

Autism and Menopause Information Sheet

What Is Menopause?

Menopause is something that happens to women when they get older often between the ages of 45 and 55.

During menopause, hormone production changes which causes the body to stop ovulating (releasing eggs) and periods become less regular and then stops completely.

Menopause has 3 stages:

Stage 1: Perimenopause

- Hormone levels (oestrogen, /progesterone) begin to fluctuate.
- Periods become irregular; symptoms like hot flashes and mood changes may start.
- Can last 2–10 years, usually begins in the 40s.

Stage 2: Menopause

- Officially diagnosed after 12 months without a period.
- Ovaries stop releasing eggs; oestrogen, drops significantly.
- Symptoms may continue or intensify during this time.

Stage 3: Post menopause

- Begins after menopause and continues for life.
- Oestrogen remains low; fertility is no longer possible.
- Some symptoms may ease.

What are the symptoms?

Everyone is different, however common symptoms of menopause may include:

- Hot flushes (sudden feelings of being very hot)
- Mood changes (feeling sad, angry, or tired more easily)
- Memory issues (often described as 'brain fog')
- Trouble sleeping
- Changes in interest in sex





Autistic women and Menopause

Many women report feeling unsupported during this stage of life, with a common expectation that they should simply "put up with it." A lack of clear information about treatment options, combined with experiences of being dismissed by healthcare professionals, often leads women to manage their symptoms alone or worse, to accept distressing symptoms as normal.

Menopause can affect autistic women in unique and sometimes more intense ways compared to neurotypical women. This is due to differences in sensory processing, emotional regulation, communication styles, and how healthcare systems respond to autistic individuals.

Comparing the menopausal experience between autistic and neurotypical women is not about undermining anyone's struggles, it is about recognising different experiences, so that everyone gets the support they need.

Symptoms may differ due to:

Intensified sensory sensitivities

Hot flushes, night sweats, and skin sensitivity may feel overwhelming or even unbearable.

Changes in body temperature, sleep patterns, or textures (like clothing or hygiene products) can trigger meltdowns or shutdowns.

Sensory overload may increase due to hormonal fluctuations.

Emotional regulation difficulties

Emotional shifts may be harder to understand or communicate, especially if the individual has interoception differences (awareness of internal states).

Isolation and Misunderstanding

Many autistic women already feel socially isolated, and menopause can deepen this.

Routine disruption

Menopause can affect sleep, focus, and daily structure.

Medical Dismissal

Although neurotypical women often experience medical dismissal during menopause, autistic women may face this dismissal for different or additional reasons, often linked to their disability.



What can help?

Speak to a professional

Make an appointment to speak to your GP or request to speak to a menopause-informed GP to discuss your symptoms and explore your treatment options.

- HRT (Hormone Replacement Therapy)
- Non-hormonal alternatives
- Mental health support

Keeping a symptom journal can be a helpful way to track patterns over time, which may make it easier for your GP to understand your experience and offer more tailored support.

If your GP is not supportive, ask for referral to a menopause clinic. In Northern Ireland, you can request a referral to a Regional Menopause Clinic especially for:

- Early menopause
- Complex medical conditions
- Poor response to treatment
- Premature ovarian insufficiency



Self-compassion

Menopause often brings changes in body shape and weight, largely due to hormonal shifts. These changes are completely normal. It is important to be compassionate with ourselves during this time and to speak about our bodies with kindness.

If you notice changes in your libido, especially if linked to sensory sensitivities, it can be helpful to have an open and honest conversation with your partner. Sharing how you feel can help them understand your needs, reduce pressure and can increase emotional intimacy.

Physical activity

Engaging in regular physical activity can make a big difference in how you feel during and after menopause. These movements can be gentle, some examples include swimming, yoga or short walks.

Movement helps regulate body temperature, improves sleep, bone health, and can reduce anxiety.



Reasonable adjustments

Employers have a responsibility to consider reasonable adjustments for employees affected by menopause, many like Autism NI will have a Menopause Policy in place. Examples may include:

- Provision of a desk fan
- Consideration of varying start/finish times
- · Additional short breaks for fresh air

Peer support groups

Talking with other women who are going through or have been through similar experiences can be incredibly reassuring. Peer support can happen online or in person, and many helpful groups can be found on platforms like Facebook. Sharing stories, advice, or simply listening can help you feel less alone and more understood.



Further Reading

- https://belfasttrust.hscni.net/service/menopause-service/
- https://www.nidirect.gov.uk/conditions/menopause
- Autistica webpage:
 https://www.autistica.org.uk/what-is-autism/autism-and-menopause
- The British Psychological Society
 https://www.bps.org.uk/research-digest/autistic-people-face-additional-menopause-challenges