



Understanding Amenorrhea

PATIENT EDUCATION SERIES

What is Amenorrhea?

Amenorrhea is the abnormal absence of menstrual periods. Generally speaking, there are 3 categories of women who have experienced amenorrhea:

- Women who have never had a menstrual period by age sixteen.
- Women who have not had a period for 2 to 3 months or more.
- Women who have irregular periods that may vary from 35 to 90 days.

Determining why a woman over 16 years of age has never had a menstrual period is essential for proper treatment; identifying a reason may involve several blood hormone tests, and possibly referral to an endocrinologist.

Missing periods after regular periods have begun is much more common, especially among college students. Changes in environment, diet, stress, as well as medical problems can cause variability in menstrual cycles.

Intense exercise, especially activities requiring aerobic exercise or running, can cause you to miss your period.

If you menstruate fewer than four times per year or if you miss three consecutive periods, you need to see a health care provider. If you are sexually active, you should see a provider for a pregnancy test after one missed or late period. You should also see a provider if you notice breast/nipple discharge, or if you notice unusual facial hair or other body hair growth.

Why Do Missed Periods Occur?

Some of the factors associated with cessation of periods are:

- stress
- calorie-restricted diet/weight loss
- eating disorders
- strenuous exercise
- hormone imbalance
- organic disease (e.g. thyroid disease)
- travel

How is Amenorrhea Treated?

The general approach to women with amenorrhea is as follows:

- Ruling out the possibility of pregnancy is a priority.
- A pelvic exam, plus hormone or other tests are often performed.
- A progesterone drug that stimulates a menstrual period, may be considered.
- Any underlying causes that are identified are addressed.
- Options are considered for long-term treatment of absent periods, such as taking oral contraceptives or taking periodic courses of a progesterone medication.
- Women are counseled/educated: lifestyle changes to promote nutritional, exercise balance to achieve good bone health and reproductive health.

For most women, these steps are usually enough to bring about normal, regular cycles. Sometimes diagnosis requires more sophisticated testing. Additional treatment/referral may be required to achieve normal cycles and, when desired, pregnancy.

Why Treat Amenorrhea?

While many women have some mild irregularity to their menstrual cycles, this may be a long standing pattern for them. For other women, irregularity may represent a change in their usual menstrual patterns. If your menstrual cycles have become irregular or stopped completely, an estrogen imbalance may occur over time. Over a long period of time, too much estrogen can cause overgrowth of the cells in the lining of the uterus (endometrial hyperplasia which can lead to cancer), while too little estrogen can cause calcium loss from the bones (leading to osteoporosis).

Important Points to Remember

- Pregnancy *can* occur during long periods of amenorrhea.
- Moderation of diet and exercise as well as stress reduction are important factors in a regular menstrual cycle.
- Keeping a written record of your menstrual cycle by marking the first day of your period on the calendar is very helpful for your medical provider