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Doctors' own experiences of menopause under the microscope in a first for medical conference

Menopause and its symptoms are causing many female anaesthetists to consider readjusting their work loads and time spent in the operating theatre for some procedures, according to new survey results to be presented in Sydney.

The impact of menopause on medical specialists and their workplaces is about to be debated for the first time by the Australian and New Zealand College of Anaesthetists (ANZCA) at its annual scientific meeting (ASM). ANZCA is believed to be one of the few medical colleges in the world to formally acknowledge menopause as a health and wellbeing issue for anaesthetists at its annual scientific meeting.

ANZCA is one of Australia and New Zealand's largest medical specialty colleges and 36 per cent of its anaesthesia fellowship aged 45-54 are women.

"Menopause has been included in clinical discussions by medical specialists at conferences for some time now, but this is quite a breakthrough to actually have a medical college acknowledge the impact of menopause as a health and wellbeing issue for its workforce," specialist anaesthetist Dr Andrea Binks says.

Dr Binks, a specialist anaesthetist at Wollongong Hospital, has organised three workshops on menopause and how it affects the working life of anaesthetists as a lead-in to the 5-9 May ANZCA meeting in Sydney.

She recently surveyed over 100 anaesthetists in Australia, New Zealand and the UK for a pilot study about menopause and how it impacts their clinical work.

Eighty per cent of the female anaesthetists surveyed reported symptoms that affected their physical and or mental health. Sixty-five per cent said menopause affected their ability to work with 24 per cent reporting "significant impact." Thirty-six per cent said they had either made their own changes to the way they work or would like to.

Respondents not only identified issues such as fatigue, brain fog and irritability affecting their mental health but noted the physical symptoms of hot flushes associated with menopause were detrimental with some admitting that they have had to reorganise their operating theatre shifts because of the intense heat involved in some operations and procedures.



Dr Binks says these symptoms aren't a surprise to many of her nursing colleagues and other medical specialists and allied health workers, who have had similar experiences over many years with menopause in the workplace.

Some of the anaesthetists' survey responses include:

- "Insomnia and much more rage, anxiety, despair than I have ever felt."
- "Hot flushes and sweats, bad temper. Yelling- at home not work"
- "Exhausted, insomnia, joint pains, abdominal bloating and cramps, asthma/chest tightness and cough, irritable and occasional anxiety (never previously had anxiety)"
- "Inability to concentrate all day. Back pain. Standing all day in a freezing operating theatre. Decreased tolerance of surgeons inappropriate banter"

"Others said they were counselled by well-meaning advisors to buy a USB desk fan to alleviate hot flushes but this is not very practical when you're in an operating theatre," Dr Binks explains.

"Many anaesthetists in the 45-54 year age group are at the peak of their careers and yet so many of them now find themselves having to deal with a raft of menopause symptoms.

"Some are having to make the difficult decision to transition away from leadership roles because of the effect of symptoms and others with predominant vasomotor symptoms such as hot flushes have said they have had to reconfigure the number of operating theatre 'lists' they commit to – particularly those involving obstetrics or burns surgery – due to heat intolerance in the operating theatre.

"What we're hoping to do now is raise awareness among anaesthetists on how we can best address this. There continues to be reluctance for women to admit symptoms and it's clear that many survey respondents (44 per cent) did not feel comfortable discussing their symptoms with managers," Dr Binks explains.

According to one respondent: "females are [already] overlooked professionally so I certainly would not be admitting to any vulnerabilities".

Fear of stigma and not wanting to be seen to need special allowances also featured in the comments with some saying they would like to be able to choose more flexible work arrangements so they have more control over when and how they work.

Possible strategies identified by respondents included fewer "on calls", cutting their working hours and more flexibility with rostering surgical patient operating "lists" to manage fatigue.

"Many of the respondents said they preferred an individualised response, as the nature and severity of symptoms varies enormously between women and within the same woman over time. Symptoms are usually time limited and women would expect to be able to reappraise working conditions once they have passed through the menopause transition," according to Dr Binks.

Dr Binks says colleagues are often not aware of how debilitating menopause symptoms can be.



In the UK the National Health Service last year announced a new national guidance on menopause for its workforce.

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