

Vaginal & Urinary Symptoms in Midlife

UNDERSTANDING GENITOURINARY SYNDROME OF MENOPAUSE (GSM)

Genitourinary Syndrome of Menopause (GSM) is a common condition caused by hormonal changes that affect the vagina, vulva, bladder and urinary system. Symptoms can begin during perimenopause, menopause, breastfeeding, or after some medical treatments such as chemotherapy or anti-estrogen therapies.

WHAT IS GSM?

As estrogen levels decline, the tissues of the vagina and urinary tract become thinner, drier and more sensitive. Changes to vaginal bacteria and pH can also increase the risk of irritation, infections and urinary symptoms.

GSM may affect:

- The vagina
- Vulva
- Bladder
- Urethra
- Pelvic floor tissues

COMMON SYMPTOMS OF GSM

Vaginal Symptoms

- Dryness
- Burning or irritation
- Itching
- Pain with sex
- Recurrent “thrush”

Urinary Symptoms

- Bladder leakage
- Urinary urgency
- Frequent urination
- Recurrent UTIs

Women are around three times more likely to experience UTIs after menopause.



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VAGINAL DRYNESS

What It Can Feel Like

- Dryness or tightness
- Burning or irritation
- Discomfort sitting or exercising
- Pain during intimacy

Helpful Self-Care Strategies

- Avoid scented soaps, wipes and douches
- Wear breathable cotton underwear
- Avoid tight clothing
- Use gentle, pH-balanced vaginal products
- Avoid very hot water

Over-the-Counter Options

- Vaginal moisturisers
- Vaginal lubricants
- Barrier creams for external irritation and protection

Prescription Treatments

- Vaginal estrogen cream
- Vaginal estrogen pessaries/tablets
- Vaginal DHEA pessaries
- Systemic menopausal hormone therapy (MHT)

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BURNING & IRRITATION

Possible Causes

Burning and irritation may be linked to:

- Low estrogen
- Infections
- Irritants or allergies
- Skin conditions such as dermatitis or lichen sclerosis

Practical Tips

- Wash with plain water only
- Avoid bubble baths, chemicals and perfumed products
- Use cool compresses or salt water baths
- Avoid intercourse until symptoms settle

When to Seek Medical Advice

See your doctor if you have:

- Fever
- Odour or unusual discharge
- Persistent symptoms
- Recurrent infections
- Suspected UTI or STI

VAGINAL ITCHING

Common Causes

- Hormonal changes
- Thrush
- Bacterial vaginosis
- Skin conditions
- Irritation from soaps or pads

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Helpful Strategies

- Keep the area cool and dry
- Avoid scratching
- Wear loose cotton underwear
- Use fragrance-free products

Treatment Options

- Antifungal treatments
- Hydrocortisone cream (short-term use only)
- Vaginal moisturisers
- Vaginal estrogen therapy

PAIN WITH SEX (DYSPAREUNIA)

What It May Feel Like

- Burning at the vaginal entrance
- Deep aching pain
- Ongoing soreness after intercourse

Contributing Factors

- Vaginal dryness
- Tissue thinning
- Pelvic floor tension
- Infections
- Hormonal changes

Supportive Treatments

- Longer foreplay
- Generous lubricant use
- Pelvic floor physiotherapy
- Vaginal estrogen or DHEA therapy



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THRUSH

Note: Thrush is highly unlikely in postmenopausal women not on hormonal treatments of some kind.

Signs & Symptoms

- Persistent itching
- White discharge
- Burning with urination or sex
- Symptoms returning despite treatment

Reducing Flare-Ups

- Avoid damp clothing
- Reduce irritants
- Manage blood sugar levels
- Consider probiotic support

When to See Your Doctor

Seek medical review if symptoms:

- Keep returning
- Do not improve with treatment
- Include unusual discharge or pain

BLADDER LEAKAGE

Types of Leakage

- Leaking with coughing or sneezing
- Sudden urgency
- Constant dribbling

Helpful Lifestyle Strategies

- Pelvic floor exercises
- Bladder training
- Reducing bladder irritants like caffeine
- Maintaining bowel regularity

Treatment Options

- Vaginal estrogen
- Pelvic floor physiotherapy
- Medications for overactive bladder
- Pessaries or surgical treatments if needed

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URINARY FREQUENCY & URGENCY

Symptoms May Include

- Frequent urination
- Strong urges to urinate
- Waking multiple times overnight
- Leakage before reaching the toilet

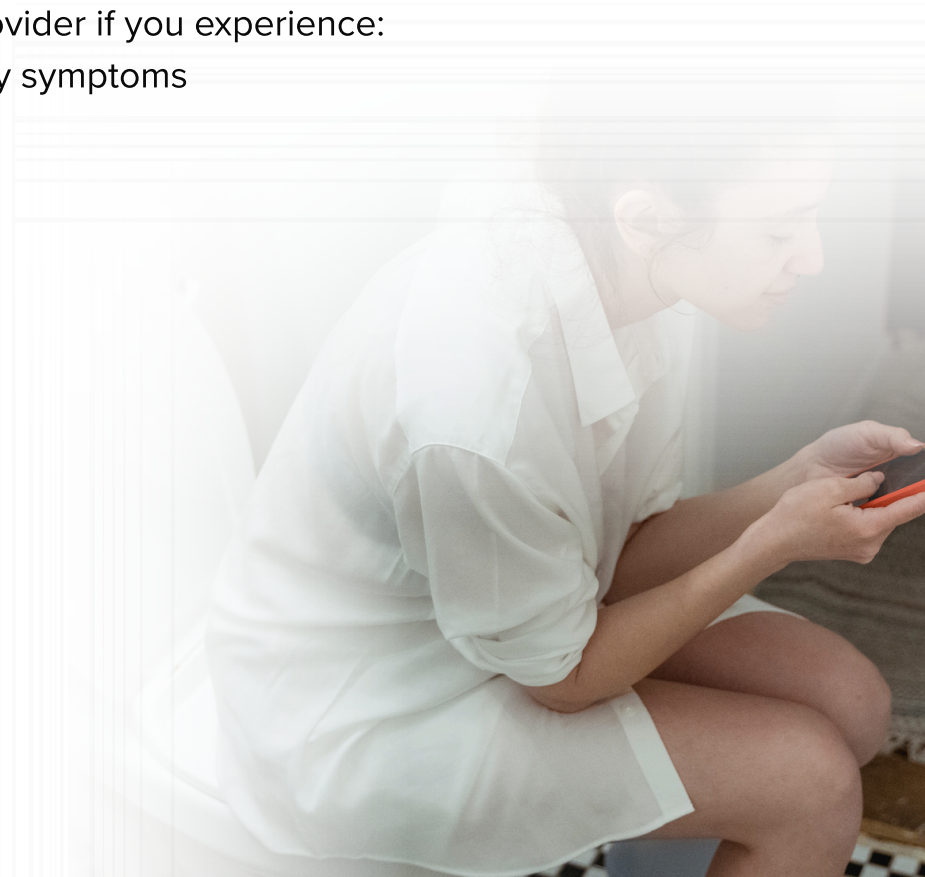
Practical Strategies

- Bladder retraining
- Reduce caffeine and alcohol
- Timed toileting
- Pelvic floor exercises

When Should You Seek Medical Advice?

Speak with your healthcare provider if you experience:

- Persistent vaginal or urinary symptoms
- Recurrent UTIs or thrush
- Bleeding after menopause
- Pelvic pain
- Blood in the urine
- Pain during sex
- Symptoms affecting your quality of life



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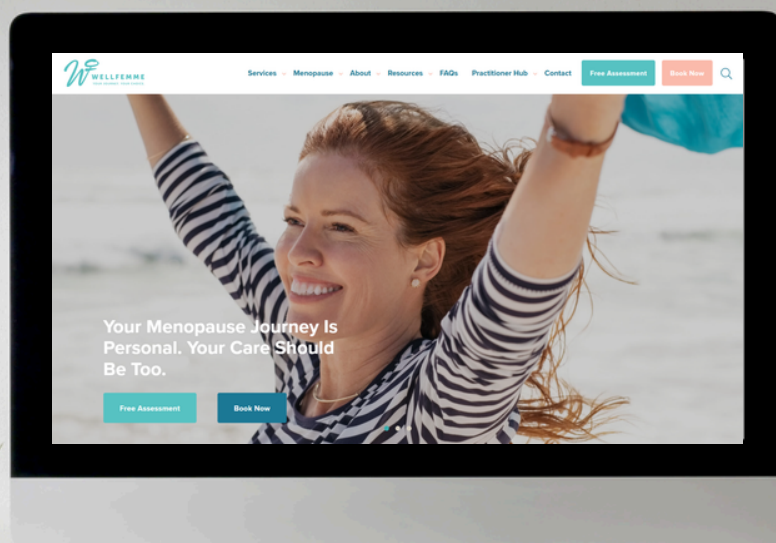
GET EXPERT ADVICE

If you are putting up with dreadful symptoms because you think MHT is unsafe, get evidence-based advice from a doctor who is knowledgeable about menopause treatments.

- **WellFemme:**
 - [Blog posts](#), [webinars](#), [resources](#) and [Telehealth Menopause Consultations](#)
- **Australian Government:** [Information resources](#)
- **Australasian Menopause Society:** [Information Sheets](#)

For more information about how menopause and perimenopause will impact on your health, take [WellFemme's free online Menopausal Health Assessment.](#)

Scan this code to see our range of clinical services and free resources.



REFERENCES: Continence and Health.gov.au