Maybe It's Menopause

Did you know that menopause can look and feel different for every woman? You could be experiencing a symptom of menopause without realizing it.



Approximately **2 million** women in the U.S. enter menopause each year.¹

Bayer commissioned two surveys conducted by The Harris Poll asking 1,007 U.S. women in menopause or post menopause aged 40-70 and 606 healthcare providers (including 301 providers working in an OBGYN setting and 305 providers working in a primary care setting) about their experience navigating menopause and experience caring for people going through menopause.

Among those who didn't discuss their menopause symptoms with an HCP,

34%

did not because they thought these symptoms were normal for women their age.²

78% of surveyed HCPs

stated that they feel that at least half of their patients in menopause and post menopause between the ages of 40-70 were aware that changes in frequency or duration of periods are associated with menopause, whereas **31% of surveyed women reported being aware of that connection**.²

What You Might Know

Menopause typically occurs in women between their **mid-40s and early 50s**,³ though medically induced menopause can happen earlier.⁴

What You Might Not Know

Menopause can be more than just hot flashes.

On average, women spend one-third of their lives in

Symptoms can begin before and continue after an official menopause diagnosis, with many symptoms persisting for 7 years after their menstrual cycle ceases.⁵ **menopause**.⁶ Yet, there is minimal time spent educating physicians on this transition: in a survey of 99 OBGYN residency program directors, **only 31%** reported having a menopause curriculum for their trainees.⁷

Symptom Check

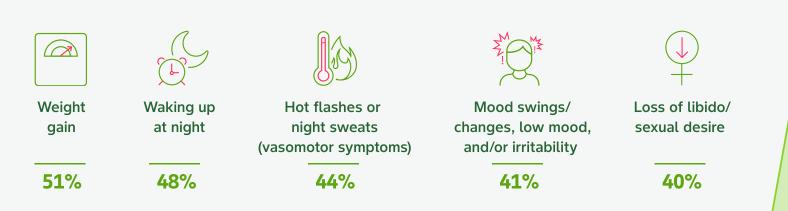
Menopause can come with many changes, most commonly:⁸



While hot flashes are the most common symptom associated with menopause,⁹ menopause is not a one-size-fits-all journey for women.

Understanding Symptoms

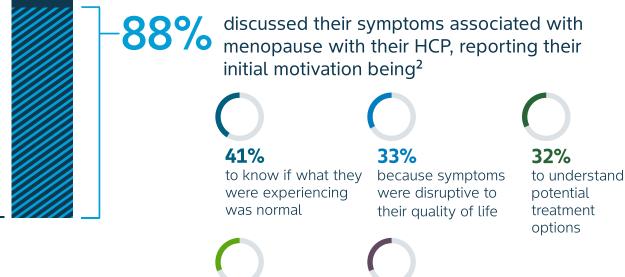
Of a provided list of 18 potential symptoms associated with menopause, the **top five most common potential menopause symptoms** that surveyed women ever experienced, even if not diagnosed as such, included:²



The Provider Discussion

Despite inconsistent and limited menopause-specific education during medical training,¹⁰ **nearly three-quarters** (73%) of surveyed providers reported they typically proactively bring up menopause at an age-appropriate time, while half (50%) of surveyed women who have discussed menopause with their provider said that they themselves initiated the conversation.²

Among the 93% of women who experienced symptoms²



47% of surveyed HCPs

Angela Clarke, MD

who bring up menopause, if a patient's needs or symptoms suggest that conversation would be helpful, **reported using tools like health intake forms to collect information about patients' menopause symptoms.**²

31%

to learn more

about menopause

Symptom Management

31%

to learn what was causing their

symptoms

89%

& 98% of surveyed

of surveyed women

of surveyed HCPs

agreed that menopause symptoms are worthy of medical treatment.²

Consider talking to your doctor about menopause symptoms to better prepare yourself for its onset.

Because menopause experiences are unique and different for each woman, working with your healthcare provider can help you create a care plan that meets your needs.

To Understand If You're

Experiencing Menopause, Consider Asking Your Doctor:

- 1. Are the symptoms I'm experiencing potentially due to the onset or experience of menopause?
- 2. What should I do if I'm experiencing symptoms typically related with menopause?
- 3. How can I properly manage my menopause symptoms?

Learn more about menopause symptoms, care and mid-life heath at www.nationalmenopausefoundation.org

www.letstalkmenopause.org

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Research Methodology

The patient research was conducted online in the United States by The Harris Poll on behalf of Bayer among 1,007 U.S. Females aged 40-70 who regularly see a healthcare provider for women's health and are currently in menopause or post menopause. Respondents living in Louisiana, Washington D.C., and Tennessee had no potential conflict of interest affiliation. The survey was conducted 7/23/24-8/1/24. Data are weighted where necessary by education, age, race/ethnicity, region, income, household size, marital status, employment, and smoking status to bring them in line with their actual proportions in the population..

The healthcare provider (HCP) research was conducted online in the United States by the Harris Poll on behalf of Bayer among 606 total HCPs including 301 working in an OBGYN setting and 305 working in a primary care setting. "OBGYN" setting is defined as MDs/DOs specializing in Obstetrics/ gynecology (OBGYNs) or Gynecology (270), and NPs/PAs working in an OBGYN setting (31). "PCP" setting is defined as MDs/DOs specializing in family practice, general practice, or internal medicine (272) and NPs/PAs in a PCP setting (33). All HCP respondents were aged 18+ and practiced in the U.S. (excluding Minnesota and Vermont).

Respondents did not have a conflict of interest, were duly licensed, practiced more than 2 years but less than 36, spent at least 70% of their time in direct patient care, and saw a minimum of 10 (PCP physicians and NP/PAs) to 15 (OBGYN physicians) women for symptoms associated with menopause in a typical month. NPs and PAs were also licensed to prescribe drug therapies. The survey was conducted 7/22/24-8/31/24. Data are weighted where necessary separately by OBGYNs and PCPs by gender and age to bring them in line with their actual proportions in the population. Data for NPs/PAs in a PCP or OBGYN setting were not weighted.

Respondents for this survey were selected from among those who have agreed to participate in online surveys. The sampling precision of Harris online polls is measured by using a Bayesian credible interval. For the patient survey, the total sample data is accurate to within ± 3.6 percentage points using a 95% confidence level. For the HCP survey, the total sample data is accurate to within ± 4.9 percentage points using a 95% confidence level. These credible intervals will be wider among subsets of the surveyed populations of interest. All sample surveys and polls, whether or not they use probability sampling, are subject to other multiple sources of error which are most often not possible to quantify or estimate, including, but not limited to coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments.