

the,
Men's
Guide
to

Menopause

The Men's Guide to Menopause

WHAT YOU NEED TO KNOW TO UNDERSTAND
AND SUPPORT THE WOMEN IN YOUR LIFE

Medical Disclaimer

What follows in this guide are techniques and strategies that have helped me thrive in menopause. From diet, exercise, medical advocacy, and more– I learned a lot in my journey with menopause that I know can make yours a lot easier.

But before you read ANY further, know that this document is NOT medical advice. Talk to your doctor before making any changes to your lifestyle.

Welcome

If you love a woman who's over 40—and you want to understand what she's going through so you can show up for her a little better—you're in the right place.

As **The (M) Factor team**, we've spent years traveling the country screening our films, *The (M) Factor: Shredding the Silence on Menopause* and *Before the Pause*. At nearly every screening, the same question comes up. A woman stands and asks, "What do I tell my husband?" And almost without fail, a few brave men raise their hands and say, "Honestly? I had no idea."

Here's the truth: menopause isn't just a women's issue. It shows up in relationships, families, workplaces, and daily life. If you live with, work with, or love a woman navigating perimenopause or menopause, it affects you too, whether you realize it yet or not.

This guide is here to give you the inside scoop on what's happening for her physically, mentally, and emotionally, so you can support her without taking things personally (and without guessing wrong). We'll walk you through the **Five Ms** every man should understand: **Mojo, Mood, Mindset, Marriage & Partnership, and Making Conversation**. By the end, you'll have better language, better context, and a lot more confidence about what to say—and what not to say.

If you're reading this, it's already clear you care. And that alone makes a real difference.

Thanks for being one of the good guys.

— The (M) Factor Team

The Facts

MENOPAUSE IN A NUT SHELL

It's hard to help someone through something that you don't fully understand.
Here's a quick tour through the basic facts.

1 FIRST OF ALL...WHAT IS MENOPAUSE AND PERIMENOPAUSE?

- A woman is technically in menopause when she's gone one full year without a period.
- The years leading up to menopause, when women start to experience symptoms, is called perimenopause.
- Perimenopause can last 10+ years and typically begins in your 40s, but can start even earlier.
- The average age of menopause in the U.S. is 51.

2 WHAT ARE THE SYMPTOMS OF MENOPAUSE?

Menopause is more than just hot flashes. There are actually 34+ symptoms of menopause and perimenopause that are rarely talked about. (I list them in the next section of this guide...)

3 WHY DO MENOPAUSE SYMPTOMS OCCUR?

It's second puberty time!

Women's bodies are affected by menopause thanks to the hormonal changes in estrogen, progesterone, and testosterone. Certain medications or surgeries can also kick-start the process.

Every woman experiences menopause differently. Some women may not experience any noticeable symptoms, while others may feel like they are experiencing EVERY symptom in the world.

4 HOW LONG DO SYMPTOMS LAST?

Symptoms can last for a few months or several years, even decades. It truly depends on each woman's body. Recent studies show that 15 percent of women have hot flashes into their 80s.

Don't worry. There are plenty of treatment options and DIY strategies to help her control her symptoms.

5 SHOULD I ENCOURAGE HER TO TALK TO HER DOCTOR ABOUT HER SYMPTOMS?

Absolutely! Menopause is a phase of life, not a disease, but there's still no reason to suffer.

However, many doctors are not deeply educated on menopause. If she feels dismissed, not heard, or offered something she doesn't feel she needs, you may also need to encourage her to find a new doctor who is menopause-savvy.

Fast Facts

- 01** Perimenopause kicks off for many women in their 40s (or even late 30s)

- 02** The symptoms can take a big toll on sleep, sex, cognition, mood, and more

- 03** There's no real test for it

- 04** It can last for a decade or longer

- 05** Doctors might not know what's going on

- 06** There are many things she can do—some things she'll need a prescription for (such as hormone therapy) and some things she can do on her own (like exercise and building good sleep habits)

- 07** It can be a wildly confusing time—for her, and for you

- 08** She is so lucky to have a man in her life who wants to help

The Symptoms

TO LOOK OUT FOR

1. **Acne:** They call it second puberty for a reason.
2. **Allergies:** Increased sensitivity to allergens.
3. **Anxiety:** Increased nervousness or worry.
4. **Bloating:** Abdominal swelling or discomfort.
5. **Changes in Body Odor:** Alteration in the natural body scent.
6. **Breast Soreness:** Tenderness or discomfort in the breasts.
7. **Brittle Nails:** Weak or easily broken nails.
8. **Cholesterol Changes:** Make sure to get it checked!
9. **Depression:** Prolonged feelings of sadness or hopelessness.
10. **Dizziness:** Feeling lightheaded or unsteady.
11. **Difficulty Concentrating:** Trouble focusing or memory lapses.
12. **Fatigue:** Persistent tiredness or lack of energy.
13. **Gum Problems:** Bleeding or soreness of the gums.
14. **Hair Loss:** Thinning hair or increased shedding.
15. **Headaches:** Increased frequency or intensity of headaches.
16. **Heart Palpitations:** Irregular heartbeat or arrhythmias.
17. **Hot Flashes:** Sudden feelings of heat that spread over the body.
18. **Irregular Periods:** Changes in menstrual cycle length, flow, and frequency.
19. **Irritability:** Heightened sense of agitation or rage.
20. **Itchy Skin:** Increased itchiness or dry skin.
21. **Joint Pain:** Stiffness or pain in joints.

22. **Libido Changes:** Reduced sexual desire.
23. **Loss of Breast Fullness:** Changes in your bra size.
24. **Memory Lapses:** Forgetfulness or mild cognitive impairment.
25. **Mood Swings:** Sudden changes in mood, such as irritability or sadness.
26. **Nausea:** Issues such as indigestion or bloating.
27. **Night Sweats:** Severe hot flashes occurring at night, causing sweating.
28. **Osteoporosis:** Decrease in bone density, leading to fragility.
29. **Pain During Sex:** Decrease in vaginal lubrication, leading to discomfort.
30. **Panic Disorders:** Episodes of intense fear or panic.
31. **Sleep Issues:** Difficulty falling or staying asleep.
32. **Urinary Incontinence:** Loss of bladder control.
33. **Vaginal Dryness:** Hormones affect how our body reacts.
34. **Weight Gain:** Increased body weight, particularly around the abdomen.

Phew!

WE KNOW THIS SEEMS LIKE A LOT

Don't worry. Most women don't experience EVERY symptom.

But it's important to know what they are so you can help her recognize how what she's experiencing may be tied to her hormones—and so you can be an effective health advocate for her (when she needs it) and not jump to any worst-case scenarios!

Many women experience similar symptoms, such as hot flashes, brain fog, heart palpitations, night sweats, belly fat, and low libido.

The Five M's

MENOPAUSE IS HUGE:

- There are currently 1 billion women in menopause in the world
- It can have a widespread impact on a woman's health
- It can also impact multiple areas of her life

In an effort to make menopause more manageable—and more targeted to the men who love a woman who's being impacted by menopause—we've boiled it down into five Ms:

1 **MOJO**

A woman's sex drive, sexual pleasure, feeling sexy, and overall confidence

2 **MOOD**

Everything from irritability and weepiness to anxiety and depression

3 **MINDSET**

How she's feeling about entering this new phase of life, when society often makes women feel invisible, or irrelevant—and how to help her lean into the freedom this transition can usher in

4 **MARRIAGE & PARTNERSHIP**

There's a reason why I titled a section of my book, "Is it my husband, or is it my hormones?" When she's feeling all over the place it's bound to show up in her relationships

5 **MAKING CONVERSATION**

This is how things really start to get better—when you and she can talk about what you're each experiencing and be there for each other in a deeper way

Are you ready to take a bite out of menopause? Let's go

1

Mojo

Fact: A woman's sex drive, enjoyment of sex, and self-confidence can all take a nosedive during perimenopause.

Another fact: It's not about you.

TAMSEN'S STORY, EXECUTIVE PRODUCER & PRODUCER, THE (M) FACTOR FILMS

Getting married a second time at age fifty was a dream—I loved Ira dearly and felt truly respected and treasured by him. The wedding was so beautiful that I wouldn't have been surprised if cartoon bluebirds had appeared and circled around our heads. The only piece that was missing was my libido.

To say that she's not alone in not feeling like having sex is a vast understatement.

WHAT SHE'S EXPERIENCING:

Thanks to the gradual disappearance of estrogen, by the time women are six years past menopause, up to 84 percent of them experience genitourinary syndrome of menopause, which includes a lack of natural lubrication, a thinning of the vaginal wall, and sex that can be painful. Extremely painful. And extremely common.

Halle Berry said about menopausal sex:

“[It's like] I've got razor blades in my vagina.”

Not fun. And not your fault!

To top it off, many women also experience changing libido (sex drive) thanks to lowering levels of testosterone.

HOW SHE MIGHT BE FEELING:

- Afraid to hurt your feelings because she may not be feeling the same way about sex as she used to
- Embarrassed that her body is changing
- So tired that on any given night she'd rather sleep than get it on
- She also might be feeling not that great about her body since it can feel like it's changing so much she doesn't recognize herself, and that can take a toll on her self-confidence

WHAT YOU CAN DO:

As for the desire piece of the puzzle:

- There are two types of sexual desire: "spontaneous" (AKA horniness) and "responsive" (getting aroused in response to stimulation). According to Emily Nagoski, PhD, sex therapist and author of the book *Come as You Are*, 30 percent of women and 5 percent of men experience responsive, as opposed to spontaneous, desire.

If you and/or your partner is one of them, there's nothing wrong with you—you just need to adapt to your new normal and stop waiting for her to jump your bones.

- Testosterone is recommended for treating low libido in women. Maddeningly, there is no FDA-approved testosterone supplement for women, but some doctors will prescribe the testosterone gel designed for men, just at a much lower dose. Others may prescribe an individually formulated cream or gel from a compounding pharmacy. And some alternative providers may suggest testosterone pellets, which are inserted under the skin, but the dosage of pellets can vary widely and can be difficult to remove—for this reason, most physicians don't recommend them.

As for the painful part:

- Vaginal estrogen is a very safe topical estrogen product that a woman applies to the vulva and the vagina. It can come in creams, rings, or tabs. And it is very effective at remedying the lack of lubrication and strengthening the vaginal tissues so that sex doesn't hurt. It can also increase bloodflow, which increases sensitivity. Although it is very safe with virtually no long-term risk and few, if any, negative side effects, vaginal estrogen does require a prescription.
- Lube is your new best friend. Women are far more likely to orgasm in the presence of lube than without. It also makes sex more comfortable for women.
- Intercourse isn't the end-all, be-all. In fact, most women don't reach orgasm with intercourse. Experiment with oral sex, mutual masturbation, and sex toys.
- Slow down, enjoy the process. Arousal and orgasm can each take a while.

“I feel closer to my husband than I ever have. Your bodies both age. You have to be more intimate. You have to have these discussions. Things are changing. You can deny all this and just decide not to be physical anymore. But if you go into it, the level of intimacy is kind of mind-blowing.”

DARCEY STEINKE

Author of the menopause memoir *Flash Count Diary*

5 Pro Tips

FOR HAVING GREAT SEX

Here are some additional tips inspired by Joan Price, the undisputed queen of sex after age fifty—or sixty, or seventy—and author of a number of books, including *The Ultimate Guide to Sex After 50* and *Better Than I Ever Expected*, to help others embrace sex at every age.

01 If you don't ask for what you want, the answer is always no.

02 Pay attention to your “erotic clock.” Find the time of day when you feel sexiest and orgasms are easiest to achieve—for you and your partner.

03 Exercise before sex. Exercise accelerates blood flow, which is good for sex.

04 Don't eat right before sex. Eating diverts the blood flow to the digestive system, which is bad for sex.

05 Try putting your lube or waterproof sex toys in the fridge, to change it up!

2

Mood

Mood changes—whether it's anxiety, depression, irritability, or difficulty experiencing pleasure—are one of the most common symptoms of perimenopause and menopause, which can happen as a direct result of the fluctuation in hormones and declining levels of estrogen and progesterone.

The most common treatment women receive when they see a doctor about the symptoms of menopause is a prescription for antidepressants. Yet many of us are not technically depressed—we are suffering from physiological symptoms resulting from the decrease of estrogen. That said, while an antidepressant may not treat the true root of depression at midlife, it can be a useful tool to help her stabilize while she finds the health-care provider who can guide her on her best options.

In addition, up to two-thirds of women go through cognitive changes during menopause. Sometimes, these changes are so severe, they can mimic ADHD symptoms or even dementia. It's known as brain fog, and it can really be an upsetting experience.

There is a positive side to this otherwise potentially moody time: A woman's brain is being rewired during this transition to be less reactive and more serene, so some bugginess is to be expected.

WHAT SHE'S EXPERIENCING:

- The brain has many estrogen receptors; as there is less estrogen on hand, cognitive function can take a dip as the brain learns how to work without it, which may show up as difficulty remembering names, finding words, remembering why she walked into a room, or misplacing items.
- When estrogen declines, it tends to take serotonin down with it, inviting depressive symptoms. In fact, women's rate of depression doubles in midlife.
- Because progesterone is a calming hormone, when it starts trending downward, it can result in an uptick in anxiety.
- Declines in both estrogen and progesterone can have a negative effect on sleep—and being perpetually tired is a recipe for irritability and rapidly shifting moods.

HOW SHE MIGHT BE FEELING:

- Irritable, or even ragey
- Prone to weepiness
- More anxious than she's ever felt, with racing thoughts that are difficult to settle
- Depressed—lethargic, blue, tired
- Scared that she's experiencing cognitive decline
- Extremely fatigued
- All of the above throughout the course of a week, or even a day

WHAT YOU CAN DO:

- Be patient
- Don't take things personally
- Find little things you can do to make her feel supported
- Go exercise together, as exercise is great for mood, sleep, and cognitive function
- Know that, on average, cognitive performance tends to rebound after menopause four to six years after the final menstrual period, sometimes two years, sometimes immediately

Supplements that may help:

- 5-HTP (sleep and mood): This is a precursor to serotonin, so taking it can help to increase serotonin levels. Low serotonin is often linked to anxiety, sleep disorders, and depression.
- Maca root (hot flashes, mood, energy): I use maca powder in my smoothie, as it has been said to help alleviate menopausal symptoms by reducing hot flashes, improving mood, and enhancing energy levels.

3

Mindset

Fact: We live in an ageist society where women have had their options limited and their bodies considered shameful for millennia.

Another fact: Perimenopause and menopause are undeniable indicators that a woman is getting older.

These two truths may be making her feel like she's irrelevant, invisible, and/or washed up—or that she soon will be.

The truth is, menopause is an opportunity for an awakening and a new phase of life—but it may take her a while to reach that conclusion.

WHAT SHE'S EXPERIENCING:

- Being overlooked out in the world—perhaps no longer turning heads when she walks into a room, not being tended to in the same way by service professionals such as baristas, store clerks, or bartenders, having difficulty getting a call back when looking for a job
- Overwhelm, as all these symptoms happen at what tends to be the busiest time in a woman's life, with career and family (whether taking care of kids, parents, or both) are in full swing

HOW SHE MIGHT BE FEELING:

- Scared—of aging out of society, or becoming invisible, or change, or her own mortality, or all of these things
- Unconfident—like she's been this badass for so long and now she can hardly remember to take her purse with her when she leaves the house
- Unsure of her own self-worth—doubting her success, second-guessing her abilities, and suffering from imposter syndrome, wondering when “they” are going to find out she is just a fraud

- Worried that her best years are behind her
- Perhaps feeling frozen between where she's been and where she's headed
- Fearful and indecisive, holding off on making any decisions for fear of taking the wrong step, to wait (and wait) for the timing to feel "right"

WHAT YOU CAN DO:

- Be understanding of just how big of a shift she's going through
- Listen and be patient, and resist the urge to tell her what she should do—I can't stress enough how important this is, even though it may feel like you're not truly helping by simply listening, you absolutely are
- Talk to your friends and get support for yourself, as she can't be your therapist now
- Know that according to research, women's happiness and life contentment tends to only increase after bottoming out right around menopause

“For many women, on average, there’s a dip in contentment right around menopause. But on average, life contentment and happiness tend to go back up an average of four to six years after the final menstrual period. And then it continues to increase.”

LISA MOSCONI, PHD

Author of the New York Times bestselling *The Menopause Brain*

4

Marriage & Partnership

There is no question that menopause can test a relationship.

As you likely are only too keenly aware, (peri)menopause is tumultuous for a woman's mind, body, and spirit even in the very best of circumstances or relationships.

In fact, a survey conducted in 2022 by the Family Menopause Project in the UK gathered some eye-opening insights when it asked one thousand women about the effect of menopause on their relationship. Eight in ten women who reported symptoms said they put a strain on their family life, and seven in ten (73 percent) felt those menopause symptoms had a direct effect on their marriage's breakdown.

Studies are not as up-to-date in the United States, but AARP did a huge study twenty years ago, which found that two-thirds of divorces are initiated by women in their forties, fifties, and sixties.

We know there's a stereotype of women as irrational, hormonal creatures, which is harmful. At the same time, perimenopause and menopause have a real effect on your mood, your mental clarity, your emotions, and your overall well-being. It is a rocky transition that you eventually come out of, but when you're in it, you can forget that you have this huge factor that's influencing how you feel.

We've heard enough dramatic stories from women to know that sometimes the tumult of this major life and health transition may be making your primary relationship seem like it's in worse shape than it actually is.

WHAT SHE'S EXPERIENCING:

- Not only are estrogen and progesterone decreasing at this time, but so is oxytocin, a.k.a. the love hormone, which promotes connection
- She may be feeling overwhelmed, irritable, disinterested in sex, and perhaps looking at you as the source of her upset instead of connecting the dots to perimenopause or menopause

WHAT YOU CAN DO:

- Do activities together to bring you closer and give you new things to talk about
- Think and talk about what you each want to do with your second adulthood

Keep Date Night Fresh

If you are doing a date night even every few weeks, take heart: that means you want to make something work. Here's how to keep date night fun and exciting:

- **Choose a theme topic.** Don't leave it to chance or you'll end up talking about work or the kids or your parents or your to-do list. Instead, find out where your partner wants to travel to next—and fantasize the plan even if it's not happening for some time, or ever. You find out so much when you ask.
- **Think outside the dinner box.** Try a pottery, a glassblowing, or a paint and sip class. Comedy shows ease the mood. A cooking class is an activity where you get to eat, too! You can also go bowling, play pool, hit the driving range (TopGolf is a fun night out), or karaoke. When it's warm out, check out free events, such as concerts and plays, or go on a bike ride or a hike. Just don't fall into a rut.
- **Play tourist in your hometown.** Nothing makes you see your surroundings (and your partner) with fresh eyes like pretending you're a visitor. Do people travel to see a landmark near you? Maybe they're onto something!
- **Get a couple's massage.** Visit a local spa that offers massages for two and you might have the steamiest date night ever.

5

Making Conversation

It's great that you are interested in learning more about menopause. What's also key is to think about how you'll open up the conversation with the woman/women in your life—and how you'll keep the dialogue going.

WHAT SHE'S EXPERIENCING:

- She may not want to talk about what she's going through because she's embarrassed—for centuries women's health has been a taboo topic and she may be feeling like it's just not polite or proper to share, or she may be worried that sharing her experience may hurt your feelings (especially if she's not feeling like or enjoying having sex)

HOW SHE MIGHT BE FEELING:

- Lonely or isolated in the relationship
- Worried that if she starts talking she'll get on a roll and say things she'll regret—menopause has a way of chipping away at your filter so you become more irritable and also more blunt
- Overwhelmed, not knowing where to start or how to bring up the conversation

WHAT YOU CAN DO:

- Practice active listening—putting down your phone or other distractions, focusing on her words, tempering your emotional responses to what she's saying, and asking questions that show you're listening and encourage her to open up more, such as "What's worrying you?" and "How can I help?"
- Validate how she's feeling, by saying things like "That sounds really hard," "You're really dealing with a lot," and, "It makes sense how you're feeling given everything that's happening with you right now"
- Consider couples therapy, not because your relationship is in trouble, but to learn new ways of communicating and to have a safe space to open up to each other
- Schedule an activity where you can talk—a coffee date, a long drive, a hike

Seven Unhelpful Things to Say to a Woman in Menopause

01 "Oh that's just the menopause talking."

02 "It's just a phase, you'll get over it."

03 "Isn't that for old women?"

04 "You're too emotional."

05 "Haven't you been going through this a long time already?"

06 "Does this mean you're not going to want to have sex anymore?"

07 "Maybe you're just depressed or too stressed."

The Bonus M – “Manopause” is real too

Men have their own version of menopause—it’s technically called andropause and it refers to the decline in testosterone that can negatively impact your bone mass, sexuality, and mood.

Unlike menopause, which is a volatile and dramatic lowering of multiple reproductive hormones, andropause is a gradual decline. In general, men’s testosterone levels decline a little less than 2 percent per year starting in the mid-thirties. Also unlike menopause, where every woman will eventually have a dramatically reduced estrogen level, only about a quarter of men have testosterone levels that are officially “too low.”

WHAT HE’S EXPERIENCING:

- Lowered energy and motivation
- Reduced sexual desire and activity
- Erectile dysfunction
- Breast discomfort or swelling
- Decreased bone density (as evidenced by a non-trauma fracture or height loss)
- Hot flashes or sweats
- Depressed mood
- Impaired concentration
- Poor sleep
- Reduced muscle mass and strength
- Increased body fat percentage

HOW HE MIGHT BE FEELING:

- Tired
- Not confident
- Spacy

WHAT YOU CAN DO:

- If you're experiencing symptoms, you can have your testosterone levels tested.
- If your levels are low, you can talk with your doctor about taking testosterone. As with women's hormone therapy, there are some risks to testosterone supplementation—be sure to discuss these with your doctor. As for benefits, it has been shown to help with libido, memory, muscle mass, and bone strength in men.
- Viagra can help with erectile dysfunction—but I'm guessing you already know that!

Products to help you have a hotter sex life

Addyi (prescription medicine for women's libido):

addyi.com

Julva DHEA Moisturizing Cream (helps to restore vaginal moisture):

drannacabeca.com/

Localized Vaginal Estrogen (a prescription medication considered safe for all women that treats menopause-related vaginal changes): Read more on

GoodRx.com

Ohnut (a device that provides a unique solution to painful penetration):

thepelvicpeople.com

Ospemifene (Osphena, a non-hormonal medication to relieve vaginal dryness and tightness):

osphena.com

Pulse Lube Warmer (motion-controlled dispenser that warms your lube):

lovemypulse.com

RepaGyn (hyaluronic acid suppositories to restore moisture and relieve tightness):

repagyn.ca

Tabu (organic lube with hyaluronic acid for extra moisture): <https://www.heytabu.com/>

Vyleesi (injectable medication for women's libido):

vyleesi.com

WATER-BASED LUBRICANTS

(safe to use with condoms)

- Astroglide Liquid
- Astroglide Gel Liquid
- Astroglide
- Good Clean Love
- Just Like Me
- K-Y Jelly
- Pre-Seed
- Slippery Stuff
- Liquid Silk
- YES WB
- Sliquid

SILICONE-BASED LUBRICANTS

(don't use these with condoms as they could cause breakage)

- Astroglide X
- ID Millennium
- YES WB
- SYLK
- Sliquid

VAGINAL MOISTURIZERS

- Feminease
- Hyalo-gyn
- K-Y SILK-E
- Luvena
- Replens
- Revaree
- Silken Secret

Listening Is Powerful. Support Is Everything.

YOU'RE PART OF THE JOURNEY

Menopause—and perimenopause—aren't something your partner should have to navigate alone. These transitions affect health, emotions, relationships, and daily life, and understanding them is one of the most meaningful ways you can show up.

We created The (M) Factor films to shine a light on the realities women face, revealing gaps in medical education, unequal access to care, and the very real physical and mental health impacts of hormonal change. These films are about knowledge, empathy, and empowerment, and about helping women advocate for the care they deserve.

As a partner, your role matters. Learning alongside your partner, asking questions, and supporting her decisions can make a profound difference. You are in this together, and the more informed and engaged you are, the stronger your partnership can be through every stage of midlife.

The M Factor: Shredding the Silence on Menopause and *The (M) Factor 2: Before the Pause* are resources you can watch together to better understand what's happening and how to move forward—side by side.

The (M) Factor: Shredding the Silence on Menopause is available to stream on pbs.org and the free PBS App, accessible on iPhone, Apple TV, Android TV, Android smartphones, Amazon Fire TV, Amazon Fire Tablet, Roku, Samsung Smart TV, and Vizio.

Because when one partner goes through change, the strongest relationships face it— together.

— The (M) Factor Team