

# Menopause after brain injury



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## Introduction

The number of people surviving brain injury is increasing over time, and that means that more women with brain injury are living to the age when menopause will typically begin.

This publication offers information on what menopause is, how it can affect women with brain injury uniquely, and how women with brain injury can cope with their menopausal symptoms.

**Please note that the information in this publication does not replace clinical guidance.**

## What is menopause?

Menopause is the time in a woman's life when their reproductive cycle comes to an end and their ability to reproduce stops because of natural ageing. It is defined as the point in time 12 months after a woman's final period.

During menopause, the body stops producing the hormones needed to reproduce, such as estrogen and progesterone. This usually happens between the ages of 45 and 55 years, and it is often a gradual transition over the course of years. The timeframe when this transition to menopause takes place is called perimenopause. Some women go through menopause more suddenly however, either naturally or after surgery, radiotherapy, etc.

The hormonal changes associated with perimenopause cause menstrual periods to change (such as becoming less frequent, more frequent) and eventually stop. They can commonly cause a range of physical and emotional symptoms such as hot flushes, low mood, anxiety, headaches, palpitations, joint pains, poor concentration, poor sleep, low libido, and vaginal dryness.

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## **How does brain injury affect menopause?**

Some of the symptoms of peri/menopause are also commonly experienced after brain injury, such as cognitive and mood changes, sleep problems and headaches. Research has found that menopausal women with traumatic brain injury (TBI) can experience these overlapping symptoms to a greater degree than menopausal women without TBI. Menopause may therefore worsen the experience of these issues among women after brain injury, but research in this area is limited at the moment.

## ***Why has research not investigated menopause in women with TBI?***

Part of the reason why menopause after brain injury, or brain injury after menopause has not been well studied yet is the underrepresentation of women in TBI research. There has, however, been an effort to highlight this knowledge gap amongst researchers, with the hopes that there will be better opportunities in future to understand sex-specific issues after brain injury, such as the impact of menopause on women brain injury survivors.

## ***What research has been completed so far?***

Attempts at better understanding menopause after brain injury are underway, with an article published in 2024 in the academic journal [Women & Health](#) describing the development and testing of a new scale of menopause symptoms after brain injury. The article concludes that women with TBI can struggle with the impact of brain injury and the exacerbation of changes experienced during menopause. It also recommends that future research aim to further develop the scale and include women from demographically diverse backgrounds.

Such efforts are hoping to, in future, help women brain injury survivors with adjusting to the onset of perimenopause and make sure that appropriate support is provided by healthcare services.

In the meantime, with menopause being a naturally occurring life event and brain injuries being highly common worldwide, it is important that guidance is available

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to help women brain injury survivors to cope with the impacts of these conditions. In the next section, we offer some general considerations.

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## Tips for coping with menopause after brain injury

**Please note the following tips are general suggestions and should not replace clinical guidance.**

- **Speak to your GP or healthcare professional** about your symptoms. They may be able to prescribe medication to cope with your menopause symptoms. Be aware that some forms of medication commonly offered to cope with menopause symptoms may be unsuitable due to your brain injury, or if you are on other forms of medication. Suitability of medications such as hormone replacement therapy (HRT) may also depend upon the stage of peri/menopause you are at.
- **Consider talking therapies**, such as cognitive behavioural therapy (CBT). This has been shown to effectively reduce the psychological impact of menopausal symptoms such as stress and anxiety. CBT is also effective at helping brain injury survivors to cope with a range of brain injury effects. It works by helping you to understand how your thoughts affect your behaviour, and supports you with changing unhelpful thought patterns. You can speak to your GP about accessing CBT, or visit the British Association for Counselling and Psychotherapy's Therapist Directory at [www.bacp.co.uk/search/Therapists](http://www.bacp.co.uk/search/Therapists).
- **Visit a menopause specialist** recognised by the British Menopause Society. You can search for your nearest specialist at [www.thebms.org.uk/find-a-menopause-specialist](http://www.thebms.org.uk/find-a-menopause-specialist). The specialist will be able to offer you individualised support for your menopausal symptoms. It might be necessary to explain the

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impact of your brain injury and how this affects you or worsens any of your menopause symptoms. You can take any [Headway publications](#) along with you if you feel they would be helpful.

- **Learn ways to cope with memory problems**, as these are a common complaint after brain injury, and can be worsened by the body's reduction in estrogen during menopause. We rely on memory for many of our everyday tasks and to remember important events, so it can be especially problematic when memory is affected. Memory is not one single skill however, so the types of strategies that will be most helpful to you will depend on the type of memory problems you have. Read our publication [Memory problems after brain injury](#) for more information and guidance on coping with this issue.
- **Be honest with others about how you are feeling**. The impact of brain injury can be difficult for others in your life to understand, so being honest about how you are feeling and communicating effectively can be particularly important. The additional impact of menopause might also be difficult for others to recognise or understand, for example if you start to develop new or worsened symptoms to those you already had from your brain injury. Talk to others about the impact that menopause can have (for example by showing them this publication) and discuss the support that they can offer you to help you through this time.
- **Adopt a healthy lifestyle**, for instance exercising, eating a healthy diet, and giving up smoking. This can help with reducing hot flushes and night sweats, as well as improving the quality of sleep. You should also consider reducing your alcohol intake or stopping drinking alcohol altogether, as alcohol has been found to worsen both menopause and brain injury symptoms. Further information on this and suggestions for reducing your alcohol intake is available in our publication [Alcohol after brain injury](#).

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- **Speak to our nurse-led helpline** if you have questions about brain injury and menopause, or just need a listening ear to talk to about your experiences.
- **Consider your diet**, and try to make sure you are having enough calcium and Vitamin D to keep your bones healthy, as menopause can affect bone density. Calcium can be found in foods such as dairy foods and some leafy green vegetables. More guidance on calcium intake is available on the NHS website at [www.nhs.uk/conditions/vitamins-and-minerals/calcium](http://www.nhs.uk/conditions/vitamins-and-minerals/calcium). Vitamin D is found in oily fish, egg yolks, milk, cod liver oil and exposure to sunshine or by taking a supplement. More information on Vitamin D can be found on the NHS website at [www.nhs.uk/conditions/vitamins-and-minerals/vitamin-d/](http://www.nhs.uk/conditions/vitamins-and-minerals/vitamin-d/).
- **Try to rest and get good quality sleep.** If you have problems with getting to sleep, the quality of sleep or staying asleep due to your brain injury, you may find the information in our publication [Sleep problems after brain injury](#) helpful.

**More tips on coping with menopause symptoms are available on the NHS website at [www.nhs.uk/conditions/menopause/things-you-can-do](http://www.nhs.uk/conditions/menopause/things-you-can-do).**

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