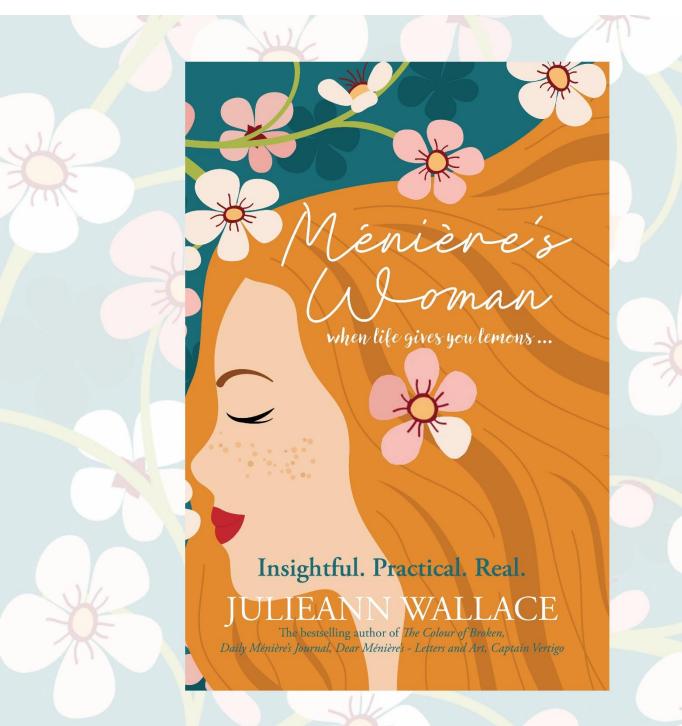
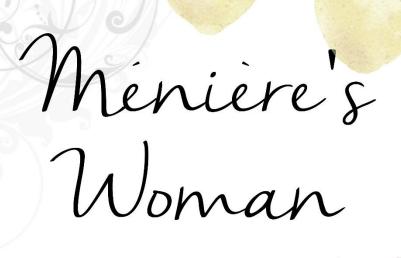
Selections about Ménière's Disease and Menstruation, Perimenopause and Menopause from the book, Meniere's Woman.



Grab a copy at online bookstores or ask your library to order in a copy.

Print book and Book. Profits supporting Meniere's research.



when life gives you lemons ...

Julieann Wallace



Ménière's Woman Julieann Wallace © 2024 Published by Lilly Pilly Publishing

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This book was not created with or by AI. Forgive me for any errors. I will update the book as they are found.

Ménière's disease is a debilitating vestibular condition that causes vertigo, hearing loss, tinnitus, brain fog, fullness of the ear, balance difficulties. It is life changing. Any medical research in this book is supported by the URL of the research paper or publication or site.

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Book Cover design by Julieann Wallace Cover art 123RF: 180280314

1st Edition

ISBN: 978-0-6451581-9-9 (print book) ISBN: 978-0-6480382-7-6 (eBook)

Dedicated to my *husband*, for being by my side in the incredibly low and dark Ménière's days, and for your patience as we searched for a treatment that would put some of the pieces of me back together again. Somehow, I think Humpty Dumpty understands.

Dedicated to my Ménière's sisters with love and understanding - take my hand. xx

bekind

to yourself.
It's the key to healing and growing.



About Ménières Woman

My shadow, Ménière's, has been with me for 29 years at the time of writing this book. Exactly half of my lifetime. It was a very difficult first ten years, where I would be debilitated for four hours or more at a time with horrendous violent vertigo at least forty times a year. Ménière's an absolute life changer. I developed a chronic fear of vertigo attacks, and PTSD, and so stopped shopping by myself, socialising, driving, and teaching. Everyday I kept a diary of what I ate or drank, where I had been and what I had done, to see if I could find the trigger for my attacks.

I woke at daybreak, early one day in January 2024, with the words "Ménière's Man" in my mind. And then I thought of all the books written by men with Ménière's disease, and decided it was time to have a Ménière's book written by a woman! Researchers have uncovered countless ways in which women's and men's bodies react differently to the same diseases, due to our hormones. There is A LOT that female bodies to go through during a hormonal cycle, a stark contrast to the experience of the male body.

It is my hope that this book can help you. I have put countless hours into research and reading anecdotal stories by women, and my own experience. Some suggestions in this book may help you. Trial and error is the ball game of Ménière's disease, as you know. By keeping a track of your daily living with Ménière's, you may find a pattern that will help you with your battle against it. As you are using the period journal tracker, highlight symptoms, add symptoms, add notes about what you are experiencing, or any new symptoms, plus vertigo length and severity. And because this is your book, add your own stamp and style. I have left blank pages for your to glue/tape in clippings, inspirational verses or images that speak to you in some way, or write them in. Be creative. Be you.

It is my forever hope and prayer, that a cure or successful treatments are found.

Julieann xo

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Secret Women's Business

question for the women...' often pops up in Ménière's disease social media. Men instantly scroll past and pretend it doesn't exist. Some women do too.

My dear mum is eighty-two years old this year, and her generation is one to never talk about women's body parts or women's bodily functions. Or sex. Or child birth. Or urinary incontinence. Or weak pelvic floor muscles. Count yourself lucky if your mum is able to talk openly about being a woman.

I recently sat in on a Year 7 (12 and 13 year olds) Sex Education Class as a supervising teacher. At my age I thought I could not be shocked. Well ... was I in for a surprise. Mostly because my sex education, in the late 1970s consisted of mum giving me the book to read by myself, "Where Did I Come From?" And I skipped all the rude pages. In the open discussions in the class, no body part was off limit. Whether you were biologically a male of female, everything was discussed in front of everyone, the presenter declaring 'Boys, you need to know this too!' when talking about changes in females, from how far the vagina can stretch with penile penetration, to giving birth, to monthly blood flow and painful periods and mood changes. The girls didn't miss out, learning about male reproductive parts, how they work and change. All the anatomically correct language was used for the body. There was no blushing or shame. The answers were all delivered in a factual and respectful way. That generation is winning.

Which brings me back to womanhood and the flourish of anecdotal stories of women asking whether their Ménière's symptoms worsen at points in their menstrual cycle, or during pregnancy, or during perimenopause or menopause.

Our state of being a woman adds an extra layer of complexity

onto the already complex Ménière's disease, for sure.

Hormonal Research linking to Ménière's Disease

If you research hormonal effects on Ménière's disease on the Internet, there is little recent data on the topic. Little research, fullstop. In fact, you can garner more information from social media like *Facebook* and *Reddit* than in the medical journals. Real life anecdotes.

However, the few articles that do exist, acknowledge that hormonal changes in women can result in a change of fluid movement that can result in a Ménière's attack.

Ménière's and Menstruation

The menstrual cycle has four phases:

- Menstruation commonly known as a period.
- The follicular phase starts on the first day of your period and lasts for 13 to 14 days, ending in ovulation
- Ovulation when a mature egg is released from an ovary and moves along a fallopian tube towards your uterus. This usually happens once each month, about two weeks before your next period. Ovulation can last from 16 to 32 hours.
- The luteal phase the lining of the uterus thickening in preparation for pregnancy

According to Ménière's Organisation UK, 70% of menstruating women noted a worsening of the MD symptoms during the premenstrual period (one or two weeks before their period).

However, another study found a decrease in vertigo during the premenstrual period.

Typical of Ménière's to throw a curve ball into the research.

Of the women who had an exacerbation of symptoms, there was a measurable difference in the audiometric function, with hearing

Julieann Wallace

significantly worse during the premenstrual period.

Have you noticed that?

It is believed that during the premenstrual period, the fluid in the inner ear may be responsive to changes in hormones. When estrogen is low, as in the premenstrual phase of the menstrual cycle, there is more fluid accumulation in the inner ear, which goes with the fact that some women experience increased water and salt retention around the time of their period. This is due to an increase in the hormone progesterone. Progesterone activates the hormone aldosterone, which causes the kidneys to retain water and salt.

Makes sense. So we aren't imagining our changes in symptoms that accompany our cycles.

Jour story Changes in your Ménière's symptoms during your monthly cycle.				
5				

Possible Solutions

It is important to note that when investigating your exacerbation of your Ménière's symptoms with your monthly cycle, you will need to find out what treatments may help you, and **talk to your specialist or doctor about it**. Here are some suggestions from research that may help:

- take a diuretic in the premenstrual phase
- contraceptives (birth control) oral or implanted
- increase betahistine beforehand if you have a predictable cycle, then drop back to usual maintenance afterward
- Period tracker on paper or an app monitoring symptoms across several menstrual cycles may help a person identify the specific cause, pattern or trigger
- hormone evaluation you may benefit from a hormonal evaluation in the event that the hormonal imbalance contributes to your Ménière's symptoms.

The good news is that research studies have provided evidence that a unique relationship does exist between the menstrual cycle and Ménière's disease responses for some women. We are not just imagining things. I noted as I was reading research about Ménière's and menstruation that recommendations included "further research with larger samples and testing of different symptom management strategies for women of different perimenstrual symptom patterns". I'm yet to see any evidence of this further research. However, there was one study – "Effects of combined oral contraception containing drospirenone on premenstrual exacerbation of Ménière's disease: Preliminary study" that claimed to help with that time of the month. It was purely research though.

www.sciencedirect.com/science/article/abs/pii/S0301211518301106

Not everyone wants to take oral contraception though.



The next section of this book is a tracker for Ménière's symptoms each month. You may find patterns or triggers. Please add any other information to it that you need to, as we are all different. Be creative. Use colours, highlighters, or stick inspirations or whatever in the pages as well.

The tracker can also be used for perimenopause.

The next two pages are from the book, "Ménière's Woman". In the book each month is covered for an entire year, so you can track Meniere's symptoms against your hormonal changes. I have only provided an example of one month here, which goes over two pages.

MONTH: January February March April May June July August September October November December

1	2	3	4
5	6	7	8
9	10	11	12
13	14	15	16
17	18	19	20
21	22	23	24
25	26	27	28
29	30	31	

Symptoms:

Tinnitus (T)	Vertigo (V)	Drop Attack (DA)	Nausea (N)	
Anxiety (A)	Brain Fog (BF)	Hearing Loss (HL)	Hyperacusis (H)	
Fatigue (F)	Balance (B)	Co-ordination (C)	Stress (S)	
Headache (H)	Migraine (M)	Nystagmus (Ny)	Disequilibrium (D)	
Ear Fullness/ Pressure/Pain (E)	Vision Difficulties (V)	Physical Impairment (P)	Vestibular Migraine (VM)	
Vomiting (V)	Depression (Dep)	BPPV* (BPPV)	Diarrhea (Di)	
PPPD* (PP)	Jaw Click/Pain (J)	Neck Pain (Np)	Motion	
Sweating (Sw)	Speech Difficulty (Sp)	Bloating (BI)	Sensitivity (Ms)	
Cramping (Cr)	Breast Pain (Bp)	Moody (My)	Menstruation***	

Tinnitus: When? Pre? During? Possible Menstruation & Ménièr				
Duration of Vertigo minutes hours da Severity of Vertigo 1 2 3 4 5 - I HATE you, vertigo! New Symptoms?				
Nhat Helped Me?				
Medication/s & Time Taken	Other			
	Prayer	Rest		
	Meditation	Friend/s		
	Self-care	Family		
	Exercise	Pet/s		
	Mindfulness	Vestibular Rehal		
	Gratitude	Hearing Device		
What I Accomplished this Month Three Things I am 7				

Your Monthly Cycle

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Your Plan of Action

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Ménière's, Perimenopause and Menopause

And the beauty of a woman, with passing years only grows! - Audrey Hepburn

ust when you thought you had the hang of controlling your Ménière's symptoms the best you could with your monthly period, along comes perimenopause to stuff up your hormones again.

Lucky us.

On Ménière's Facebook pages, I often see women asking about their Ménière's symptoms with perimenopause, or menopause. They are trying to figure out whether what they are going through is normal when you have Ménière's.

Perimenopause and menopause are rarely talked about openly. It's one of those taboo topics of my mum's generation. Today though, more people and celebrities are starting to talk about it. All women go through it. It's a natural transition, marking the end of the reproductive years. Why try to hide that fact. It is nothing to be ashamed of. In fact, once you have your last period, it is an immense feeling of freedom. Of liberation. It's worthy of a celebration!

Perimenopause

Perimenopause means "around menopause". It's the stage of life leading up to your last period (Yahoo!) as your ovaries slow down.

It usually occurs between 45 - 55 years of age. For some women it can start in their mid-30s.

Perimenopause can last up to 4 - 6 years, on average. For some, it lasts up to ten years before menopause, and for others, only a year.

Perimenopause ends one year after your last period.

Ménière's Woman

Be proud of how you show up every day, feeling comfortable in your own skin, being your magnificent you - Bonnie Marcus, author

Symptoms

The level of estrogen—the main female hormone—in your body rises and falls unevenly during perimenopause, causing irregular periods. They may come less often, sometimes even more often. They may be shorted or longer, your bleeding may be lighter or heavier than usual. Some months you may not get a period.

If you are one of the people whose hormones influence their Ménière's symptoms, this may cause your Ménière's to flare at certain times with the rise and fall of hormones. You can use the period tracker in this book to track your cycle and also add the MD symptoms you are experiencing.

Most females will experience symptoms of menopause, although 1 in 5 won't have any symptoms at all. Around 1 in every 5 females will have symptoms severe enough to affect their daily activities.

Symptoms of perimenopause may include, and please note: you may not experience all of these.

- Irregular periods
- Hot flashes/flushes
- Mood swings
- Low libido (sex drive)
- Headaches
- Insomnia and disrupted sleep
- Sore breasts
- Weight gain
- Vaginal dryness
- Tiredness and difficulty with concentration and memory
- Itchy or dry skin

Julieann Wallace

- Sore muscles and joints
- Night sweats
- Brain fog
- Dizziness
- Heart palpitations
- Depression
- Anxiety
- Panic disorder
- Irritability
- Stress incontinence
- Digestive problems
- Bloating
- Muscle tension
- Body odor
- Hair loss
- Brittle nails
- Itchy skin
- Burning mouth
- Changes in taste
- Bleeding gums
- Tingling extremities
- Electric shocks
- Allergies

What a wild ride!

https://www.mbody.health/perimenopause/symptoms-treatment/why-you-should-track-the-34-symptoms-of-perimenopause

I see menopause as the start of the next fabulous phase of life as a woman. Now is a time to 'tune in' to our bodies and embrace this new chapter. If anything, I feel more myself and love my body more now, at 58 years old, than ever before – Kim Cattrall, actress

Research

I spent days in the bowels of the Internet trying to find research about Ménière's disease and perimenopause. As expected, there was hardly any research. I'm kinda thinking that we women just get on with life, even though the hard bits and hormonal changes and the extra level of Ménière's on top. We are our own tracking systems.

I did find this bit of information though:

A small 2013 study focusing on women with Ménière's showed that the number of vertigo episodes in premenopausal women was almost double that of postmenopausal, and additionally that 62.5% of the postmenopausal women reported having noticed an improvement in their symptoms after the menopause.

https://www.menieres.org.uk/files/pdfs/Monaghan.pdf

In my readings, I discovered that the incidence of BPPV (Benign Paroxysmal Positional Vertigo) increases with all women, Ménière's disease or not, during perimenopause and menopause, due to the increased hormonal fluctuations.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7596253/

The Menopause & Post-menopause

Menopause. A pause while you reconsider men
- Margaret Atwood, author

Aaaaah! A sigh of relief. You have had your final period. You have not had period or spotting for 12 months.

Let the party begin! You are free from period pads and tampons

and period undies and cramping and whatever else your body did unique to you in the lead-up to your period and whenever you had a period.

Except ...

During post-menopause, your body learns to function with low hormone levels, and symptoms caused by fluctuating hormones may become less troubling—or disappear altogether. Post-menopause also means your ovaries no longer release enough hormones to support a pregnancy.

According to an article published in 2019, there is a correlation between auditory-vestibular functions and estrogen levels in postmenopausal patients with Ménière's disease.

This study suggests that some women, who previously had no history of Ménière's disease, develop Ménière's disease postmenopausally.

Estrogen levels correlated with auditory and vestibular function in post-menopausal patients with MD. Low estrogen may be involved in the microcirculatory disturbance of the inner ear, affecting the occurrence and development of MD.

www.ncbi.nlm.nih.gov/pmc/articles/PMC6430344/

Having stated an increase in Ménière's disease symptoms postmenopause, I have also read in social media groups, that with some women, their Ménière's symptoms get easier to live with. Go figure.

But there is so much dependability here. For example:

- How long have they had Ménière's?
- Are they entering burnout phase?
- Are they on any medication post-menopausally?

One thing is certain, more research in this area is needed.

Is Perimenopause and Menopause Beating You Up?

If you are intolerant of the symptoms of perimenopause and menopause, and feel like it is just another terrible thing on top of your Ménière's to try and have to cope with, a conversation with your doctor is warranted. There are treatments that you can try that focus on relieving your signs and symptoms. Whether the treatments help with your unpredictable Ménière's symptoms, is something only you can discover. https://www.webmd.com/menopause/guide-perimenopause

My belief is that it's a privilege to get older. Not everybody gets to get older - Cameron Diaz

My story

I had quite a smooth ride through the hot flashes of perimenopause. I discovered afterward about the effect of Cipramil that I was taking for anxiety, inadvertently made my hot flashes way more tolerable.

Antidepressant medications are recommended as a first-line treatment for hot flashes in people who cannot take estrogen.

According to Harvard Health Publishing, randomized trials have shown that certain antidepressants can reduce hot flashes by 50% or more. These include paroxetine (Paxil) and fluoxetine (Prozac) - SSRIs, and venlafaxine (Effexor). A randomized controlled trial has shown that citalopram (Celexa), cuts the frequency and severity of hot flashes by at least 50% in postmenopausal women. Results were published in the July 10, 2010, issue of the Journal of Clinical Oncology.

Menopausal Hormone Therapy (MHT) can reduce menopausal symptoms as well. However, there is an added small risk of blood clots and breast cancer while taking it. It's not for everyone.

https://www.menopause.org. au/health-info/fact-sheets/what-is-menopausal-hormone-therapy-mht-and-is-it-safe

Vear Me,

Be kind to myself ...

intentionally, extravagantly, unconditionally.



I hope these pages can help you in some way, even if it is just with understanding what is going on with your body, and then this can arm you with a plan to make changes to help your Ménière's symptoms.

Menstruation, perimenopause and menopause has been such a taboo subject for generations and generations. It's time to be open about it, amongst women, to support each other, and amongst men, who never understand what we go through because they have no idea.

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