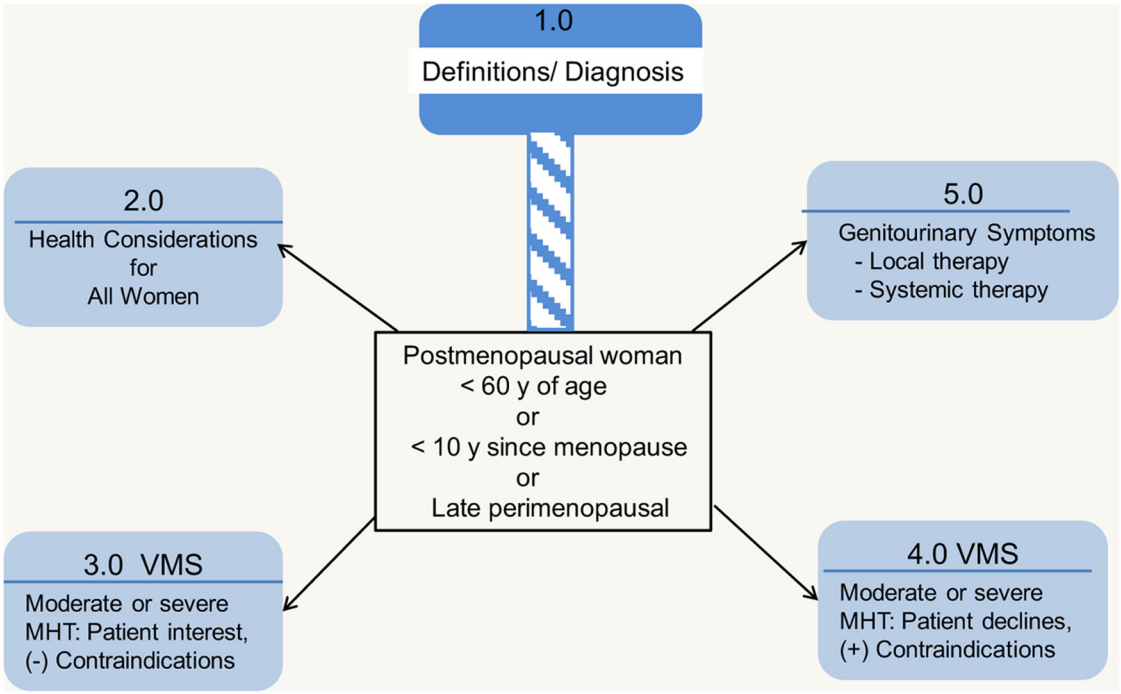

Figure 1. Approach to menopause guideline. Numbers correspond to section of text addressing selected clinical issue.

Diagnosis

Table 1 lists definitions of the clinical spectrum of menopause. In a woman with an intact uterus, menopause is a clinical diagnosis based upon cessation of menses for at least 12 months. Sex steroids, gonadotropins, inhibin B, or anti-Mullerian hormone measurements do not further inform the diagnosis, do not indicate precisely when the final menstrual period will occur, and will not influence management unless a woman is seeking fertility. In women having undergone a hysterectomy but not bilateral oophorectomy, elevated FSH levels and estradiol concentrations < 20 pg/mL on several occasions support but do not

Table 1. Definitions of Spectrum of Menopause

Menopause	Clinical status after the final menstrual period, diagnosed retrospectively after cessation of menses for 12 mo in a previously cycling woman and reflecting complete or nearly complete permanent cessation of ovarian function and fertility.
Spontaneous menopause	Cessation of menses that occurs at an average age of 51 y in the absence of surgery or medication (316–318).
Menopausal transition (or perimenopause)	An interval preceding the menopause characterized by variations in menstrual cycle length and bleeding pattern, mood shifts, vasomotor, and vaginal symptoms and with rising FSH levels and falling anti-Mullerian hormone and inhibin B levels, which starts during the late reproductive stage and progresses during the menopause transition (15, 319).
Climacteric	The phase in the aging of women marking the transition from the reproductive phase to the nonreproductive state. This phase incorporates the perimenopause by extending for a longer variable period before and after the perimenopause.
Climacteric syndrome	When the climacteric is associated with symptomatology.
Menopause after hysterectomy without oophorectomy	Spontaneous cessation of ovarian function without the clinical signal of cessation of menses.
Induced menopause	Cessation of ovarian function induced by chemotherapy, radiotherapy, or bilateral oophorectomy.
Early menopause	Cessation of ovarian function occurring between ages 40 and 45 in the absence of other etiologies for secondary amenorrhea (pregnancy, hyperprolactinemia, and thyroid disorders).
POI	Loss of ovarian function before the age of 40 y with waxing and waning course and potential resumption of menses, conception, and pregnancy (320). The prevalence of POI is approximately 1% (321) and is differentiated into idiopathic, autoimmune (associated with polyglandular autoimmune syndromes), metabolic disorders, and genetic abnormalities (including fragile X premutation).