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<b>Lachesis</b> <i>Homeopathic remedy</i>	Especially helpful at the menopause - when menses become irregular, > when bleed starts; when suspicious or jealous or usually very loquacious.
<b>Leakiness</b> ***	<p>Most women never talk about it (that's why I call it leakiness here rather than the more embarrassing incontinence or enuresis). Can be fairly constant, or just when walking, coughing or sneezing, or when they hear/see running water.</p> <p>Some women can laugh about it: they call themselves Tena-ladies. e.g. 'Don't make me laugh - I'm not wearing my Tena pads today'!</p> <p>Can be embarrassing to buy pads - HC says men's pads are kept on the top shelf at her pharmacy but women's are at eye-level. "They're used to looking at the top shelf - for girlie magazines!"</p> <p>Do men leak too? Yes, particularly if they have an enlarged prostate.</p> <p>Can be so serious that on rising a woman has to put a bath towel between her legs just to get to the loo. (CG)</p> <p>It happens at different times: walking downhill, sat in a car, or just getting to the loo and turning. (CG)</p> <p>Although Tena pants are designed to protect women with bladder weakness some pre-menopausal women find them helpful for flooding because the elastic prevents leakage. (TG)</p> <p>Self help and other interventions include Bowen, Pilates, pelvic floor exercises (for men and women) and Botox injections into the bladder. (E&amp;TG's)</p> <p><i>Caust, Ferr Phos, Nux Vom, Sepia, Apis, Nat Mur, Puls, Zinc Met.</i></p> <p>See Kegel, see Incontinence, see Prostate, see Drippy noses, see TVT</p>
<b>Leucorrhoea</b>	<p>Leuco = white. 'A white, mucous, vaginal discharge, usually the result of an infection of the vagina. Also called the whites.'</p> <p>Does leucorrhea also cover the normal oestrogen-</p>

	<p>related pre-menopausal cyclical discharge? It disappears as well as menses at the menopause. (Very very difficult to find any reliable information about this.)</p>
<p><b>Libido</b> *</p>	<p>Libido is conscious or unconscious sexual desire, not 'performance' or sexual satisfaction. Generally sexual desire increases with age for men and decreases for women. It is normal for sexual drive to diminish with age but the degree is highly variable. Elderly people often enjoy sex into later life, often beyond the expectations of others. Quality aspects of sexual activity may also change and improve with age. It is associated with wellbeing, hence illness, hormone changes and psychological factors may depress libido. Male hormones are important in libido for men and women. Lack of androgens and excess of prolactin both appear to be important.</p> <p>Reasons for low libido in mid life may be: Normal hormone changes at menopause. Treatment for cancer of prostate. Diminished sexual potency and vaginal dryness may contribute. If sex is not fulfilling, then interest will wane. There may be erectile dysfunction, premature ejaculation, failure of ejaculation or performance anxiety due to criticism. Other circumstances: illness, injury, stress, exhaustion, depression, anxiety, mental health problems, drugs or alcohol, family difficulties, grief, lack of time, prolonged separation for work or family issues, ageing and menopause. Poor body image and/or low self-esteem. Relationship issues. Past or current physical or emotional abuse. History of sexual abuse or rape. Latent lesbianism. Chronic high intake of alcohol depresses sexual desire and cirrhosis can depress androgen levels.</p> <p>HRT to promote libido is not appropriate on the balance of efficacy and risks. The value of androgen patches for treating hormone deficient men is somewhat dubious. The effects of the hormone on liver and cholesterol may be adverse. The use of testosterone in men is controversial and in women even more so.</p>

**Living alone/Staying together and LATs**

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Living Apart Together is a term for couples who, while committed to each other, decide to have separate homes rather than one shared residence. Research in 2007 suggested that there were as many LAT relationships in the UK as there were cohabiting relationships. There are three approaches LAT couples can take, concerning decision to keep separate domestic residences. The majority are the "gladly apart", along with the "regretfully apart" (due to work commitments, family responsibilities, legal or residency requirements, or other reasons) and the "undecidedly apart" (committed but not especially moving towards cohabitation at the time).

65% of divorces in people over 50 are initiated by women. They have many implications – good and bad.

May be a sharp contrast to the adjustment needed if/when the house gets fuller - by retirement, old or young people moving in.

Peace and quiet or terrifying emptiness. Possible solution: get a pet or a lodger.

What happens if I'm ill, have a fall, etc and I'm on my own?

The joy or horror of sleeping alone. (No more snoring or having the light on late)

Choosing everything on your own - what to eat, where to go that day, what to watch on the telly or listen to on the radio, etc.

F51: Loneliness. I could be left on the shelf if leave my husband.

On Staying together:

M53: Staying together at least until children leave home. And: Some people stay together - inappropriately.

'It's a good second chance'.

M81: I came close to leaving my wife many times in the past. She tolerated me, so it was hard to go. Now there's deep affection. I think of people who swop partners and don't get the enduring

	<p>advantages. And: But long lives nowadays leave room for two or more long relationships.</p> <p><u>M57</u>: Think of couples who don't have children (including gay couples).</p> <p><u>M53</u>: Making bones together.</p> <p><u>F64</u>: People have their children much later now. Men have their midlife crisis age 40-ish while their children are still young.</p> <p>And: It's important to swop roles in couples.</p> <p>Words of wisdom from a nurse who looked after her own parents long term. Regarding intervention when they need but refuse help "let them do what they want to do" - like getting dressed or not, taking medications or not, even not washing every day if they don't want to.</p> <p>"In this day and age when you can have it all it can be a bit unfair when you get it all" – (looking after parents, children and/or grandchildren). (TG)</p>
<b>Love</b>	Does it change in mid life?
<b>Lumbago</b> *	<p>Pain in the low back involving lumbar muscles and sacro ligaments in a girdle-like distribution. Usually worse in cold, wet, draughty conditions and for movement.</p> <p><i>Rhus Tox, Aconite, Arnica, Bryonia, Ant Tart, Sulphur</i></p>

<b>M</b>	
<i>Magnesiums</i> <i>Homeopathic remedies</i>	There are several magnesium based homeopathic remedies which can be used to sooth and sustain the whole body including the nervous system, digestion, skin, blood and heart.
<b>Male Menopause/Andropause</b> *	<p>Also known as late-onset hypogonadism (or getting on in years and underwhelmed in the gonads). It is believed to occur in 8.4% of men aged 50-79 years.</p> <p>Treatable with TRT, testosterone replacement therapy, in a long-acting injection or as a Testogel which is rubbed on the shoulders daily.</p> <p>Possible indications:  Declining sex drive  Fatigue and lessening energy  Forgetfulness and inability to concentrate  Anger, anxiety, irritability and depression  Weight gain  Sleep problems  Osteoporosis and muscle wastage  Confusion and indecisiveness  Declining self confidence  Hot flushes and night sweats.</p> <p>GP's may prescribe anti-depressants but they can make testosterone levels worse. One anti-depressant Effexor is now known in medical circles as 'No-sex-or'. (The Independent, 24.8.10)</p> <p>See Mid Life Crisis</p>
<b>Mammogram</b>	See Breasts
<b>Maturity</b>	<p>This was not on my original list but when the mixed Exeter group brought it up they talked for 25 minutes.</p> <p>It was a very male-dominated subject. Cornwall group women added more later.</p> <p>'Maybe less of a problem for women. They mature earlier and communicate better'.</p> <p>Definition: 'Having access to whatever we want to be'.</p> <p>'Maturity is not being so bothered – about anxieties'.</p> <p><u>F59</u>: Growing up, waking up and an ability to respond.</p>

	<p><u>M56</u>: Never give the I Ch'ing to a man or a woman until they've passed at least fifty summers.</p> <p><u>M81</u>: Maturity doesn't mean 'sorted'. It's about accepting things. 'Give me the wisdom to change ...' quote. And the saying: 'Don't marry someone who can't spend an evening on their own.'</p> <p><u>F51</u>: Maturity is related to happiness. But you don't have to be mature to be happy. Can remain childish.</p> <p><u>F51</u>: Maturity is associated with taking responsibility.</p> <p><u>M67</u>: Women are more mature than men, especially when linked to responsibility. Women take responsibility earlier than men – from childbirth.</p> <p><u>M56</u>: We can actually grow up. We can mature and grow up while other bits fall apart.</p> <p><u>F51</u>: Now eroded: women have to be providers because men walk away.</p> <p><u>F63</u>: Maturity – a compliment for men but heavy for women.</p> <p><u>M81</u>: Mature means old, so more acceptable to men and difficult for women.</p> <p><u>F63</u>: Men are more interested in maturity than women. Women are ahead of the game, men have to strive harder for maturity.</p> <p><u>M53</u>: Aware men think it's important. Women's journey is about taking power in the world. Men look at themselves, women are more okay with themselves.</p> <p><u>M81</u>: The old Woman's page in the Guardian was really interesting because it was about people and relationships, not action (like sport).</p> <p><u>M53</u> asks <u>M81</u> what are the qualities associated with maturity? 'The way you handle situations. Learning other people's ideas/concepts'.</p> <p><u>M67</u>: Maturity may be a state some of us don't want to achieve.</p>
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	<p><u>M57</u>: Like an apple – it reaches maturity then goes rotten!</p> <p><u>F64</u>: Giving independence to our children makes them mature.</p> <p><u>M81</u>: I have an uncomfortable feeling that I haven't matured!</p> <p>'We don't get the bodies we deserve. Just at the point we begin to get the hang of it all, things begin to sag. Jowls come. Hair, for many of us recedes. Joints seize up, teeth loosen, eyelids droop, baldness strikes the shins, the abdominal musculature fails and the belly pots, and there is damn all the gym can do about it.'</p> <p>And</p> <p>'I suppose there comes a time when many men stop weighing up women in terms of leg-over possibilities and haven't a clue where to go from there.'</p> <p>And</p> <p>'We don't expect women to fancy us or fall in love with us. But nor do we expect to be the target of bigoted <i>vieux jeu</i> populist insults because we're too good mannered to return them. Don't accuse us of saggy ugliness; it's a boomerang, dears.'</p> <p>(Michael Bywater, The Independent)</p>
<p><b>Memory loss</b> (including menopausal) *</p>	<p>May be quite frightening, especially around the menopause years, 45-55. Can feel as though the memory falls into a 'black hole', either momentarily or more generally. Usually recovers quite a lot or totally by age 60. Fear of dementia.</p> <p>Big difference between: 'Where are my glasses?' and 'What are my glasses?'</p> <p>Losing the car keys or losing the ability to drive. Forgetting where you parked the car or not knowing how to find your way home. Forgetting your grandchild's name or forgetting to pick the grandchild up from school.</p> <p>May be called Senior Moments or CRAFT Moments (Can't Remember a F***** Thing).</p> <p>Ageing tends to cause loss of short-term memory but improved long-term memory. If you can't remember names any more just say: 'I'm so sorry I've forgotten your name. All I remember is that I know I like you'.</p>

	<p><u>F60</u>: Sometimes memory loss can be helpful, like forgetting the year of my mother's death and things like that.</p> <p>Possible causes:  Important: Urine infection  Underactive thyroid  Vitamin B12 deficiency  Hormonal – menopause  Alcohol  Hughes syndrome, a.k.a. sticky blood syndrome - rare</p> <p><i>Anac, Arg Nit, Aurum, Conium, Bar Carb, Kali Brom, Lyc, Merc Sol, Nux Mosch, see Oleander, see Physalis, see Dubois (HfW, etc.)</i></p> <p>See Dementia, see Hughes syndrome.</p>
<p><b>Menopause</b>  ***</p>	<p>JH theory: The more unresolved emotional baggage a woman carries with her into the menopause the worse her symptoms may be.  And a difficult menstrual history may also lead to a difficult menopause.</p> <p><u>M53</u>: Some women want to pull away from men at their menopause. Losing reproduction - my wife lost interest in me because she can no longer have babies.</p> <p><u>F51</u>: Women want to shed that image of carer</p> <p><u>F59</u>: It's a natural process. We need good communications - to talk about natural difficulties.</p> <p><u>F60</u>: My special awareness has diminished since the menopause. I can't reverse my car so well.  <u>F63</u>: But it should improve again after a while.</p>

	<p><a href="http://www.menopausesupport.org.uk">www.menopausesupport.org.uk</a> A social enterprise company Menopause Support which combines courses with an interactive website delivering information, self-help tips and useful exercises and techniques to enable women to take more control of their lives.</p> <p><a href="http://www.daisynetwork.org.uk/pdfs/Natural_Menopause_Guide.pdf">http://www.daisynetwork.org.uk/pdfs/Natural Menopause Guide.pdf</a> A brief and moderately helpful booklet produced by Pharma Nord on nutritional supplements.</p> <p>The cessation of menstruation, usually around age 50-52, caused by the end of the end of the reproductive cycle of ovulation; also brought on by surgical removal of ovaries and can be from psychological causes.</p> <p>Approx 10 years of peri-menopause when the symptoms start and may include flooding, fibroids, menstrual irregularities, then 10 more post-menopause after periods have stopped and symptoms gradually cease.</p> <p>Can cause any or none of these, either mildly or severely:</p> <p>Mood swings, irregular periods, menstrual clots, emotional tension, sexual changes (too much or too little desire), night sweats, hot flushes (which may be dry or damp, visibly red or not visible at all), vaginal atrophy/ dryness - itching and dryness that can make sex very uncomfortable. Sleep disturbance (from sweats and flushes) leading to irritability and problems with short-term memory and concentration. Also headaches, rheumatic pains, urinary infections such as cystitis, haemorrhoids, varicose veins, vertigo, transient memory loss, depression and more. Psychologically can be painful if hoped-for family has not been possible.</p> <p>Conventional treatment includes oestrogen cream and vaginal pessaries; Hormone Replacement Therapy which replaces missing oestrogen or Tibolone, a synthetic steroid like HRT.</p> <p><i>Sepia, Lachesis, Pulsatilla, Folliculinum, Carcinosis, Nat Mur, Ignatia, Lilium Tig, Cimicifuga, Verat Viride, Caulophyllum, Amyl Nit, Sanguinaria, Bellis Per.. etc.</i></p> <p>See Hot flushes; see Obesity, see Sex; see Leucorrhoea; see Menopause; see Natural Progerone</p>
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<p><b>Mid Life Crisis</b> ***</p>	<p>Often home and work life is secure, friends are established, finances okay but something seems to be missing. A sense of being trapped by the very things and events that have been planned and worked for over the years. A period of profound self-appraisal with flatness and depression, failure and futility. Life's procrastinators: a fear of making changes in the past or future. Consequences affect everyone in the family. Rigidity and overwork may result as compensation. Infidelity, separation and divorce too. Midlife crises produce a peak in divorce. It's a modern phenomenon partly because people live so much longer and potentially have many more years with their partner after children have grown up than they used to. Before good contraception women could be well into their fifties before children grew up - then they died!</p> <p>Men – midlife crisis age 40-ish while children still young.</p> <p><i>May respond very well to homeopathy. Lyc, Nux Vom, Bryonia, Ars Alb, Kali Carb, Carcinosin.</i></p> <p>See Male Menopause, see Empty Nest</p>
<p><b>Money: poverty and wealth</b></p>	<p>Maybe much less than expected – or maybe much more from inheritance. Pensions/property/benefits/etc.</p> <p>Not specific to mid-life but we may be more used to make-do-and-mend than younger people if times get hard. Some people may be surprisingly well off because they have good index-linked pensions while others are much poorer at retirement. Some people may become unexpectedly rich from inheritance while others watch their parents' carefully accumulated wealth pay for nursing home fees.</p>

<b>N</b>	
<b>Nails</b>	<p>Become much stronger and thicker - both finger nails and toe nails.</p> <p>Gradual trauma (even micro-trauma with every step over the years) causes thickening.</p> <p>Also increased difficulty in bending to cut them.</p> <p>If nails are thin and split, type more. (LC)</p> <p>See Hair – Evening Primrose</p>
<b>Naps</b>	<p>A strong, sometimes uncontrollable need or desire to rest or doze in afternoons or evenings.</p>
<b>Nat Mur</b> <i>Homeopathic remedy</i>	<p>A wonderful British ‘stiff upper lip’ remedy especially for the effects of grief, including loss of a marriage/divorce when there may be some bitterness</p> <p>See <i>Carcinosin</i></p>
<b>Natural Progesterone cream</b>	<p>Definitive book written by American GP, Dr John Lee in 1993:</p> <p>Pros: 105 women used it for menopausal symptoms with 86% success rate.</p> <p>a.k.a Serenity Cream.</p> <p>Pros and cons:</p> <p><u>F59</u>: I tried it at age 57 but it gave me acne; I must have still been producing my own hormones then (with a late menopause). Now, at 59, I feel it allows me to produce the oestrogen I need now. If your body isn’t ready for it you could easily give up. I was getting fat cells, a ‘muffin top’ appearance but it went away when I re-started Serenity. I wouldn’t take HRT. HRT replaces oestrogen. But natural progesterone (Serenity) stimulates oestrogen production. If I’m not capable of producing it I wouldn’t take it. It has plumped up my vaginal tissue.</p>

<b>O</b>	
<b>Obesity</b> *+	<p>In addition to dietary indiscretions can also occur with hormonal changes such as thyroid imbalance especially at menopause.</p> <p>Dietary denial is common; we don't record or (want to) remember everything we eat.</p> <p><i>Thyroidinum, Nat Mur, Calc Carb, Phytolacca Berry – tincture.</i></p> <p>See Cellulite, see Weight gain</p>
<b>Old feeling</b>	<p><u>F51</u>: I felt old when I turned 50, like my mother. I took <i>Hydrogen 1M (a homeopathic remedy)</i> daily for a few days and now feel less old.</p> <p>An older or 'feeling old' partner can make the other partner feel older than they are.</p>
<b>Oleander</b> <i>Rose-laurel</i> <i>Homeopathic remedy</i>	<p>Weak memory. Slow perception. Sadness with loss of confidence and power. Also v. sensitive skin, cramps, heart symptoms, etc. (HfW)</p>
<b>Osteoporosis</b> *	<p>Osteoporosis means "porous bones" - when bones lose an excessive amount of their protein and mineral content, particularly calcium.</p> <p>Bone is living tissue that is constantly being renewed in a two-stage process (resorption and formation) that occurs throughout life.</p> <p>In the resorption/demineralizing stage which reduces bone density, old bone is broken down and removed by cells called osteoclasts. In the formation stage which increases bone density, cells called osteoblasts build new bone to replace the old.</p> <p>Osteoblast activity is stimulated by progesterone, oestrogen, testosterone, isoflavones, synthetic selective oestrogen receptor modulator molecules (SERMs), vitamin D and exercise.</p> <p>Osteoclast activity is stimulated by immune system disorders, depression, inactivity, nutrient-poor diet, steroid drugs and depleted hormones.</p> <p>Over time, bone mass, and therefore bone strength, decreases; bones become fragile and break easily. Even a sneeze or a sudden movement may be enough to break a bone in someone with severe osteoporosis.</p> <p>Occurs most often in older people and in women after menopause. Affects nearly half of men and</p>

women over the age of 75. Women are about five times more likely than men to develop the disease because of smaller, thinner bones to begin with, and they lose bone mass more rapidly after menopause when they stop producing oestrogen, a bone-protecting hormone,. In the 5-7 years after menopause, women can lose about 20% of their bone mass. By age 65 or 70, men and women lose bone mass at the same rate. As an increasing number of men reach an older age osteoporosis is an important health issue for them as well.

While women commonly lose 30-50% of their bone mass over their lifetimes, men lose only 20-33%. Women with small bones and those who are thin are more liable to have osteoporosis.

The most common fracture locations are the hip, spine, and wrist, but any bone can be affected. Breaks in the hip and spine are of special concern because they almost always require hospitalization and major surgery, and may lead to other serious consequences, including permanent disability and even death.

Compression fractures of the spine are common. These can happen even after a seemingly normal activity, such as bending or twisting to pick up a light object. The fractures can cause severe back pain, but sometimes go unnoticed—either way, the vertebrae collapse down on themselves, and the person actually loses height. The hunchback appearance of many elderly women, sometimes called "dowager's" hump or "widow's" hump, is due to this effect of osteoporosis on the vertebrae.

Women who stop menstruating early because of heredity, surgery or lots of physical exercise may lose large amounts of bone tissue early in life. Conditions such as anorexia and bulimia also may lead to early menopause and osteoporosis.

Smoking, drinking too much or lack of exercise produces an increased chance of osteoporosis. Also calcium or protein dietary deficiency - hence people who constantly diet are more prone to the disease.

Genetics. Research in Europe reported in 2003 that variations of a gene on chromosome 20 might make some postmenopausal women more likely to have

osteoporosis.

During childhood and early adulthood, more bone is produced than removed, reaching its maximum mass and strength by the mid-30s. After that, bone is lost faster than it is formed - primary osteoporosis. Can also be caused by other diseases or prolonged use of certain medications like steroids that result in bone loss - secondary osteoporosis.

The most accurate and advanced of the densitometers uses a technique called DEXA (dual energy x-ray absorptiometry). With the DEXA scan, a double x-ray beam takes pictures of the spine, hip, or entire body. It takes about 20 minutes to do, is painless, and exposes the patient to only a small amount of radiation—about one-fiftieth that of a chest x ray. The CT scan, which takes a large number of x rays of the same spot from different angles, is an accurate test, but uses higher levels of radiation than other methods.

Alternative treatments focus on maintaining or building strong bones. A healthy diet low in fats and animal products and containing whole grains, fresh fruits and vegetables, and calcium-rich foods (such as dairy products, dark-green leafy vegetables, sardines, salmon, and almonds), along with nutritional supplements (such as calcium, magnesium, and vitamin D), and weight-bearing exercises.

Herbal supplements emphasize the use of calcium-containing plants, such as horsetail (*Equisetum arvense*), oat straw (*Avena sativa*), alfalfa (*Medicago sativa*), liquorice (*Glycyrrhiza galbra*), marsh mallow (*Althaea officinalis*), and yellow dock (*Rumex crispus*).

Traditional Chinese medicine recommends herbs thought to slow or prevent bone loss, including Dong Quai (*Angelica sinensis*) and Asian ginseng (*Panax ginseng*).

Natural hormone therapy, uses plant estrogens (from soybeans) or progesterone (from wild yams), may be recommended for women who cannot or choose not to take synthetic hormones.

Getting calcium from foods:

Milk, cheese, and yogurt have the highest amounts. Other foods that are high in calcium are green leafy vegetables, tofu, shellfish, Brazil nuts, sardines, and almonds.

Vitamin D helps the body absorb calcium. People

	<p>can get vitamin D from sunshine with a quick (15-20 minute) walk each day or from foods such as liver, fish oil, and vitamin-D fortified milk. During the winter months it may be necessary to take supplements. Four hundred mg daily is usually the recommended amount.</p> <p><u>Smoking</u> reduces bone mass, as does heavy drinking. Avoiding smoking and limiting alcoholic drinks to no more than two per day reduces risks. An alcoholic drink is one-and-a-half ounces of hard liquor, 12 ounces of beer, or five ounces of wine.</p> <p><u>Exercise</u> regularly builds and strengthens bones. Weight-bearing exercises—where bones and muscles work against gravity—are best. These include aerobics, dancing, jogging, stair climbing, tennis, walking, and lifting weights. People who have osteoporosis may want to attempt gentle exercise, such as walking, rather than jogging or fast-paced aerobics, which increase the chance of falling. Exercising three to four times per week for 20-30 minutes each time helps.</p> <p>Apparently over-the-counter laxatives and antacids (which contain aluminium) should be avoided.</p> <p>Meta-analysis encompassing 15 randomised trials and over 11,000 participants concluded that the use of calcium supplements for osteoporosis without co-administered vitamin D is associated with an increased risk of MI (heart attack). ‘Clinicians should tell their patients that for most older people the risks of calcium supplements outweigh the benefits. Changing to calcium-rich foods may be appropriate’ (Dr Ian R Reid, University of Auckland) (BMJ online 29.7.10)</p> <p><i>Homeopathic remedies focus on treatments to help the body absorb calcium.</i>  <i>Calc Carb, Calc Phos, Calc Fluor, Hekla Lava, Silica, Symphytum</i></p> <p>See Back</p>
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<b>P</b>	
<b>Pelvic Floor Muscles</b> ***	Weak after childbirth but also as a result of hormonal changes in mid-life.  <i>Sepia. Nat Mur.</i>  See Kegel exercises, see Leakiness
<b>Pills</b> *	For everything: not just for treating symptoms but now for preventing them as well. Staying healthy is a new marketing opportunity. e.g. Statins, beta blockers warfarin, vitamins, mineral supplements, fish oils, etc. People even have boxes labelled with the days of the week so they can load them with each day's pills. Do they all do what they're meant to?  All drugs (including some herbal medicines) have some side effects and patients may become dependent on some of them, and some just don't work.  Side effects – important: Can also be from nutritional supplements and herbal remedies, e.g. Agnus Castus (head falling) as herbal menopause treatment.
<b><i>Physalis (Solanum Vesicarium)</i></b> <i>Winter Cherry</i> <i>Homeopathic remedy</i>	Weak memory and urinary symptoms. Dizziness with haziness. Urge to talk continuously (HfW)
<b>Potency</b>	Male loss of potency = loss of confidence++ as well
<b>Progesterone</b>	See Natural Progesterone cream
<b>Prolapse</b> *+	Bladder and uterine. At every cough (LyH).  Often needs surgical intervention but homeopathic remedies <i>Agaricus, Arg Met, Sepia</i> may help.  See Kegel
<b>Prostate enlargement/cancer/prostatitis</b> ***	Enlarged prostate (benign prostatic hyperplasia or <u>BPH</u> ).  <u>PSA</u> (Prostate-specific antigen) blood test for

prostate cancer is very unreliable. Normal PSA is 4. I have seen men swing between 4 and 400 in the space of weeks - very unreliable.

Caused by an overgrowth of prostate cells, symptoms include: difficulty passing urine because of weak and slow flow, passing urine frequently (more than 10 times a day), frequently waking up in the night to urinate (nocturia), incomplete emptying of the bladder.

Similar to prostate cancer, prostate enlargement usually only affects men over the age of 50, and about half men over this age will have some sort of prostate enlargement.

For mild symptoms: avoid alcoholic or caffeine-based drinks; avoid drinking late at night; increase fruit and fibre in diet to avoid constipation, which can put pressure on the bladder.

Other treatment options can include medication or a prostatectomy (a surgical procedure to remove part of, or the whole, prostate).

Radiotherapy implants may be used now for prostate cancer.

Prostatitis is inflammation of the prostate, often caused by a bacterial infection. It can be caused by an infection that spreads from the bladder or can be an associated symptom of an STI, such as Chlamydia. It shares similar symptoms to a bladder infection, such as difficulty in passing urine, but if an STI is present then there can be additional symptoms, such as discharge. The infection can develop into a chronic condition, in which case it can reoccur at frequent intervals. There is no single cure for chronic prostatitis – if antibiotics don't clear up the infection then self-help measures such as hot baths, avoidance of strenuous activity and regular ejaculation are normally prescribed, the latter helping to drain the prostate and clear infected matter.

Zinc supplements; Pumpkin Oil; Boiled broccoli juice relieves pain.

*Homeopathy: Always give Thuja or Med then Sabal Serr even for normal enlargement in old men; Conium - with urination problems; Euphr; Ferr Pic; Chimaphila; Lyc (KM). Sabal Serr in high potency followed by low, Gels. (Trevor Smith). For enlargement - pumpkin seeds made into a porridge*

	<p><i>for breakfast (Boericke); Hydrangea 200 – urine retention; Cad Phos, Bar Carb, Nux Vom, Hydrastis 200, Selenium, Alumina, Pop Trem, Digitalis, Staphysagria 200. (Elvia Bury).</i></p> <p>See Kegel exercises</p>
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<p><b>Q</b></p>	<p>No information</p>
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<b>R</b>	
<b>Respect</b>	<u>M57</u> : For elders. No more.
<b>Retirement</b> *	<p>Doesn't suit everyone equally. Some love it while others feel like a spare part.</p> <p>Some can retire comfortably while others have to continue to work for the money.</p> <p>Many want to continue to work beyond 60 or 65. B&amp;Q actively encourages older workers. 'The problem with retired people is that they're so incredibly busy'.</p> <p>'The strange experience of going back to visit your old workplace or attend an old colleague's retirement party and finding you know no-one there. And they're all so young'.</p> <p>One woman worried for the first six months of retirement that she'd die 'because people retire then die'.</p> <p>'It's a real issue doing things just for myself.'</p> <p>'Looking after the family isn't a proper job (therefore you can't retire from it)'</p> <p>'I feel guilty that I'm not working any more. (4 others agreed with this.) I can't sit and read a book during the daytime.'</p> <p>Unlike the Maturity topic which was dominated by men, this one was dominated by women.</p> <p><u>F58</u>: (After leaving work prematurely to look after her mother) I don't know what I am now. I always worked.</p> <p><u>F56</u>: I looked forward to his retirement but he's refusing to retire. He wants a new career.</p> <p><u>F54</u>: There can be problems in clergy families. They can go on to 70 and cling to their title and authority. Their wives have to share them all of the time (and there can be hostility from parishioners if the wife has her own life and interests or even just</p>

	<p>looking after her children which stop her giving wholehearted support to the church and her husband). Some clergy have no home to retire to and no money to buy one. (Farmers can be in tied houses too).</p> <p><u>F63</u>: My husband works away a lot. I can't imagine what it will be like when he retires. Professions like the armed services, oil rig workers, even teachers – they can be either away all the time or at home all the time - difficult and frequent transitions. Retirement is more final than that.</p> <p><u>F64</u>: You only retire for 2 weeks then get on with it.</p> <p><u>F51</u>: It's difficult and exhausting to organise your life without a schedule (of work). You need to retire <i>to</i> something.</p> <p><u>F61</u>: It's bloody awful (when your husband retires).</p> <p><u>F56</u>: No routine, no pattern.</p> <p><u>M57</u>: You need something to retire to, a passion.</p> <p><u>F59</u>: You lose your confidence.</p>
<p><b>Rheumatism</b></p>	<p>Inflammation of the sheaths of the muscles and joints. Painful with swelling sometimes. Caused by damp, cold, chills and draughts.</p> <p><i>Rhus Tox, Bryonia, Rhododendron, Causticum, Pulsatilla, Ruta Grav, Calc Hypophos – sharp pains in wrists/hands.</i></p> <p>See Arthritis</p>

<b>S</b>	
<b>Sciatica</b> *	<i>Kali Iod, Lyc, Viscum Alb, Coloc, Rhus Tox, Indium (Elvia Bury)</i>
<b>Selfishness</b>	Can get more selfish – may be a good thing or a bad thing
<b>Sepia</b> <i>Homeopathic remedy</i>	The Woman’s Friend - a constitutional remedy from puberty to old age
<b>Senile Atrophic Vaginitis</b> a.k.a. <b>Vaginal Atrophy</b>	<p>Post menopause, after oestrogen levels have dropped (and the oestrogen/testosterone balance is altered) the vaginal mucosa (lining) becomes thin, loses its elasticity and also its resistance to normal organisms that live around that tissue.</p> <p>The vagina can become inflamed and painful and, in time, narrows - making medical examinations and sex agonising. The vulva also shrinks with age. Only treatment is to restore oestrogen levels artificially.</p> <p>Can happen to women who have virtually symptom-free menapauses.</p> <p>The word Senile is generally not used by doctors now! (Dr Stuttaford in The Oldie, Feb 2008)</p>
<b>Serenity</b>	See Natural Progesterone Cream
<b>Sex</b> *	<p>Questions, questions: When does sex end naturally/biologically? Or doesn’t it? For women? (Gradually from 55 – 60 for me but I didn’t realise it would become permanent at the time.) For Men? (? 60+) How long do men go on for? Does it depend on their partner’s age? There are lots of older Dads. Does it matter when sex ends? Do practitioners need to know? Do people need to know when it will end for them?</p> <p>I gave out simple and anonymous questionnaires after some of my seminars but there was no consistency in replies to the above questions.</p> <p>We may be living in sexually enlightened times but sex is still a great taboo subject. Even calling it something can be difficult: ‘sex’, ‘sleeping with’, ‘fuck’, etc.</p>

People will talk about all sorts of relationship problems but very few can talk about what goes on in bed. For the last 40-50 years, perhaps since The Pill was developed and fertility was relatively easy to control sex became marketable as a must have, must do achievement. Magazines like Cosmopolitan, Forum, etc. taught us about multiple orgasms, simultaneous orgasms, G spots, female ejaculation, fantasies, mirrors, threesomes or even foursomes. And most importantly, if you weren't having loads of sex you'd become shrivelled and repressed. Consequently the idea of sexual failure and sexual pathology was born.

### **How's this for medical cynicism?**

From an October 2010, newspaper announcement: 'Female Sexual Dysfunction was invented by the drug industry'. 'Female Sexual Dysfunction – which is claimed to affect up to two thirds of women – is a disorder invented by the pharmaceutical industry to build global markets for drugs to treat it, it is claimed today. Drug companies have invested millions in the search for a female equivalent of Viagra, so far without success. But while doing so they have stoked demand by creating a buzz around the disorder they have created, according to Ray Moynihan, lecturer at the University of Newcastle, Australia. Corporate employees worked with medical opinion leaders, ran surveys aimed at portraying the problem as widespread and helped create the diagnostic instruments to persuade women that their sexual difficulties deserved a medical label. But sex problems in women are far more complex than they are in men, encompassing lack of desire, lack or arousal and lack of orgasm and the industry's narrow focus is failing them.

In his book *Sex, Lies and Pharmaceuticals* Mr Moynihan says:

Drug marketing is merging with medical science in a fascinating and frightening way..... In 2005, Pfizer, makers of Viagra, funded a survey which showed that 63% of women had sexual dysfunction and that testosterone and Viagra might be helpful. In 2006, Procter and Gamble, makers of a testosterone patch for women, sponsored a survey showing one in 10 postmenopausal women had hypoactive (low) sexual desire disorder. Etc. Efforts by the companies to meet the need have subsequently foundered ..... although the drugs have so far failed more are in the pipeline and 'the drug industry shows no sign of abandoning plans to meet the unmet need it has helped to manufacture.

**Increasingly I believe that low sexual desire in women after the menopause is normal! – unless they take HRT.**

In September 2010, the British Society for Sexual Medicine (BSSM) noted that some patients are inappropriately prescribed drugs which do not effectively tackle their problem.

More than half of patients taking Viagra found it did not solve their problems adequately. Low testosterone (see Male Menopause) was the main problem for 10% of men suffering erectile dysfunction and drugs such as Viagra had no effect if taken alone.

[www.bssm.org.uk](http://www.bssm.org.uk) - good website.

F63: My husband became impotent 10 years ago at age 53 when his mother died. Viagra restored his sex life very successfully 18 months ago and I started using natural progesterone cream a few months ago to enjoy a renewed (post-menopausal for me) sex life. Then my husband suggested I use Viagra (for women) as well but I became aware that my body was naturally winding down sexually and I did not feel that it was appropriate for me. We've got a good relationship so we could discuss these difficulties and pleasures with honesty and good humour. I am though a great believer in listening to your body.

M53: Children and menopause can cause relationships to flounder. Sexuality/intimacy.

F62: Viagra gave my partner a good erection but he couldn't come. And he had side effects – headaches and insomnia.

F59: 'Not necessarily a sign of other things wrong. But sex is not easy. Can't easily talk about sex and sexuality with partner, it's embarrassing, but I'm determined to keep communication skills open.

F56: My husband gets more exhausted after sex. It's draining.

F57: My libido has gone underground; it takes longer to get there – but it's more intense and enjoyable than before the menopause.

M53: Testosterone rocks on, oestrogen withdraws' And 'It makes a big problem. A big loss when it goes. Sex keeps you together.

M67: There's no warning.

	<p><u>F53</u>: The media concentrates on male sexuality – Viagra, etc. Nothing for women – only menopause. Dry vagina/desire.</p> <p><u>F63</u>: Not much info around for women maybe because they retire at 60. Gradual changes until disappointment at 60. I thought I could treat things – but I failed. The media suggest we’re all at it all the time.</p> <p><u>F53</u>: TV talk shows message: it goes on forever but you may need more lubricant. And do they take HRT?</p> <p><u>M67</u>: You have to change gear, discover other things.</p> <p><u>F59</u>: My husband sometimes just needs sex for a release. A loving relationship enables a woman to be more giving: a ‘quickie’ for the right reasons. An honesty about it.</p> <p><u>M57</u> talking about his in-laws: Older couple – decided no more sex at 60. He was nasty, now they’re wonderful friends.</p> <p><u>F63</u>: Dryness is first stage of failure. You think everyone else is doing it. I couldn’t talk about it then – my own personal inadequacy. You try the ads for lubricants but then everything shrivels up and no lubricant helps any more.</p> <p><u>F63</u>: Women tend to take the blame but possibly men in their 50’s don’t perform as well as they did, hence Viagra. Are men happy for women to blame themselves? Does it let men off the hook? It’s very isolating for women.</p> <p>Very little comment from the men except medical reasons (excuses?): ‘Men have less energy; they can’t do what they used to do, but “still a man”!</p> <p><u>M57</u>: Men have a problem (if their performance fails). I always thought women had got it sorted.</p> <p><u>M56</u>: Potency. It’s crushing if men can’t get it up. A quick sense of failure both ways. Women can’t understand that’</p> <p><u>M53</u>: Bloody erection. The difference between intimacy and sexuality is important. And: My wife lost</p>
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	<p>interest in me at the menopause because she can no longer have babies.</p> <p>Perhaps this is more common than anyone realises. Sex hormones have a purpose - procreation.</p> <p>We've been led to believe that sex should always be fun but.....</p> <p>Painful sex for women is often due to vaginal dryness or even recurrent cystitis and almost certainly will take the pleasure from sex and hence the drive.</p> <p>Agony Aunt, Virginia Ironside noted that 'it can sometimes feel as though someone is rubbing you down on the inside with sandpaper'. For some women, no amount of hormone cream, HRT, Vaseline or fancy lubricants will entirely restore their earlier carefree enjoyment.</p> <p>She also says that: 'Getting lucky' no longer means you've scored with a bloke, it means that you found a car park space at Waitrose.</p> <p>For men, many become increasingly impotent with weaker erections and sometimes it takes longer to ejaculate. However, they may be better, more considerate lovers than their youthful, randy counterparts.</p> <p>No sex doesn't mean we can't be sexy.</p> <p>Perhaps sex just isn't as important as it used to be for some of us.</p> <p>And strangely, in sex surveys men always seem to have more than women. How can that be - unless they're all gay? Men tend to boast about their prowess.</p> <p>This book is written by a husband and wife couple and she takes HRT: 'The New Love and Sex After 60' by Robert N. Butler, M.D., Myrna I. Lewis, Ph.D. Here are some excerpts which show why we are now so confused:</p> <p>'What can we safely say about sexuality in later life? Our views on this topic have not yet caught up with the slowly changing character of aging. Many people-not only the young and middle-aged but older people themselves-are quite uniformly negative about the prospects of continued sexual interest and ability. Many simply assume that the game is over somewhere in late midlife or early later life. They couldn't be more wrong. In spite of the scarcity of nationwide data, we turn to our own clinical and research work and the work of other gerontologists and researchers to demonstrate that relatively healthy older people who</p>
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enjoy sex are capable of experiencing it-often until very late in life. Frequently those who do have sexual problems can be helped..... We have written this book for those older men and women who are presently or potentially interested in sexuality and would like to know more about what is likely to happen to their sexuality over time. We will offer solutions to sexual problems that may occur, and propose ways of countering the negative attitudes that older people may experience-within themselves, from family members, from the medical and psychotherapeutic professions, and from society at large. We especially want older people to know that their concerns and problems are not unique, that they are not alone in their experience, and that many others feel *exactly as they do*. Even those people who have had a lively enthusiasm and capacity for sex all their lives often need information, support, and sometimes various kinds of treatment in order to continue engaging in sexual activity as the years go by. In addition, people for whom sex may not have been especially satisfying in their younger days may find that it is now possible to improve the quality of the experience despite their long-standing difficulties..... Sex and sexuality are pleasurable, rewarding, and fulfilling experiences that can enhance the middle and later years. But they are also-as everyone knows- enormously complex psychologically. Every one of us carries with us throughout our lives a weight of attitudes related to sexuality that have been shaped by our genes, our parents, our families, our teachers, and our society, some of which are positive and some negative, some of which we realize and many of which we are unaware..... As an older man or woman, you may find that love and sex in later life, when they are acknowledged at all, will be patronizingly thought of as "cute" or "sweet," like the puppy love of teenagers; but even more likely, they will be ridiculed, a subject for jokes that have undercurrents of disdain and apprehensiveness at the prospect of growing older. Our language is full of telltale phrases: older men become "dirty old men," "old fools," or "old goats" where sex is involved. Older women are depicted as uniformly sexless or sexually unattractive. Most of this "humour" implies the impotence of older men and the ugliness of older women..... A mythology fed by misinformation surrounds late-life sexuality. The presumption is that sexual desire automatically ebbs with age-that it begins to decline when you are in your forties or even earlier, proceeds relentlessly downward (you are "losing it"), and eventually hits bottom (you are "over the hill") at some time between sixty and sixty-five. Thus an older woman who shows an evident, perhaps even a lusty, interest in sex is often assumed to be suffering from

"emotional" problems; and if she is obviously in her right mind and sexually active, she runs the risk of being called "oversexed" or, more kindly, said to be clinging pathetically to her lost youth.'

"People don't seem prepared for the fact that sex, lust, is not going to last. By the time you get on, the whole nature of sex changes. It's about caring, being responsible for other's happiness" (*Elspet Gray, actress, wife of Lord Brian Rix*)

"The wonderful thing about getting old is that you can forget about sex. (*He doesn't say how old though!*) It's a greatly overrated and over-publicised activity and it only further complicates people's lives". (*Dame Edna Everage/Barry Humphries*)

New Sky TV survey for *The Secret Guide to Women's Health*, 16.3.10 edition will be on the menopause: Presenter, Coleen Nolan says: "The topic of sex, even though often joked about, can throw up some serious issues which can directly affect a woman's health and self confidence. It's one of those subjects that people might not want to admit to their friends or even their GP. The results from this survey have surprised me and I'm pleased that this research, and the new show, will give women a platform to discuss sex in an open environment".  
'New research that we have commissioned has shown that 28% of women aged 35 and over never have sex..... Losing their sex appeal and sex drive still causes concern for many women aged 35 and over.... When quizzed about the menopause, 29% of women who live with their partners, fear losing or have lost their sex appeal more than any other side effects caused by the menopause.

A large American survey in 2000 found that sexual activity among the general populations is far less vigorous than one might imagine. A third of American adults have sex twice a week or more, another third have sex once or several times a month and the final third a few times a year or not at all. (*The Social Organisation of Sexuality: Sexual Practices in the United States*)

A British survey in 1994: Married women aged 45 to 59 had sex twice in the past 4 weeks and men in the same age group had sex 3 times in the last 4 weeks. *Proving that men always boast or that men were having sex with whom? Other men as well?* (*Sexual Behaviour in Britain: The National Survey of Sexual Attitudes and Lifestyles*)

	<p>Older lovers may make up in style what they lack in stamina. A Saga survey of 10,000 over-50's found that 65% were still sexually active and many older men and women reported the strongest orgasms and most meaningful sex of their lives.</p> <p>Sex may become 'the icing on the cake', it's secondary to the quality of the relationship which is based on love, kindness, companionship and shared memories.</p> <p>Range of 'intimate massagers' with very good reviews. <a href="http://www.emotionalbliss.co.uk">http://www.emotionalbliss.co.uk</a>. Also available at some Holland &amp; Barrett stores.</p> <p>Gay, slow sex is best: The best sex going on in Masters and Johnson's sex lab in the 70's was had by the committed gay and lesbian couples, not because they were practicing special secret homosexual sex techniques but because they took their time!</p> <p>On the other hand, 'Lesbian Bed Death' is the term used when the relationship is so stable that desire disappears: 'We're so in tune with each other, so incredibly similar that we could easily drift into being flatmates in our nighties. Often we can't have sex because we're much too busy laughing and talking, which is sweet, but sometimes I think we need more difference between us to push us into having sex. There isn't a man with a thrusting erection demanding it'.</p> <p><i>Homeopathy: Agnus Castus, Conium - &lt; celibacy, widowhood, Fluor Ac – inappropriate increased desire in men - and Moschus in women, Selenium – increased desire but decreased ability/prostate.</i></p> <p>See Male Menopause, see Impotence; see HRT; see Natural Progesterone Cream</p>
<b>Senses: smell, taste</b>	Senses can change with age. We may become more conscious of other people's smells and our sense of taste can change
<b>Shrivelling</b> *	Breasts and vagina
<b>Sjögren's Syndrome</b> ***	<p>Causes dry eyes, dry mouth and aches and pains, usually affecting 50-60 year olds.</p> <p>Some people with Sjögren's Syndrome produce antiphospholipid antibodies and can develop features of</p>

	<p>Hughes Syndrome.</p> <p><i>Nat Mur, Proteus, Sepia</i></p> <p>See Hughes Syndrome</p>
<p><b>Skin</b> *</p>	<p>Liver spots, thread veins, varicosities, thin skin. No elasticity - pull it up and it stays there. Jewellery doesn't look so good on crepey necks and transparent fingers.</p> <p>Oil of Evening Primrose capsules, 1000-2000mg daily, is said to be very good for the skin.</p> <p>Good news: <i>homeopathic haemorrhoid cream</i> is great for thread veins. (N&amp;B)</p> <p><i>Warts and growths: Ant Crud, Ars Alb, Kali Ars, Thuja, Caust, Nit Ac (EB)</i></p>
<p><b>Sleep</b> ***</p>	<p>Too much at the wrong time of day or too little. Afternoon dozing, night-time insomnia or early waking</p> <p><i>Good homeopathic remedies for Sleep Disturbances: Acon, Arg Nit, Ars Alb, Carc, Coffea, Ignatia, Lyc, Nat Mur, Nux Vom, Sulph. Valeriana 30c in evening and repeat at bedtime. (J, HfW)</i></p>
<p><b>Stiffness</b></p>	<p>See Arthritis</p>
<p><b>Staphysagria</b></p>	<p>See Carc</p>
<p><b>Statistics</b></p>	<p><i>Spread around the text in different places</i></p>
<p><b>Staying together</b></p>	<p><u>M81</u>: I had often thought about leaving in the mid life years. My wife tolerated me and everything I did so it made it really hard to go. I couldn't be that cruel. Now we have a deep affection together. <u>M51</u>: That's great. Making bones together.</p>
<p><b>Stress incontinence</b> *</p>	<p>At every cough, sneeze or rapid movement</p> <p>See Kegel exercises; see Leakiness; see TVT</p>

<b>T</b>	
<b>Talking to yourself</b> *	<p>Things like: ‘Where are my glasses? Pity I can’t see well enough to find them. Oh, they’re on my head’.</p> <p>Or ‘Where are my keys, I know I put them in this handbag’.</p> <p>Or scolding someone while hovering.</p> <p>(F51 and M57 both do it - others were surprised.)</p>
<b>Teeth</b> *	<p>‘Long in the tooth’ as gums recede and teeth look longer. Often major dentistry needed: root canals, dentures, crowns, gum disease, replacement of old fillings.</p> <p><i>Homeopathic Fluor Ac 30 weekly – good for decay.</i></p>
<b>Tests</b>	<p>Mammograms and cervical smears can be humiliating.</p> <p>False negatives/false positives.</p> <p>Or</p> <p>‘The nurse wants to see me’ - people are pleased someone is showing an interest in them/their condition.</p>
<p><b>Thyroid/Thyroidinum/Thyroxine</b> ***+ <i>Homeopathic remedies</i></p>	<p>Thyroid problems are common at and after menopause when the endocrine ‘symphony orchestra goes out of tune’.</p> <p>All endocrine gland symptoms can be linked to each other, including adrenal burn-out.</p> <p><u>M57</u>: Tiredness and aggression are linked – feeling put upon.</p> <p><u>M51</u> talking about his partner: It really changes a person –underactive thyroid, on Thyroxine – he has become more aggressive, weight gain, blows his top easily. (Not listed under side effects, but there is restlessness and excitability plus quite a lot of physical symptoms).</p> <p><u>F51</u>: I can feel if my thyroid is low - I massage it. Can feel like cracked glass. Possibly made worse in winter, from lots of computer work or exhaustion.</p>

	<p><u>Thyroid and anaemia</u> Both are low grade unrecognised conditions which can have massive effects on life. People can be very relieved to be clinically diagnosed.</p> <p><i>Thyroidinum, Iodum, Hypothalamus, Sepia</i></p> <p>See Cholesterol</p>
<p><b>Tremors</b> *</p>	<p><i>Homeopathic remedies: Ambr Gris, Gels, Ars Alb, Zinc Met, Ant Tart, Ant Crud, Aur Sulph, Lachesis, Mercury – near specific for Parkinsons disease, Hyos Hydrobrom – Disseminated sclerosis (EB)</i></p>
<p><b>TVT</b></p>	<p>It can stand for either Tension-free Vaginal Tape or Trans-Vaginal Tape. These are identical operations</p> <p>It is performed to treat stress incontinence, a condition where women leak urine from their bladder with certain activities e.g. coughing, sneezing, laughing, lifting, walking or with sport. Stress incontinence happens when the urethra is weak. Such weakness may be caused by damage to the muscles and nerves of the pelvic floor which may be aggravated by the menopause, a chronic cough, heavy lifting and being overweight.</p> <p>From a leaflet by: <a href="http://www.kentgynaecologist.com/tvt.html">http://www.kentgynaecologist.com/tvt.html</a></p> <p><u>F58</u>: ‘I have had it very successfully twice - internal strips by day surgery’.</p>

<p><b>U</b></p>	
<p><b>Urination – frequent/night</b> ***</p>	<p><u>Frequency.</u> Caused by enlarged prostate, diabetes, cystitis, bladder weakness, tumour, hormones or emotions.</p> <p><u>Post menopause</u> especially at night. (It is said that ADH (anti-diuretic hormone) drops off after the menopause so low/no ADH produced. Therefore no point restricting fluids/tea from pm onwards, etc. because it's not caused by fluid intake but irreversible lack of ADH and necessary or get up and pee –even small amounts - anyway). I think it is reversible/part of the hormonal symphony and can be treated with Sepia, etc.</p> <p>This subject attracts a lot of discussion, questions and beliefs. e.g.  ‘Does the Pill affect ADH because young women have water problems?’  ‘There’s a great range in how frequent/how much/which foods or drinks cause frequency.’  ‘The moon affects it – people pass less or more at different moon phases.’</p> <p>Shewees (portable outdoor urination aids), night bottles, bed bottles (like trays) might be useful.  ‘Shewees are also useful for collecting urine samples’.</p> <p><i>Cantharis, Berberis, Equisetum, Digitalis, Sabal Serr, Nux Vom (TS), Sepia, Folliculinum</i></p> <p>See Prostate; see TVT</p>

<b>V</b>	
<b>Vaginal dryness</b> *	<p>Starts during the menopause, part of the natural ageing hormonal process, causes thinning and dryness. In earlier stages may be improved with lubricants (KY Jelly, Aloe Vera, etc.) and remedies: <i>Aconite, Causticum, Ferr Phos, Kreos, Lyc, Nat Mur, Med, Sepia, Tarent Hisp, Thuja.</i> (HfW)</p> <p><a href="http://www.daisynetwork.org.uk/pdfs/Natural_Menopause_Guide.pdf">http://www.daisynetwork.org.uk/pdfs/Natural_Menopause_Guide.pdf</a> A brief but reasonably helpful guide about nutritional support. Pharma Nord's Omega 7 (Sea Buckthorn Oil capsules) helped 47% of users with vaginal dryness.</p> <p>See Aloe Vera, see Sex, see Leucorrhoea, see Menopause</p>
<b>Varicose Veins</b> *	<p>Veins are relaxed, look like twisted snakes, feel bruised and sore, and may ulcerate. 'Embarrassing Bodies' showed new intravenous laser therapy which isn't painful.</p> <p><i>Often treated surgically but homeopathy can help a lot too. Can also help phlebitis (inflammation of the veins) and varicose ulcers.</i></p> <p><i>Locally Hamamelis cream/tincture or in potency, Aconite, Silica, Carb Veg, Fluor Ac., Vipera, Graphites, Ambra Gris, Pulsatilla – especially phlebitis, Calc Fluor.</i> (EB, TS)</p>
<b>Valeriana</b> <i>Homeopathic remedy</i>	<p>A homeopathic and herbal remedy when the body feels itchy and maybe limbs jerk on falling asleep. Unpleasant dreams. (HfW)</p>
<b>Vanity</b>	<p>Less important to post-menopausal women because more at peace with themselves.</p>
<b>Vertigo</b>	<p>See Epley Manoeuvre, see <a href="http://www.diagnose-me.com/cond/C503063.html">http://www.diagnose-me.com/cond/C503063.html</a></p>
<b>Viagra</b>	<p>See Sex. Pfizer have closed their Viagra producing factory in Kent. Jan 2011.</p>
<b>Vision and eyesight</b> *+	<p>With age, eye muscles are less able to exert the pressure needed on the lenses to ensure sharp focus. The lenses also change in consistency and elasticity. They transmit colour less effectively so blues and</p>

blacks become hard to distinguish. The cells of the retina (like all the cells of the central nervous system) become sparser. A 60-year old needs three times the amount of light to read comfortably as a 16-year old. It takes longer to accommodate to either sudden light or sudden darkness so older people can be suddenly dazzled, trip down dark staircases, can't distinguish the kerb from the road and find that dark-clothed people blend into the dusk. (DrS)

Stronger reading light is needed and night driving becomes more difficult - both coping with contrasts and oncoming headlights and with differentiating curb from road. Some people unnecessarily get stronger glasses then have difficulty with them in normal light. (RS)

A perk for life-long short-sighted people: they can only read *without* their glasses. Most people need reading glasses and also extra light to read/see.

Regular eye examinations should be done to check for cataracts, glaucoma, diabetic retinopathy, retinal tears and age-related macular degeneration (AMD) – the wearing out of the retina. Dry AMD accounts for 90% of cases, its progress is slow and treatment is available. Wet AMD affects 10%, treatment is improving for it – fluid escapes from degenerate blood vessels below the retina. (Dr Stuttford)

F54: Cover one eye. Check a straight line somewhere. If there is a kink in it get help quickly as it might be a sign of AMD. ‘

Eat leafy green vegetables 4-7 times a week - good for wet and dry AMD.

Many eye conditions, many remedies:

*Ruta, Ledum, Calc Carb, Nat Mur, Euphrasia, Gels, Thiosinaminum, Hep Sulph, Pyrogen, Naphthalene, Mag Carb, Conium, Nat Sulph, Caust, Sepia, Ars Alb, Bell, Aur Met, Allium C, Puls, Calc Sulph, Kali Bich, Graph, Kali Carb, Xerophyllum, Symphytum, Arnica, Cocc Cact, Nux Vom, Prunus, Mez, Phos.*

*Good OTC (over the counter) preparations for dry eyes: Viscotears, saline solution, homeopathic Nat Mur. (JaS)*

See Glaucoma, see Cataract

<b>W</b>	
<b>Watery eyes</b>	See Drippy noses
<b>Weight gain</b>	<p>As wisdom comes with age and so does weight gain, perhaps we keep our wisdom in our fat?</p> <p><u>M56</u>: Contentment. I make more space to hold more substance. A bit more weight, presence, substance to hold more.</p> <p>‘There’s not enough room for wisdom in our heads so we keep it in our cells. It’s not fat, it’s wisdom!’</p> <p>‘Body brain!’</p> <p>See Cellulite, see Obesity, see HCG</p>

<b>X</b>	
<b>Y</b>	
<b>Z</b>	
<b>Zestra</b>	<p>A massage oil applied like a vaginal lubricant and scientifically proven to enhance sensation.  <i>'For increasing arousal in women seeking to heighten the whole sexual experience or for those wanting to enhance their libido'.</i></p> <p>The Journal of Sexual and Marital Therapy conducted a study which found that 89% of women using Zestra reported increased sexual pleasure, frequency and intensity of orgasm compared to only 15% using a placebo. <i>However</i> very little research has been done with post-menopausal women. It seems the women dropped out of the trial.</p> <p>Ingredients: Borage Seed Oil (Starflower oil), Evening primrose oil, Special Extract of Angelica, Special Extract of Coleus, and the anti-oxidants; ascorbyl palmitate (lipid-soluble Vitamin C) and alpha-tocopherol (Vitamin E), along with natural fragrances.  <i>'It is easily applied to the clitoris, labia &amp; vaginal opening during foreplay. Once applied its bioactive botanical ingredients begin to increase genital sensory nerve conduction velocity as well as genital blood flow'.</i></p> <p>One reviewer said it smelt like old fried bacon grease!</p> <p>See Sex.</p>

**References:** Not everything is referenced. Some of it is common to many sources.

- (J) Jane Hurley
- (BP) Brenda Pretty, pharmacist, homeopath
- (LS) Lele Schirmeister, heilpraktiker
- (KM) Kenneth Metson, mentor/homeopath
- (CW) Chris Wilkinson, homeopath
- (CL) Colette Lyons, Alexander Technique teacher
- (LyH) Dr Lynne Huntley, psychotherapist
- (CG) Cornwall study group (homeopaths)
- (RS) Dr Ruth Sewell, psychotherapist
- (EB) 'Guidelines to the Homeopathic Treatment of Illnesses in the Elderly'  
by Elvia Bury
- (EmB) 'Embarrassing Bodies' Channel 4 programme and website
- (TS) 'Homeopathic Medicine: A Doctor's Guide to Remedies for Common  
Ailments' by Dr Trevor Smith
- (BNF) 'British National Formulary'
- (HfW) 'Homeopathy for Women' by Dr's Barry Rose and Christina  
Scott-Moncrieff
- (EG) Exeter (The Other Side of Fifty' Group
- (CG) Cornwall group
- (SG) Somerset Group
- (N&B) Nuts & Bolts Homeopathy CD compiled by Jane Hurley
- (LK) Leslie Kenton, author of 'Passage to Power'
- (JL) Dr John Lee, author of 'Natural Progesterone'
- (DrS) Dr Stuttaford, writing in The Oldie magazine
- (VI) Virginia Ironside

**Recommended books:**

- 'Passage to Power' by Leslie Kenton
- 'Couples, the Truth' by Kate Figes
- 'The Virginia Monologues' by Virginia Ironside
- 'Natural Progesterone, The Multiple Roles of a Remarkable Hormone' by  
John R Lee MD 1993

Recommended by others but not read by me yet:

- 'Women's Bodies, Women's Wisdom' (Only goes up to menopause). And  
'The Wisdom of Menopause' by Dr Christiane Northrup (American  
gynaecologist)
- 'Where did I leave my glasses' by Martha Weinman Lear
- 'Manhood' and 'Raising Boys' by Steve Biddulph
- 'Green Medicine' by Dr Larry Malerba
- 'Levels of Health' by Dr George Vithoulkas (Good for homeopathy students)