

## Exercise Helps Menopause Symptoms and Quality of Life

Beth Skwarecki | December 29, 2014

Middle-aged women who exercise regularly report a higher quality of life and reduced symptoms of menopause, according to a population-based study published in the January 2015 issue of *Maturitas*.

"Women with the recommended level of physical activity had a higher self-perceived health level, better relative health, and better global quality of life in relation to other women their age," write Kirsi Mansikkamäki, MSc, from the UKK Institute for Health Promotion, Tampere, Finland, and colleagues.

The investigators surveyed 2606 women from Finland's population registry, representing a 52% response rate from an original random sample of 5000 women. All were born in 1963, making them 49 years old at the time of the study. Of those, 28% were still menstruating regularly, 31% were perimenopausal, and 23% had not menstruated in the past 12 months. The menopausal status of the other 18% could not be determined because they were taking hormone replacement therapy.

The questionnaire, delivered by mail, included a shortened form of the Women's Health Questionnaire with questions about quality of life and perceived health, body mass index, education, and physical activity. Half had a body mass index below 25 kg/m<sup>2</sup> and were considered to be of normal weight.

The researchers considered women to be physically active if they met the recommended 2.5 hours per week of moderate activity (eg, fast-paced walking) or 1.25 hours of vigorous activity (such as jogging or running), and if they also did any strength or balance training at least twice a week. Just more than half of the participants (51%) met the definition of being physically active.

The less-active women were more likely to score highly for anxiety or depressed mood (proportional odds ratio [POR], 1.44; 95% confidence interval [CI], 1.26 - 1.65), somatic symptoms not counting vasomotor symptoms (POR, 1.61; 95% CI, 1.40 - 1.85), and memory and concentration problems (POR, 1.48; 95% CI, 1.29 - 1.70). Vasomotor symptoms, or hot flashes, were more common in less-active women before adjusting for body mass index and education, but after these calculations, they were not statistically significant.

Overall, the more active women had greater self-perceived health (adjusted POR, 3.22; 95% CI, 2.76 - 3.74) and global quality of life (adjusted POR, 1.91; 95% CI, 1.65 - 2.20) compared with other women their age.

Writing in an accompanying editorial, Debra Anderson, PhD, and Charlotte Seib, PhD, both from the Institute of Health and Biomedical Innovation at the Queensland University of Technology in Brisbane, Australia, note that studies on the effects of exercise on symptoms of menopause have been inconsistent. They suggest several possibilities. One is that some women who engage in less than the recommended amount of exercise may still see some benefits, causing the observed effect of exercise to be smaller than it really is. Another is that women experiencing more severe symptoms, whether physical or mental, may be less likely to engage in exercise.

Still, they write, "[t]he emerging evidence that exercise may now be seen as a useful intervention strategy for the alleviation of menopausal symptoms provides health professionals, with a new intervention for use in the care of menopausal women."

*The authors and editorialists have disclosed no relevant financial relationships.*

*Maturitas*. 2015;80:69-74. Article full text, Editorial full text

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Cite this article: Exercise Helps Menopause Symptoms and Quality of Life. *Medscape*. Dec 29, 2014.