeping them trapped in a bad place. Of course, that's their privilege (if it's ***really*** what they want!), but to affect others isn't ethical - or fair. In fact, it's cruel and selfish.

Their self-talk (that little, powerful voice inside) is driving them into a downward spiral of negativity which reinforces their low self-esteem, makes them more at odds with the world and those around them and, ultimately, can lead to anxiety and depression.

This has a fancy name (if you like that sort of thing!) - Fundamental Attribution Bias (FAB). And the saddest thing is how frequently we come across it. People view their behaviour / attitudes / views as being necessary and totally acceptable and those of others meaning that they are bad people. Think of "rule breakers" – that "political person" during Covid lockdown who should be fired for breaking the rules, but it's OK for me to go round to my friend's (relation's …) for a coffee, as I'm feeling really down and we miss each other".

They're not bad people - just in a bad place. Maybe poor self-esteem, lacking self-confidence or feeling inadequate, low or stressed. So, what to do?

Identify what the things are that might encourage you to feel negativity. BUT, the unpalatable bit is that the thing (event, person, task, object …) cannot cause negativity itself - it's your reaction to it that does. Ouch!! Back to taking responsibility and really wanting to change! So, when you identify something, then what? One simple technique is the "Three As". We talk about a better option in our workshops, but that would take much longer and the 3As works and is simple:

### Alter or change the situation

Alter your behaviour to reduce the likelihood of stress arising or the impact if it does. This requires perseverance, flexibility and imagination to change your pattern of behaviour to get a better result. It's often the most promising strategy, though. Small changes can have great effects. If listening to the news or Social Media chatter causes you negative feelings, change your approach. Choose to get only one "fix" per day and select the source with least "dramatisation".

### Avoid the situation

If possible, try to avoid the situation, person or "thing" that triggers stress. If Social Media are causing you anguish, switch off for a while - or longer! Change who you interact with. If someone is particularly stress-causing, don't read their messages and don't get into exchanges with them. You could cut them off, but they maybe going through troublesome times too and you might lose a friend who, when this is behind us, you want to pick up with again.

### Accept

There are some things we just can't avoid or change. In these cases, it's best to accept that the situation will cause us some stress - if we allow it to (remember: the situation doesn't cause us stress – it is our reaction to it). If someone around causes us stress (maybe someone needing our support or care) and we don't want to change the situation, just accept there will be some stress, but find ways to minimise it or an "antidote" for it. "After, I'll reward myself with …"

A good way is to use "affirmations". Not a word I like, but the technique really works - if you want it to! Think of how it will feel when those feelings are gone and you're firing on all cylinders, happy, contented, satisfied and fulfilled. Now bring that into the present - as thought you're already there, you've already achieved it. Fix that thought. Get those positive vibes! Turn up the volume, turn up the brightness and the sound. Make it your "vision". Think of it in the present tense - you're there now and enjoying it so much that it makes you tingle! Do that every morning and evening for a couple of weeks and the "new you" becomes the dominant image for your sub-conscious mind.

***it really works - if you want it to!***

This works in the same way (but with the opposite effect) to the continuous exposure to negative news, Social Media and negative people. It reinforces the positive and helps our sub-conscious auto-pilot navigate us into better waters!

# Acupuncture for midlife

***Acupuncture** is part of the world's oldest and most widely-used medical system - Chinese medicine. Its effects have been documented for 1000s of years, treating all manner of ailments. In China, an acupuncturist is viewed as a general medicine practitioner, says Jo Darling,.*

Acupuncture is quite well known for pain relief, but the truth is, whilst it's brilliant at relieving pain, it's also fantastic for lots of health issues. That's because acupuncturists are always looking for the root of the issue, the overall imbalance if you like, and treating that. The symptoms you experience are parts of a jigsaw and only when you put them all together can you see the full picture.

In midlife, women going through menopause will experience a wide variety of issues. There's no such thing as a "standard" menopause. A skilled practitioner will bring all the issues together to decide on a diagnosis and treat each woman as an individual.

Issues such as anger, pain, PMT, brittle nails and vivid dreams would suggest one diagnosis, whilst urinary incontinence, weak knees and back and loss of motivation would indicate another.

## Emotions are important too

The other wonderful thing about acupuncture is that it puts all your health issues, including emotional problems, together to create a diagnosis. There is no separation between the mind and the body and increasingly we're acknowledging this in the west too.

How often have you been really stressed mentally and found your shoulders up around your ears, creating tension and making you feel worse? And how about if you're really worrying about something, how that zaps your energy? These are issues that begin as mental stresses and manifest through the body, bringing about physical illness.

## How does acupuncture work?

It takes three years to learn acupuncture. It's a big subject, but, in a nutshell, it's about energy. It's about energy flowing round the body freely and all the organs interacting to support and maintain each other.

Each organ has its own functions (often different to how we perceive them in the west).

Chinese medicine describes ageing as mostly about our Kidney energy declining. The kidneys are related to bones, head hair, moisturising, and cooling. This explains why bone issues, such as osteoporosis, hair loss, dryness of skin

and, for women, hot flushes occur. The kidney is connected to fear and motivation, emotions that are regularly seen in midlife patients and maybe goes someway to explain "midlife crisis" or fear of ageing.

Once an acupuncturist has formed a diagnosis, they then decide on a treatment plan, working with the relevant organ via different points which are found at specific places (along meridians) on the body.

Many acupuncturists use a minimal number of very fine needles and often you might feel a slight sensation as the needle is placed, but it's rarely uncomfortable and levels of hygiene are extremely high. No discomfort, no side effects and a relatively high level of good results, what's not to love!

## Harnessing the power of Chinese medical wisdom in midlife

The term *yang sheng* in Chinese refers to the adage "live well, live long". It's a remarkably simple recommendation that you should nourish yourself to have a full, healthy, long life. The principles are simple.

Eat well. Pay attention to what you eat, but also how you eat. Eat your biggest meal in the morning. Finish eating before you feel full. Eat regularly - breakfast, lunch and dinner. Eat mindfully while you sit and don't eat when you're stressed. Enjoy and savour your food, eating the best you can afford.

Rest well. Sleep is critical to our wellbeing. Getting enough, quality sleep enables our mind and body to recharge. Take the last hour before bed calmly and quietly. Don't get involved with over-stimulating activities and try to be asleep before 11pm.

Try to do all things in moderation (including moderation!). Overwork will affect your health, as will too much sex, too much exercise or anything that puts a strain on your body.

Take time for yourself and be in nature. Whether that's a walk on the beach, in the woods or an open green space - find time to just be.

Find joy. Make your heart sing whether that's literally singing, with others or in the shower, or gardening, being with a pet or playing a game.

## Small changes and lasting habits

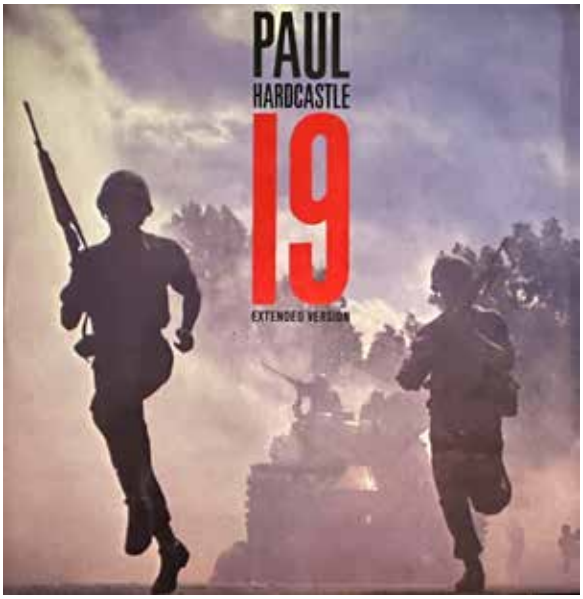
Most of us know how to live well, but many of us ignore ourselves even though we know, deep down, what we need. The principles of ***yang sheng*** may sound too simple to make a difference and can be easily dismissed, but sometimes a simple shift can make the biggest difference. Try it for 90 days and see how your life changes.

If you're suffering with midlife health issues, whether mental or physical, acupuncture is highly recommended. You'll be so surprised by the difference it can make to your life. The rewards are endless. The ultimate aim of a Chinese medicine practitioner is to work with their patient to prevent dis-ease and keep you well. A great practitioner will not only work with you on issues that you have, but they can also signpost the best type of exercise, diet and lifestyle, specifically for you. If you would like any information, please contact me via my web site: **Menopoised**.

# interview: Paul Hardcastle

## You recorded the song *"19"* in 1985 - what motivated you to write it?

I was reading the paper and it talked about the story of young people going to Vietnam to fight. Their average age was just 19 years old.




I just remembered what I was doing at 19 (only a few years earlier) - going to clubs, parties and so on. Hearing about these kids' stories – being in a strange country, fighting for their lives in a war that wasn't "popular", just trying to survive all day, every day – it was so powerful and it affected me deeply.

I thought I'd try to put it all to music, so I recorded a first attempt on a BetaMax video. But there was something missing. I couldn't work out what it was, but then I realised that I just wasn't getting the point across about how young these kids were.

By chance a new sampler dropped on my desk – it was called an Emulator 2 and it had 2 seconds of sampling time available. The only thing I could fit in was, "In Vietnam he was 19". It worked a bit like a word processor – you could cut and past the phrase. When I brought it up and hit the key, of course the key just repeated like it normally does on the computer keyboard and it just went, "N-n-n-n-nineteen". That was it! It made the point. I wasn't sure how it would go down, but it was a raving success.

In today's speak, it went viral. It was on TV shows, whenever people used a word starting with N, they'd do the "n-n-n-n" thing. It was just everywhere.

I was number 1 in 13 different countries. It was the most exciting time of my life. I was just married and having my first kid. I was out-selling Madonna. It was a whirlwind - unbelievable.


Baroness Meacher, Paul Hardcastle (L) and Bob Paxman, Talking2Minds (R)

And then, 30 years later in 2015, you helped me re-launch it, Roger, in the House of Lords. What an event! You got Baroness Meacher to host us. It was amazing and I donated the profits from the re-launch to Talking2Minds, a charity working to help people with PTSD. I know you're a Therapist with them - it's such important work.

Of course, now, we've got Covid-19. It's a very bitter-sweet reminder. I just have to separate the two. The pandemic is just dreadful.

## What triggered your interest in mental health?

It was the result of the song. I got over 2000 letters from Vietnam Vets - real letters, it was long before e-mail. They were telling me how they felt and explained what happened. Horror stories of when cars backfire and they're back there or the guy that nearly strangled his wife in their sleep. Music triggers things in the human brain and takes you back.

***In World War II the average age of the combat soldier was twenty-six***

***In Vietnam he was nineteen***
***N-n-n-n-nineteen***

I'm no expert in mental health and I think the song did as much as it could at the time. I'd raised awareness in what went on in the war. Later, when we first met for the re-release, I thought about it again. That's why I gave the proceeds to Talking2Minds. Of course, at the moment, with Covid, we're seeing some people's mental health being affected.

## How has Covid been for you?

My first reaction was, is this really happening? I feel so sorry for younger people - they're missing out on it for a whole year or more. That's just my point of view - others may think differently, of course.

I've been lucky - I've had what I'd classify as a fantastic life. A great wife, kids, a house, cars and stuff. And then Covid hit. I think it's because I'd had it easy before that it's affected me in the way it has.


Dolores and Paul

I think that if people have a hard life and a lot of things going on all the time, they're more resilient and can deal with things better that those of us who've had it relatively easy. When this hit, I felt that life was crap. There's a pub just down the road that's closed, so I can't just go and meet mates there or in restaurants. My favourite noodle bar is closed. I can't go out when I want and do what I want. I might not actually want to do these things, but it's the fact that ***I can't do them*** that does my head in.

I wake up in the morning and I seem to have lost my motivation, that buzz to do things. I've never been an early riser and now I linger more in bed in the mornings and then get up to start my day. To be honest, I'm a bit pissed off with myself to feel like this. Normally, I'm good at doing things and get on with jobs around the house, work and stuff.

The good thing is that I'm in my studio working on a new album. Sometimes I do it because I have to force myself – there's maybe nothing else to do. You can't force creativity, though. Sometimes I can spend three hours, but sometimes only 30 minutes. I used to spend 11 or 12 hours in the studio and think nothing of it.

But, there's a light on the horizon. The vaccine is a miracle of science – what would normally take 10 years to do, they've done in less than one. It's a no-brainer. As soon as I can have it, I'll be there. All this bull about risks. We're good in this country - we test things properly and it wouldn't be on the market if it weren't safe. Everything has risk and the risk of ***not*** taking it is huge.

## What other effects have you noticed?

I've learnt a lot about how the brain works in the last year - well, my brain! You can't switch it off. You say to yourself, "I'm not going to think about that" - yeah, right! You can't stop it. In fact that'll probably make you think more about it. It's like, "Don't think about elephants". What's the first thing you think about?

I tried meditation, but it didn't work for me. "Close your eyes and empty your mind." No way! It just doesn't work for me.

Our brains are all wired differently. Like addictions - alcohol, gambling or drugs. I used to think, "What idiots". But, it's the way their brains work and, where I'd criticise people in the past, now I can understand them more. Sometimes we can't stop our brains telling us to do things.

And it's not only in times of stress. Some people's brains just seem to be wired up wrong. Whether it's due to their lives or genes, who knows, but their brains just make them do stuff we don't understand or think is dreadful. I suppose it's a bit like computers. One little error in the code - the programme - and the thing fails to work properly. Our brains have millions and millions of lines of code, so there's plenty of chance things can go wrong, I guess. At least we can re-boot our computers - I wish I had a re-boot for my brain sometimes.

What causes a mother to kill her baby, a son to kill his parents, someone to commit horrendous abuse or violence? Something must have gone wrong. And that's coming back to the PTSD. I remember one of your guys telling me he had to get out of the country and fight as a mercenary because of the trauma he was suffering. He just couldn't control his brain until he did the therapy. People say, "Pull yourself together" and crap like that. They have absolutely no idea what's going on in that person's brain.

The only thing that stops us doing things is if we really want to. We have to see the benefits to ourselves.

## Do you think that the pandemic has taught us anything?

Definitely. For a start, I don't think that "normal" will be like what it was before. This will be with us for a very long time. We're learning how to live with it and I guess that'll continue - and, this is just one thing. It's not the only thing that can go wrong and we might have more in the future.

What pisses me off is the fact that all these so-called "wet markets" are still happening in countries round the world. Until we actually do something about things like that, the chances of something else happening are always there. If you handle chicken, you wash your hands to avoid salmonella. Imagine if you've got exotic animals in tiny cages stacked on top of each other – bats with dogs with chickens with snakes … It's got to be a recipe for potential disaster. Surely it's got to stop if we want to reduce the risks.

Did you know? ...

Paul wrote ***Wizard*** - the theme tune to ***Top of the Pops***

Paul is still at the top of the American charts - with ***Welcome to the beach***


billboard Powered By BDS
SMOOTH JAZZ NATIONAL AIRPLAY
Issue Date: 4/10/2021

| TW | LW | WEEKS ON | ARTIST TITLE / IMPRINT / PROMOTIONAL LABEL | PLAYS TW | PLAYS +/- | AUDIENCE MILLIONS | AUDIENCE RANK |
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| | | | *** NO. 1 *** | | | | |
| 1 | 2 | 8 | PAUL HARDCASTLE Welcome To The Beach<br>TRIPPIN N RHYTHM<br>1 week(s) at number 1 | 201 | +8 | 0.099 | 1 |

And then there's the biological weapons laboratories - some are supposed to be there to research in case someone else does something. The best thing would be to burn the lot of them. We've seen what happens if something goes wrong by accident - however that happened, from a market or somewhere else. We don't need that sort of thing happening "on purpose".

Of course, we've all learnt to be more respectful - wearing masks, talking to people when we're out walking, stepping aside to let people pass. I think some of that will continue, but we'll probably go back to the old ways a bit.

At least we should be better prepared in the future if something else happens. We can learn to take more care too – try to stop or avoid some of the risks. Like the markets - they can be stopped and should be - it's simple, common sense.

### How do you think we go forward from here?

I can only say how I feel. When the first lockdown stopped, I felt like a different person. When we're finally out the other side (well, as much as we can be) I think people will feel much better. Of course, some people will still suffer and I hope they'll get over it quickly too. We'll still have to take sensible precautions, but it'll feel quite different.

Those people who've lost their jobs or business or house will still be suffering. They've got the financial situation on top of everything else. It will take time for them to recover.

Let's hope that the economy recovers quickly. It's going to be a multi-tiered recovery - some will be quicker than others and for some it may take months or even years.

We've all got to do our own thing - we're all different. I guess all we can do is our best and help each other as much as we can.

# In for a stretch

***Flexibility** is a key component of fitness that can allow you to improve your performance on the tennis court, or by just being able to put your shoes on independently, says Nikki Hughes, our regular columnist and fitness expert!*

Over this past year I think most of us will agree we have been more dormant than usual. Staying inside and working from home means a lot more sitting, potentially in the same position for prolonged periods. Your body adapts to the demands imposed on it, or not in this case. A lack of movement may lead to relative stiffness and over lengthening in muscles.

So, if you're taking the time to invest in your health and returning to activity, take a moment to think about preparing to get moving. Failing to prepare is preparing to fail. Taking part

### Hip flexor Stretch

Kneeling on the floor, place your left leg out in front of you (use a cushion if needed).

Keeping your chest high and shoulders back, gently press your right hip forward and squeeze the right glute to feel the stretch in the front of your hip. To increase the stretch, raise the right arm.

in a new exercise session with tight muscles and a lack of mobility can mean you will not only find the movements more challenging, or even impossible, but also put yourself at a greater risk of injury.

Stretching our muscles will keep them flexible and strong and help increase the ability of joints to move through their full range of motion. I've included three here for areas of the body where many people exeperience tightness.

It is important to realise there are different types and techniques of stretching. Choosing which one will be best for you mainly depends on what you are trying to achieve. Different joints move in different ways, individually and together. So stretching may mean bending, twisting or reaching.

## Pulse raiser

When it comes to preparing for any exercise, it's always a good idea to do a few minutes of movement prior to a stretch routine. Walking or a basic pulse raiser will deliver more blood to the muscles, helping to warm them and increase flexibility prior to stretching.

Think of a muscle just like a cold and disused elastic band. If you pull aggressively and quickly on that elastic band, it's likely to tear or even snap. But if the elastic is warm and mobile, it will perform better under pressure.

## Chest / shoulder stretch

You can use a doorway / wall for this stretch. Place one arm against the wall / frame with your elbow level with your shoulder.

Relax your shoulder as you lean forward allowing your chest and shoulders to relax and stretch.

## Static stretching

When performing static stretching (no movement), I would recommend active static stretching. This means that you are contracting the opposing muscle acting on the joint in the direction you want to stretch. For example, contracting the glutes to get a stretch of the hip flexors. This helps ensure that you are stretching the muscles not the ligaments and laying down some stability of the newly-accessed range of motion.

## Lower back / glute stretch

Lying flat on the floor, slowly bring one knee towards you and grasp your knee with both hands.

Gently pull your knee into your body, breathing steadily, to a position you can hold comfortably and feel the stretch in the lower back and glute area.

During static stretching you should feel stretch and tension, not pain or discomfort. Try and hold the stretch for 5 deep, slow breaths. If you are unable to maintain the stretch for this time, you may well be pushing too hard.

## Dynamic stretching

Dynamic (with movement) stretching will gradually increase the range of motion of a particular movement, usually related to that which you will be performing during your exercise or activity. These movements will be performed at the beginning of your session and help prepare the body for what's to come. Dynamic stretches will start with a smaller movement and gradually increase.

For more information or to contact Nikki, please visit **Nikki's Facebook page**

# Sexual health matters for all ages

***There is no age limit to experiencing healthy sex and wellness. There are things that can interfere with that wellness, but that does not mean there isn't a solution. One example is premature ejaculation, says Dr Jesús Rodríguez, Sexologist and Medical Manager of Myhixel.***

Premature Ejaculation (PE) is when a man reaches the climax in a very short time. It is medically regarded as being less than an average of three minutes. It is the world's most frequent sexual dysfunction. Some studies have shown that it is prevalent in 20-30% of the general population and that its prevalence proportionally increases with age.

It affects one in three men, regardless of age. Only 9% of men with PE reported that they consulted a physician for the condition. 81.9% of these had to initiate the conversation about PE and 91.5% reported little or no improvement as a result of seeking treatment.

It is important to clarify that, even though it is commonly thought that premature ejaculation is due to physical problems, most people suffer lack of climax control from psychological reasons. This means that it's a condition that, in most of the cases, can be naturally solved.

## Causes of PE at any age

According to the experts, there are three types of Premature Ejaculation:

- Chronic cases: These are men who have never had ejaculatory control. They don't last any longer than one to three minutes and, in some cases, even less.
- Acquired or occasional: These are men who have acquired a lack of ejaculatory control over time, or to whom it occurs occasionally.
- Non-specific: These are men who are unsatisfied with their ejaculatory control, regardless of its duration, and would like to improve it.

It is very important to know that PE is not permanent and once you start to suffer from it, it does not mean that you will have it forever.

Men don't often talk about their sexual concerns and it is even more difficult for men in middle age. It is time to break the taboos and focus on the importance of intimate wellness at any age.

There are many tips to help a couple's sex life become more active, to break the routine or to reignite the spark.

Trying new sexual games, improving lifestyle habits like healthy eating or innovating in bed are just a few of the things that can help improve sexual health. When we talk about innovating, we mean acquiring new experiences, like improving ejaculation control and being able to choose when to reach climax. In this context, there are natural solutions that are the perfect alternative for any age, so there is no need to take any pills or chemical treatments. There are also technological and medical innovations that make it possible to improve ejaculatory control.

In fact, as a researcher, I was involved in the development of Myhixel Med, a device to help overcome premature ejaculation, and Myhixel TR to improve climax control. These are the perfect complements for your night table to help to improve intimate life and enjoyment, both for you and your partner.

For more information: **myhixel.com**

# Free online talks with Professor Isaac Manyonda and Dr Vikram Talaulikar

We are excited to launch a series of ***FREE*** monthly online talks with our Clinical Partners, The Menopause Clinic:

***Thursday 6th May 2021: 18:30 – 19:15 looking at the link between oestrogen and resistance to Covid-19***

Each month we will cover a particular aspect of the menopause and there will be an opportunity for live Q&A.

Subsequent talks will be on the ***first Thursday of every month*** and will include:

- HRT and breast cancer, the most up-to-date information
- The importance of testosterone for women
- HRT – when is the best time to start and how long can a woman remain on it
- Premature ovarian insufficiency (POI)
- The heart and menopause impact
- The brain and menopause impact
- Osteoporosis – why it happens and how we can support our bone health

Midlife Matters Menopause Meetings
Menopause Clinic, London

To secure your **FREE** place click on the Eventbrite link here:
**https://www.eventbrite.co.uk/e/midlife-matters-menopause-meetings-tickets-149705999675**

# News
## read all about it!

### Men are from Mars and women are from Venus … ??

Well, we know we're different in a number of ways! What's becoming evident with more research is how different our brains can be in terms of our long-term health. Dr Lisa Mosconi's book *The XX Brain* offers some interesting information, summarised in the article here:
https://theinformant.co.nz/how-can-a-woman-protect-herself-from-alzheimers-disease

### The psychology and emotions of sex

Vaginal atrophy (a delightful term!) is very common for women at menopause and an issue many women do not feel comfortable discussing (at home or with their GP). This excellent article discusses the reasons and what options are available:

https://www.everydayhealth.com/menopause/sex-after-menopause-the-psychological-factor

### How to have a happy vagina

We know about the importance of a good microbiome for our gut, who knew that it was equally important for our vagina? Here's everything you need to know.

https://www.mindbodygreen.com/articles/everything-that-can-mess-with-your-vaginal-microbiome-from-md

### Nipples: is there ever an "average"?

Women may compare breast size with other women, but how many of us have considered the amazing variety of nipples? Is there such a thing as "normal and average" in the nipple department? Read on to find out …

https://www.healthline.com/health/nipple-facts-male-and-female

### Peppa Pig meets 21st century man

The view of today's masculinity is changing, but are adverts (and even children's books) keeping up with those changes? Or are men still being portrayed as outdated stereotypes? Draw your own conclusions:

https://www.thedrum.com/news/2021/03/01/stereotypes-ads-are-bad-men-s-health-so-what-s-the-cure-reinvent-or-remove

### Making modern masculinity

"The Guardian is great at covering women's issues, but the more I spoke to men ... the more urgent certain issues felt, and the more it felt like we needed to build bridges." says film-maker Iman Amrani

https://www.theguardian.com/membership/2021/feb/22/modern-masculinity-inside-video-series

### Exercise pumping not T-gel pumping!

Interesting research from the American Heart Association. A good fitness regime has beneficial effects on men's heart health and raises testosterone levels.

https://www.eurekalert.org/pub_releases/2021-02/aha-sep021721.php

### Pesky penis problems

Penile sensitivity can happen to any man for a number of reasons. This great article from Men's Health gives some of the possible reasons and how to manage them.

https://www.menshealth.com/health/a35588696/penis-numb-lost-sensitivity

## Ancient India meets modern-day West?

For women who are not able, or do not wish, to use HRT, ashwagandha may well offer the answer.

**https://www.thehealthsite.com/photo-gallery/ashwagandha-benefits-5-reasons-women-should-consider-taking-this-ancient-herb-789548**

In fact, ashwagandha (also known as Indian Ginseng) has been used in Ayurvedic medicine for many centuries ....

... It has been implicated in many things, including brain health, reduction of anxiety, increased testosterone levels, as an anti-inflammatory, for muscles and against cholesterol. We talk about it in our Mastering Male Midlife sessions. This is a reasonable article as a summary, but with links to scientific research:

**https://www.healthline.com/nutrition/12-proven-ashwagandha-benefits**

## A good sob is good for the heart

"Bottling it up" isn't good for any of us. It's been linked with suppressing the immune system, cardiovascular disease, hypertension, as well as with mental health conditions, including stress, anxiety and depression. Here's information about how and why crying can help.

**https://www.health.harvard.edu/blog/is-crying-good-for-you-2021030122020**

## Getting older doesn't mean growing up!

"We get old because we stop playing, we don't stop playing because we get old" How true! The importance of maintaining an element of "silliness" is vital at midlife and beyond. Here's some great advice that we can all incorporate into our lives.

**https://www.theguardian.com/lifeandstyle/2021/jan/09/youve-got-to-stay-silly-secrets-of-joy-from-the-over-70s**

## The menopause and LGBTQ+

"In a world in which the LGBTQ+ community is growing in visibility, thinking and speaking about menopause in a way that's inclusive of everyone will only help more people to access the help they need at a difficult time."

**https://www.goodhousekeeping.com/uk/health/a35227597/lgbtq-menopause-experience**

## Immune systems and gender

Men and women differ in a variety of obvious ways, however the differences in our immune systems are only recently becoming known. This article supports our lead article in this issue about Covid-19 and oestrogen. Men are more at risk than women.

**https://science.sciencemag.org/content/371/6527/347**

## Migraines and medication

Migraines can be utterly debilitating for people and often require strong medication to combat. Might sufferers be able to alleviate the symptoms via supplements instead? Read on to find out.

**https://www.medicalnewstoday.com/articles/migraine-vitamins**

## Fancy a bit of *shinrin-yoku*?

That's "forest bathing" to you and us. Here's some really interesting research from the Nippon Medical School in Japan on the importance of nature and how it can reduce the risk of cancer.

**https://www.menshealth.com/uk/health/a35211889/nature-cancer-risk-new-study**

## Eat yourself to a younger brain?

We all know the benefits of the 'Mediterranean diet' for the health of our heart and gut microbiome. This latest research outlines the direct link to our brain health too. Good news!

**https://medicalxpress.com/news/2021-02-mediterranean-diet-aging-brains-sharp.html**

## Talking about heart health

Here are the top 15 foods that will look after your heart (you'll probably notice that dark chocolate is on the list!)

**https://www.goodhousekeeping.com/health/diet-nutrition/g35396515/best-foods-for-heart-health**

## Move more, reduce health risks!

We know we bang on about it, but keeping physically fit really is important. Read about the latest research that makes the link between a healthy BMI, keeping fit and reduced risk of cancers.

https://www.theguardian.com/society/2021/feb/14/exercise-can-help-prevent-cancers-new-research-finds

## Stretch your way to heart health

The risk of high blood pressure increases with age. What if stretching (and taking up yoga / pilates) could reduce the impact and possibly get rid of the need for medication? Read more to find out.

https://www.healthcentral.com/article/stretching-to-lower-blood-pressure

## The "Second Spring" in a nutshell

The brilliant *Fleabag* clip of Kristen Scott-Thomas's monologue about women's pain and the "magnificent menopause". "It is horrendous, but then it's magnificent!". Here it is for your enjoyment and delight!

https://www.youtube.com/watch?v=Of7BbtbZ1pk

## Melatonin and memory

Dark chocolate every day can help, but having an alternative is always useful. Here is some fascinating research coming out of Tokyo University on melatonin and its support of memory.

https://scitechdaily.com/finally-a-supplement-that-actually-boosts-memory-many-already-take-it-for-better-sleep

## Have your say on women's health

The Department for Health is conducting a survey of women aged 18+ on their views of health support they currently receive and what can be done better.

The survey deadline is 30 May 2021 **click here**
Here's the **link to the report**

## Call my Agent - busting the stereotypes

We can choose to accept the labels others feel obliged to project onto us, or we can choose to shake things up a bit! If you're a fan of Call my agent, on Netflix, you may already have seen this, if not, check out the brilliant episode with Sigourney Weaver **(S4: ep5) here**

## Our Partners

We are pleased to partner with a number of great people that offer services, products and information - including contributions to the freebies in the 'goody bags' we give out at face-to-face trainings that people like so much! We do not gain financially in any way as a result of drawing them to people's attention. Of course, this includes our Clinical Partners, The Menopause Clinic and The London General Practice.

Please check the **Partners section of the RDPI web site** for contact details and special offers!

**The Menopause Clinic**
Professor Isaac Manyonda and Dr Vikram Talaulikar
**www.menopausecliniclondon.co.uk**

**YES YES Company**: Organic intimacy products

**Pravera**: Organyc cotton feminine care products

**Vitabiotics**: Midlife wellbeing supplements

**Active Iron**: Maintaining the 'iron balance'

**London General Practice**
Dr Paul Ettlinger
**www.thelondongeneralpractice.com**

**Edible Health UK**: Collagen supplements

**TensCare**: Innovative pain relief and wellbeing products

**Promensil**: Red clover oil

# mm Q&A

Menopause Clinic, London

**Q** *I'm still suffering with menopause symptoms and I am 73. Is it ok for me to start HRT and, if so, what would be the dose? Can it also help with osteoporosis as I get older, even if I start now?*

**A** Hormone replacement therapy suppresses menopausal symptoms and is beneficial for bone, heart and brain health. For the majority of women below the age of 60 years, its benefits far outweigh any potential risks such as blood clots or breast cancer.

In some circumstances women may choose to continue hormone therapy after this age, depending on their general health, severity of menopausal symptoms, family history and bone density levels / history of fractures. It is not common to start hormone therapy at or after the age of 60. By the age of 60, blood vessels in the body are generally stiffer and women at this age are at more at risk of cardiovascular disease, hence commencing hormone therapy may slightly increase their risk of cardiovascular disease or events. Associated conditions such as increased body weight or high blood pressure can contribute to this increased risk as well. Also, for most women, menopausal symptoms tend to become less severe after the age of 60 and HRT may not be needed for control of symptoms.

However, this does not mean that, if a woman wishes to consider taking HRT in her 60s or 70s, she should be denied the option.

A thorough discussion should be offered with a menopause specialist to make sure that the woman understands the increased risks and limited benefits that may be associated with starting HRT at a later stage. If she makes an informed decision to go ahead with the HRT option, the lowest dose and the safest route of body-identical hormones should be offered. In summary, if a risk-benefit analysis favours hormone replacement therapy, it may be appropriate and acceptable to initiate systemic or local HRT in some older women to improve the quality of their lives.

**Q** *I am only 42 yet having really bad peri-menopause symptoms. My GP has told me that if I go on HRT now I must stop no later than 52. Is that true?*

**A** Many women will suffer from severe menopausal symptoms long before their last menstrual period (during the peri-menopause) and HRT can be safely prescribed to alleviate symptoms. HRT can also help, even if the woman is having mild symptoms. In addition, there is increasing evidence that the earlier HRT is started, more are the benefits of protection from osteoporosis and heart disease.

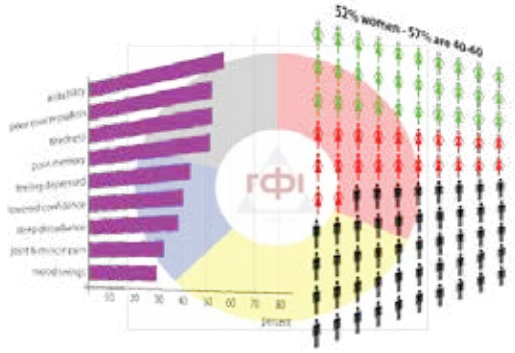
There is no definitive duration of use or an age cut off for HRT use, as this should be individualised, and risks assessed on a patient-by-patient basis. Persistent symptoms or the need for bone protection are indicators for on-going treatment.

For women with Premature Ovarian Insufficiency (POI), there is no increased risk of breast cancer or stroke from use of HRT until the age of natural menopause, as HRT only replaces the missing hormones. For women who use HRT after the age of 50, there is a small increase in risk of blood clots or breast cancer on HRT, however, these risks can be eliminated or minimised by using body-identical HRT in the lowest effective dose and non-oral route.

For the majority of women below the age of 60, continuing to take HRT confers far more benefits than any potential risks.

## Research - your chance to get involved!

This is a really exciting opportunity to get involved in some ground-breaking research we are doing around the menopause! You can potentially help many women navigate the menopause in the future by participating and add to the knowledge that will potentially help experts in the field!



A lot of work has been carried out looking at different aspects of the menopause. We are interested in how it affects different women in different ways and are starting a research project to gather information that will be used to publish some results

Taking part in the research will be simple. It will be completely confidential and no personal data will be shared with any third party - they will only be used as part of the overall statistical analyses. All you'll have to do is take a little while to complete some online questionnaires (which will only take around 30 minutes, or so, in total). We'll share the results with those who participate.

If you're potentially intersted, drop us an e-mail at **info@rdp-int.com** and we'll be in touch!

## Join the conversation

**Midlife_Matters LinkedIn Group**
**@Midlife_Matters**
**MidlifeMatters**
**Midlife_Mattters**

## Contact us

For information on our specialist "midlife matters" training courses please follow the links below or contact Katie Day or Dr Roger Prentis at:

**info@rdp-int.com**
**www.rdp-int.com**

**Midlife Matters courses**

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