

Amenorrhea

Brown Health Services Patient Education Series

What is Amenorrhea?

Amenorrhea is the absence of menstrual periods. There are 3 categories of menstrual irregularities:

- Individuals who have never had a menstrual period by age sixteen. (Primary amenorrhea)
- Individuals who have not had a period for 2 to 3 months or more. (Secondary amenorrhea)
- Individuals who have irregular periods that may vary from 35 to 90 days. (Oligomenorrhea)

Determining why an individual over 16 years of age has never had a menstrual period is essential for proper treatment. Identifying the reason may involve several blood hormone tests, and possibly referral to an endocrinologist.

Missing periods after regular periods have begun is much more common, especially among young adults. Changes in environment, diet, stress, as well as medical problems can cause variability in menstrual cycles.

Intense exercise, especially activities requiring aerobic exercise or running, can cause you to miss your period.

Reasons to see a medical provider:

- If you menstruate fewer than four times per year or if you miss three consecutive periods
- If you are sexually active and miss a period or have a late period

- If you notice breast/nipple discharge, or if you notice unusual facial hair or other body hair growth.

Why Do Missed Periods Occur?

Some of the factors associated with cessation of periods are:

- stress
- calorie-restricted diet/weight loss
- eating disorders
- strenuous exercise
- hormone imbalance (eg. thyroid or prolactin)
- anatomic problems
- Travel
- Pregnancy
- Hormonal birth control

How is Amenorrhea Treated?

The general approach to treating women with amenorrhea is as follows:

- Ruling out the possibility of pregnancy is a priority.
- A pelvic exam, plus hormone or other tests are often performed.
- A progesterone drug that stimulates a menstrual period may be considered.
- Any underlying causes that are identified are addressed.
- Options are considered for long-term treatment of absent periods, such as taking oral contraceptives or taking periodic courses of a progesterone medication.
- Lifestyle changes to promote nutritional and exercise balance to achieve good bone health and reproductive health.

For most individuals, these steps are usually enough to bring about normal, regular cycles. Sometimes diagnosis requires more sophisticated testing. Additional treatment/referral may be required to achieve normal cycles and, when desired, pregnancy.

Why Treat Amenorrhea?

- Many individuals have some mild irregularity to their menstrual cycles and this may be a long standing pattern for them.
- For other individuals, irregularity may represent a change in their usual menstrual patterns. If your menstrual cycles have become irregular or stopped completely, an estrogen imbalance may occur over time.
- Over a long period of time, too much estrogen can cause overgrowth of the cells in the lining of the uterus (endometrial hyperplasia which can lead to cancer), while too little estrogen causes calcium loss from the bones (leading to osteoporosis).

Important Points to Remember

- Pregnancy **can** occur during long periods of amenorrhea.
- Moderation of diet and exercise as well as stress reduction are important factors in a regular menstrual cycle.
- Keeping a record of your menstrual cycle by marking the first day of your period on the calendar or period tracker app is very helpful for your medical provider.