



## Fibromyalgia and Menopause Fact sheet

### Fibromyalgia

Fibromyalgia is characterised by:

- Musculoskeletal symptoms
- Widespread pain and stiffness.

Other commonly reported symptoms include:

- Sleep disturbances
- Fatigue
- Mood disorders
- Cognitive dysfunction or "Fibro-Fog".

Fibromyalgia primarily affects women and can manifest at any age, with symptoms typically emerging between 40-60 years of age, aligning with the hormonal transition phase [2].

Some women with a previous Fibromyalgia diagnosis report a worsening of Fibromyalgia symptoms around onset of menopause. Approximately 70% of perimenopausal women experience musculoskeletal pain [1].

In addition, there may be an increase in prevalence of new onset Fibromyalgia at this time [1].

### Sleep

Sleep disturbances in Fibromyalgia are reported in 75-90% of patients.

Complaints related to sleep often involve;

- Poor quality sleep
- Fragmented sleep
- Difficulty falling asleep
- Non-restorative sleep
- Early waking.

Sleep disorders have a major impact on Fibromyalgia symptoms, including musculoskeletal pain, fatigue, mood disorders and cognitive function [2].

Poor sleep has been reported in almost 90% of participants with Fibromyalgia. Sleep and Fibromyalgia exhibit a reciprocal relationship, so quality of sleep worsens with the severity of Fibromyalgia symptoms [3].

### Menopause

During the menopausal transition, approximately 70% or more of women experience symptoms related to oestrogen deficiency.

Commonly reported symptoms include:

- Hot flashes
- Sleep disturbances
- Night sweats
- Irregular menstrual cycles
- Vaginal dryness
- Sexual dysfunction
- Anxiety and depressed mood
- Joint pain and stiffness.

These symptoms are related to the menopausal transition stage, with a progressive increase in reports from early to late menopause [2].

### Treatment for Menopause

NHS Wales [4] suggest the following:

- Hormone Replacement Therapy (HRT) - tablets, skin patches, gels and implants that relieve menopausal symptoms by replacing oestrogen
- Vaginal oestrogen creams, lubricant or moisturisers for vaginal dryness
- Cognitive Behavioural Therapy (CBT) - a type of talking therapy that can help with low mood and anxiety
- Eating a healthy, balanced diet and exercising regularly - maintaining a healthy weight and staying fit and strong can improve some menopausal symptoms.

### Fibromyalgia & Menopause

There is a connection between the cessation of sex hormones (oestrogen, testosterone and progesterone) and Fibromyalgia symptoms.

Some women with Fibromyalgia have experienced an early onset of menopause, with symptoms either starting or worsening after menopause.

Additionally, women who experience early-onset menopause tend to have higher levels of sensitivity to both pain and non-pain stimuli compared to those with late-onset menopause [2].



## Support options

### Options, Advice, Knowledge (OAK) Menopause Awareness Session

The sessions are run by an Clinical Nurse Specialist and provide answers to:

- What is Menopause?
- What are the symptoms?
- How can I manage the symptoms?
- What treatments are available?
- Is HRT safe?

If you would like more information or to attend a session, please contact the team on:

01495 768645 or [OAKReferrals.ABB@wales.nhs.uk](mailto:OAKReferrals.ABB@wales.nhs.uk)

### Symptom Management Service

Managing Fibromyalgia typically involves a multifaceted approach, including exercise, stress management and lifestyle adjustments tailored to each individual's needs.

While there is no cure for Fibromyalgia, we do know that support to manage symptoms such as pain, fatigue and cognitive fatigue (brain fog) and learning skills in energy management can be helpful. We are also able to offer support with issues with work and education, sleep, low mood and anxiety caused by Fibromyalgia.

The aim is to help people have a better quality of life, doing more of what matters to them within the real limits placed on them by their condition

We offer:

- Condition Specific talks for Fibromyalgia, ME/CFS and Long Covid
- Symptom specific workshops for Energy Management, Brain Fog, disordered Breathing, Stress and Wellbeing
- 1-1 support with Occupational Therapy, Physiotherapy, Psychology, Exercise/Rehab Co-ordinator.

If you would like more information or to attend a session, please contact the team on:

03330 415379 or [Abb.symptommanagementservice@wales.nhs.uk](mailto:Abb.symptommanagementservice@wales.nhs.uk)

<https://abuhb.nhs.wales/hospitals/a-z-of-services/symptom-management-service/information-for-adults/>

### Move Better Gwent

Aneurin Bevan University Health Board has developed this website to help the community of ABUHB to look after their bones, joints and muscles.

For more information please visit: <https://movebettergwent.nhs.wales/>

1. Clarke, J., Briggs, P., & Goebel, A. (2025). Fibromyalgia and the menopause transition – what's what? Implications for patient outcomes. *Post Reproductive Health*, 31(1), 50–53. <https://doi.org/10.1177/20533691251325688>
2. Vidal-Neira, L. F., Neyro, J. L., Maldonado, G., Messina, O. D., Moreno-Alvarez, M., & Ríos, C. (2024). Climacteric and fibromyalgia: a review. *Climacteric*, 27(5), 458–465. <https://doi.org/10.1080/13697137.2024.2376190>
3. Dias RCA, Kulak Junior J, Ferreira da Costa EH, Nishihara RM. Fibromyalgia, sleep disturbance and menopause: Is there a relationship? A literature review. *Int J Rheum Dis*. 2019; 22: 1961–1971. <https://doi.org/10.1111/1756-185X.13713>
4. <https://111.wales.nhs.uk/encyclopaedia/m/article/menopause>