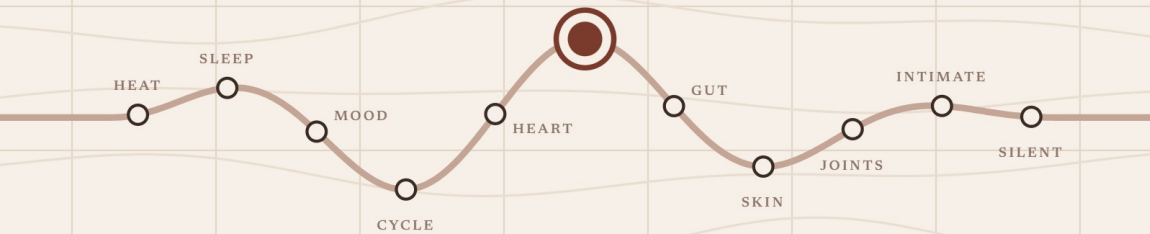


The Perimenopause *Symptom Atlas*



Hot Flashes, Night Sweats, Brain Fog, and 37 More
Perimenopause and Menopause Symptoms and Changes

What Else It Could Be, What Helps, and When to See a Doctor

EVERY OPTION EVIDENCE-RATED · EVERY SOURCE LISTED

The Perimenopause
Symptom Atlas

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How to Use This Atlas

This is a reference book. You don't need to read it in order. Most readers open it because one symptom has become hard to ignore: a night soaked in sweat, a period that won't stop, a heart that suddenly pounds, a mind that loses words mid-sentence. Look that symptom up, read its entry, and come back to the rest when you need it.

The book is written for women in perimenopause and menopause. It is also for trans men and nonbinary people with ovaries, who go through the same transition and deserve the same clear information.

Finding your way

If you know what to call the symptom, the **Contents** lists every entry in ten parts, grouped by body system. If you don't, start with the **Symptom Finder**, which translates everyday descriptions ("my skin crawls at night," "I can't find words") into the right entry. If something feels urgent, the **Red Flags** page lists the signs that need 911, 988 or a same-day appointment, all on one page.

How each entry is built

Every entry follows the same pattern, so you can skim:

- **At a glance.** Three lines: how common it is, the options with the strongest evidence, and how urgent it usually is.
- **In short.** The answer in one paragraph.
- **Why it happens.** What hormones do, and what else adds to it.
- **How common it is.** The best numbers available, with the study behind them.
- **What else it could be.** Look-alike conditions, the clues that point to them, and the usual test.

- **What helps.** Options ranked by evidence, strongest first, each with a label. When a check or a diary should come before any treatment, it leads the list.
- **See a doctor if.** When to book, when to hurry, and when to call 911.
- **Related.** Other entries that often travel with this one.

What the evidence labels mean

STRONG EVIDENCE

Works. Backed by good randomized trials or a firm recommendation in major clinical guidelines.

SOME EVIDENCE

Probably helps. Trials show a benefit, but they are few, small or short, or guidelines list it as one option among several.

LIMITED EVIDENCE

Might help. Results are early, weak or conflicting, so weigh cost and side effects before you try it.

NO GOOD EVIDENCE

No reliable sign that it helps this symptom: trials found no benefit, or there are no good trials.

DEPENDS ON THE CAUSE Works when a specific cause is found and treated, such as low iron or an infection.

NOT RECOMMENDED

A major guideline or the FDA advises against it for this use, because it doesn't work, isn't proven safe, or its risks outweigh the benefits.

Labels rate an option for the symptom in that entry. When an option works by treating something behind the symptom, such as hot flashes that break your sleep, the label rates that treatment.

A label describes the evidence for an option in general. It isn't a recommendation for you. Your history, your other medicines and your preferences change the picture, which is why the decisions belong with you and your clinician.

Sources and numbers

Every claim comes from a clinical guideline, a government health agency or a peer-reviewed study, named in the text. Full references are

in **Sources** at the back. US sources come first; where the clearest public guidance is British, the NHS or NICE is cited alongside. Percentages describe the people in a particular study and won't predict exactly what happens to you.

Medicines are named so you can recognize them, without doses. "Hormone therapy" in this book means menopausal hormone therapy, often called HRT.

Using the book with your clinician

Symptoms of the transition overlap with thyroid disease, anemia, depression and much else, and this book can't tell them apart for you. What it can do is help you describe what's happening clearly. **Getting to a Good Appointment** at the back turns your notes into a short, useful visit. The free Stage Finder at perimenostage.com/atlas takes about two minutes and gives you a suggested stage and a picture of which symptoms weigh most, which many readers bring along.

If someone shares your life

Symptoms rarely stay private. If you'd like a partner to understand what's happening, *Perimenopause and Menopause: A Partner's Guide*, also from Perimenostage, is written for them.

Red Flags: Get Help Now

Most symptoms in this book are uncomfortable but not dangerous. The signs below are the exceptions. This page does not diagnose anything. If you are unsure, call. Outside the United States, use your local emergency number.

Call 911

- Chest pain, pressure or squeezing that lasts more than a few minutes or comes back; pain spreading to the jaw, neck, back or arms; breathlessness; a cold sweat, a racing heart or fainting (*Heart Palpitations* 70, *Blood Pressure* 168, *Hot Flashes* 10). Women more often also have nausea or unusual tiredness.
 - Sudden numbness or weakness on one side, confusion, trouble speaking or seeing, loss of balance, or a sudden severe headache (*Dizziness* 78, *Headaches and Migraines* 74).
 - Don't drive yourself.
-

Call or text 988

- Thoughts of suicide or self-harm, or feeling unsafe (*Depression* 39, *Mood Swings and Rage* 32).
-

Get an urgent appointment

- Any bleeding 12 months or more after your last period, even once, even spotting (*Irregular Periods* 48, *Spotting Between Periods* 56).
 - Soaking through pads or tampons every hour for several hours in a row, or heavy bleeding with dizziness or breathlessness (*Heavy Periods* 52).
 - A new lump in the breast or armpit, nipple discharge with blood, dimpled skin, or a nipple that has pulled in (*Breast Tenderness* 122).
 - A UTI with back or side pain, fever, chills, nausea or vomiting (*Urinary Tract Infections* 154).
 - Sudden, severe pelvic pain (*Ovarian Cysts* 65).
 - Being unable to pee or to empty your bladder (*Bladder Leaks and Urgency* 157).
-

Make an appointment soon

- Night sweats with fever, a cough or weight loss you can't explain (*Night Sweats* 15).
- Two weeks or more of low mood or lost interest (*Depression* 39).
- Two weeks or more of bloating, pelvic pain or feeling full quickly that isn't normal for you (*Bloating* 90, *Ovarian Cysts* 65).
- Loud snoring with gasps or pauses in breathing (*Insomnia* 22, *Fatigue* 26).

Anything else that worries you is reason enough to call your doctor.

Symptom Finder

Look up what you notice in your own words. The right-hand column names the entry to turn to. Signs in **Red Flags** come first whenever they apply.

If you notice...	Turn to
Acid taste, burning chest after meals	Heartburn and Reflux 102
Anger, short fuse, rage	Mood Swings and Rage 32
Anxiety, dread, panic	Anxiety 36
Appetite loss	Nausea and Loss of Appetite 94
Belly fat, a thicker waist	Weight Gain and Belly Fat 125
Bleeding after menopause	Spotting Between Periods 56; Red Flags 6
Bloating, tight waistband	Bloating 90
Blood pressure creeping up	Blood Pressure 168
Body odor that has changed	Body Odor 119
Bone thinning, osteoporosis	Bone Health 139
Brain fog, forgetting words	Brain Fog and Memory 43
Breasts sore or lumpy	Breast Tenderness 122
Chin hairs	Acne and Facial Hair 110
Cholesterol results worse	Cholesterol 171
Cold flashes, chills after heat	Hot Flashes 10
Constipation, diarrhea	Digestive Problems 98
Cramps without a period	Cramps 59
Cysts on an ovary	Ovarian Cysts 65
Desire gone, or suddenly higher	Libido, Low and High 162
Discharge that has changed	Vaginal Discharge 151
Dizziness, feeling off-balance	Dizziness 78

Dry mouth, burning tongue	Dry Eyes and Dry Mouth 84
Dry skin, crawling or itchy skin	Itchy and Changing Skin 106
Dry, gritty eyes	Dry Eyes and Dry Mouth 84
Exhaustion that sleep doesn't fix	Fatigue 26
Fibroids	Fibroids 62
Hair thinning or shedding	Hair Loss 115
Headaches, migraines around periods	Headaches and Migraines 74
Heart racing, skipping, pounding	Heart Palpitations 70
Heat waves, flushing	Hot Flashes 10
Heavy bleeding, flooding, clots	Heavy Periods 52
Insomnia, waking at 3 a.m.	Insomnia 22
Joint aches, morning stiffness	Joint Pain 132
Leaking when you cough, laugh or run	Bladder Leaks and Urgency 157
Low mood, loss of interest	Depression 39
Nausea	Nausea and Loss of Appetite 94
Pain during sex	Painful Sex 148
Periods closer together, further apart, skipped	Irregular Periods 48
Pimples in your 40s	Acne and Facial Hair 110
Ringing in the ears	Tinnitus 81
Rushing to the toilet, peeing often	Bladder Leaks and Urgency 157
Shoulder stiff and painful	Frozen Shoulder 136
Spotting between periods	Spotting Between Periods 56
Sweating at night	Night Sweats 15
Sweats after a new medicine	Night Sweats 15
Urinary infections that keep coming back	Urinary Tract Infections 154
Vaginal dryness, itching, burning	Vaginal Dryness 144
Weight gain, clothes tight at the waist	Weight Gain and Belly Fat 125

Hot Flashes

AT A GLANCE

How common	up to three in four women during the transition.
Strongest options	hormone therapy; non-hormonal prescription medicines; CBT or clinical hypnosis.
How urgent	routine. Chest pain, fainting or a fever with the heat changes that (see below).

In short

A hot flash is a burst of heat that rises through your chest, neck and face, usually with flushed skin, sweat and a quicker heartbeat. It passes within several minutes and often leaves you chilled. It is the most common symptom of the menopause transition, it can begin while your periods are still regular, and it can go on for years. Effective treatment exists at every stage, so you don't have to wait it out.

Why it happens

A thermostat with less room to move. A small region of the brain, the hypothalamus, keeps your core temperature inside a comfortable band. Estrogen helps keep that band wide. As estrogen rises and falls unpredictably in perimenopause, a set of nerve cells that signal with a messenger called neurokinin B becomes overactive, and the band narrows (Conklin and Santoro, 2023). A tiny rise in core temperature, one you would never have noticed at 35, now registers as overheating.

A fast cooling response. Your body then sheds heat quickly. Blood vessels in the skin open, which is the red flush; sweat follows; your heart speeds up to move blood to the surface. Some women feel a flicker of anxiety or light-headedness a moment before the heat arrives.

Once the sweat evaporates you may shiver, and a few women notice the cold phase more than the hot one.

Why the week before a period. Estrogen dips before every period. For most of your life that dip is too gentle to upset the thermostat. In perimenopause the swings are wider and the thermostat is touchier, so the days before bleeding are often where flashes first show up, sometimes alongside menstrual migraine.

What sets off a single flash. Spicy food, alcohol, caffeine, hot drinks, smoking, stress and a warm room can tip an already sensitive system into a flash. Avoiding them can make particular situations easier. It does not change the underlying sensitivity, and The Menopause Society's 2023 review found no evidence that it lowers how often flashes happen.

How common it is

According to the US Office on Women's Health, hot flashes are the most common menopause symptom, and as many as three out of four women have them (2025d). A 2023 review in *JAMA* gives a range of 50% to 75% for hot flashes, night sweats or both during the transition (Crandall and colleagues).

They usually last longer than women expect. The Study of Women's Health Across the Nation (SWAN), which followed 3,302 women at seven US sites, found that frequent hot flashes lasted a median of 7.4 years in total and continued for a median of 4.5 years after the last period (Avis and colleagues, 2015). Timing of the first flash mattered most. Women whose flashes began while their cycles were still fairly regular had the longest course, a median of more than 11.8 years; women whose flashes started only after menopause had the shortest, 3.4 years. African American women reported the longest duration of any group, a median of 10.1 years. Higher stress, anxiety and depressive symptoms when flashes began were also linked with a longer run.

What else it could be

A menopausal flash comes in waves, peaks within minutes and fits your age and cycle changes. Heat that behaves differently deserves a second look.

- **Overactive thyroid.** You feel warm most of the time instead of in waves, with weight loss, shaky hands or a fast heartbeat at rest. A TSH blood test sorts this out.
- **A medicine.** Sweating began or worsened after a new prescription or a dose change. Some antidepressants, steroids, opioid painkillers and breast cancer treatments do this; see *Night Sweats* for more.
- **Infection or other illness.** The heat comes with a raised temperature on a thermometer, a cough, diarrhea or weight loss you can't explain.
- **Panic or anxiety.** Fear and a racing heart arrive first and the heat is secondary.
- **Low blood sugar or alcohol.** Sweats follow a skipped meal, diabetes medicine or an evening drink, and feel cold and clammy with shakiness.
- **Lifelong heavy sweating (hyperhidrosis).** Sweating is constant, not in bursts, and started long before midlife.

At 45 or older, a doctor can usually recognize perimenopause from new hot flashes plus any change in your cycle, without blood tests (NICE NG23). Between 40 and 45 a blood test may help, and before 40 testing is needed, because the US Office on Women's Health counts menopause before 40 as premature (2025a).

What helps

STRONG EVIDENCE **Hormone therapy.** Estrogen, taken with a progestogen if you still have a uterus, lowers the number of hot flashes by about 75% (Crandall and colleagues, 2023). Pills and skin patches work about equally well for this. The Menopause Society calls hormone therapy the most effective treatment and finds that for women under 60, or within

10 years of their last period, without reasons to avoid it, the benefits outweigh the risks (2022). It can be started in perimenopause, while you still bleed. It does not work as birth control. For what changed on US labels in 2025 and 2026, see *What Helps Across Many Symptoms*.

STRONG EVIDENCE **Non-hormonal prescription medicines.** If hormones are not right for you, several options carry The Menopause Society's top rating (2023). Fezolinetant (Veoza) blocks the neurokinin B signal directly. The FDA requires liver blood tests while you take it and tells patients to stop it and call their prescriber if signs of liver trouble appear (2026a). Elinzanetant (Lynkuet), approved in 2025, works on the same pathway. Certain SSRI and SNRI antidepressants and gabapentin cut flash frequency by roughly 40% to 65% (Crandall and colleagues, 2023). Oxybutynin, a bladder medicine, is also recommended.

STRONG EVIDENCE **CBT and clinical hypnosis.** Both carry The Menopause Society's top rating. They do less to the number of flashes and more to how much each one disrupts your day and your sleep.

SOME EVIDENCE **Weight loss.** The Menopause Society recommends it, on more limited evidence than the options above (2023).

LIMITED EVIDENCE **Cooling and trigger-avoidance.** Light layers, a fan, a cold drink and a cool bedroom make each flash easier to sit through. The Menopause Society does not count them as treatment because they have not been shown to reduce how often flashes come. If flashes are frequent, a conversation about treatment is the next step.

NOT RECOMMENDED **Supplements, soy, acupuncture, yoga and paced breathing.** The Menopause Society recommends against these for hot flashes (2023). Supplement quality also varies from bottle to bottle.

See a doctor if

- **Call 911** if a pounding or racing heart comes with chest pain, shortness of breath or fainting (MedlinePlus, 2026a). Don't drive yourself.

- **See a doctor** if the heat comes with a fever, a cough, diarrhea or weight loss you can't explain. MedlinePlus lists these alongside sweating as reasons to contact a provider (2025b).
- **See a doctor** if flashes and cycle changes start before 40, or if new flashes begin many years after your last period.
- **Ask about treatment** whenever flashes disrupt your sleep, work or mood. You don't need to reach a threshold first.

Related: *Night Sweats* 15 · *Insomnia* 22 · *Heart Palpitations* 70 · *Irregular Periods* 48 · *Headaches and Migraines* 74. To see where you are in the transition, the free Stage Finder is at perimenostage.com/atlas.

YOU'VE READ A SAMPLE

The full atlas has 40 entries.

Every one is built like Hot Flashes: what it is, why it happens, what else it could be, what helps ranked by evidence, and when to see a doctor. Plus the Numbers at a Glance, Getting to a Good Appointment, 221 sources and an index. 210 pages.

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