

Hot Flashes

Definition

Hot flashes can happen at any time, leaving you sweaty and red-faced. Although other hormonal conditions can cause them, hot flashes are frequently due to menopause. Hot flashes are quite common. As many as 3 out of 4 women experience hot flashes as they go through menopause.

Treatment for hot flashes isn't necessary if you're tolerating them well. If your hot flashes become particularly bothersome, treatment options are available. Finding the best way to control hot flashes can take time. Start by asking yourself how hot flashes are disrupting your daily life. Then, with your doctor's help, consider the benefits and drawbacks of lifestyle changes, prescription medications and other common remedies.

Symptoms

When you're having a hot flash, you may experience:

- A feeling of pressure in your head as the hot flash begins
- A feeling of mild warmth to intense heat spreading through your upper body and face
- A flushed appearance with red, blotchy skin on your face, neck and upper chest
- Rapid heartbeat
- Perspiration, mostly on your upper body
- A chilled feeling as the hot flash subsides

Less common symptoms associated with hot flashes include:

- Weakness
- Fatigue
- Faintness
- Dizziness

Hot flashes vary in frequency — you may have several in one day or just a few each week. You could experience persistent sweating throughout the day and night, or you may just occasionally feel warmer than you used to. Hot flashes can last as long as 30 minutes, but most subside within a couple of minutes. Nighttime hot flashes (night sweats) can wake you from a sound sleep.

When to see a doctor

If hot flashes become particularly bothersome and disrupt your daily routines, consider making an appointment with your doctor to discuss treatment options.

Causes

The exact cause of hot flashes isn't known, but the signs and symptoms point to factors affecting the function of your body's thermostat — the hypothalamus. This area at the base of your brain regulates body temperature and other basic processes. The estrogen reduction you experience during menopause may disrupt hypothalamic function, leading to hot flashes. Low estrogen alone doesn't often seem to induce hot flashes, as children and women with low levels of estrogen due to medical conditions usually don't experience hot flashes. Instead, the withdrawal of estrogen, as happens during menopause, appears to be the trigger.

Risk factors

Not all women who go through menopause experience hot flashes. Although it's not clear why some women get hot flashes and others don't, the following factors increase your risk of hot flashes:

- **Smoking.** Women who smoke are more likely to get hot flashes.
- **Obesity.** A high body mass index (BMI) is associated with a higher frequency of hot flashes.
- **Physical inactivity.** If you don't exercise, you're more likely to have hot flashes during menopause.

Complications

Sleep problems are often a complication of hot flashes. Nighttime hot flashes (night sweats) can wake you from sleep and, over time, may cause chronic insomnia. These sleep disturbances can, in turn, eventually lead to memory problems, anxiety and depression in some women.

Preparing for your appointment

Because appointments can be brief, and because there's often a lot of ground to cover, it's a good idea to be well prepared for your appointment with your doctor.

- **Write down the symptoms you're experiencing**, including any that may seem unrelated to the reason for which you scheduled the appointment.
- **Write down key personal information**, including when you had your last period and any medical concerns you've had related to your reproductive health or to menopause.
- **Make a list of all medications**, as well as any vitamins or supplements, that you're taking.
- **Take a family member or friend along**, if possible. Sometimes it can be difficult to soak up all the information provided to you during an appointment. Someone who accompanies you may remember something that you missed or forgot.
- **Write down questions to ask your doctor.**

Tests and diagnosis

Your doctor can diagnose hot flashes based on a description of the symptoms you're experiencing. To confirm the cause of your hot flashes, your doctor may also ask questions about your medical history and reproductive health, including the date of your last period.

Treatments and drugs

Menopause is a natural transition. If hot flashes don't interfere with your life, you don't need treatment. If it's necessary to ease your symptoms with treatment, periodically re-evaluate your need for continuing that treatment. For most women, hot flashes fade gradually within a few years.

Hormone therapy

For moderate to severe hot flashes, your doctor may recommend hormone therapy. Estrogen therapy is the most effective treatment for hot flashes, but in some instances, doctors might prescribe progesterone therapy instead.

- **Estrogen therapy.** If you've had a hysterectomy, you can take estrogen alone. But if your reproductive organs are still intact, you should take progesterone along with estrogen to protect against cancer of the lining of the uterus (endometrial cancer). With either regimen, current recommendations are to use the lowest effective dose for the shortest amount of time needed to relieve symptoms.

Before starting estrogen therapy for menopause symptoms, review your heart-disease risk factors with your doctor and weigh the benefits of symptom relief against the risk — remote but recognized — of developing heart disease as a result. It's likely that hormone therapy interacts with other factors — timing and length of hormone use, reproductive history and family history, for example — to increase this risk, but there's no way to know what's safest for you individually. Your doctor can help you weigh the pros and cons.

Estrogen therapy is not a good option if you've ever had a blood clot or breast cancer.

- **Progesterone therapy.** As an alternative for women who can't take estrogen, some doctors prescribe progesterone alone to control hot flashes. Two progesterone-like drugs, megestrol acetate and medroxyprogesterone acetate, have been found to provide some relief from hot flashes.

Other prescription medications

If you decide against estrogen or progesterone therapy, your doctor may suggest a nonhormonal medication for reducing hot flashes. These medications aren't approved by the Food and Drug Administration specifically to treat hot flashes, but they are approved for treating other conditions.

- **Antidepressants.** Low doses of certain antidepressants may decrease hot flashes. Antidepressants from classes of medications known as selective serotonin reuptake inhibitors (SSRIs) and serotonin and norepinephrine reuptake inhibitors (SNRIs) — including venlafaxine (Effexor), paroxetine (Paxil), fluoxetine (Prozac), citalopram (Celexa), desvenlafaxine (Pristiq) and others — have been found to relieve hot flashes. However, these medications aren't as effective as hormone therapy for severe hot flashes and may cause unwanted side effects, such as nausea, dizziness, weight gain or sexual dysfunction. Talk with your doctor about whether the benefits outweigh the potential side effects for you.
- **Gabapentin.** Gabapentin (Neurontin) is a medication approved for treating seizures or pain associated with shingles. It's also increasingly used to treat various other types of pain. Gabapentin may be moderately effective in reducing hot flashes, particularly for women who have symptoms at night. Side effects can include drowsiness, dizziness and headaches.
- **Clonidine.** Clonidine, a pill or patch typically used to treat high blood pressure, may provide some relief from hot flashes. Side effects such as dizziness, drowsiness, dry mouth and constipation are common, sometimes limiting the medication's usefulness for treating hot flashes.

Lifestyle and home remedies

If your hot flashes are mild, you may be able to manage them with lifestyle adjustment alone.

- **Keep cool.** Slight increases in your body's core temperature can trigger hot flashes. Dress in layers so that you can remove outer clothing when you feel too warm. Open a window or use a fan or air conditioner to keep air flowing. Lower the room temperature, if you can. If you feel a hot flash coming on, sip a cold drink.
- **Watch what you eat and drink.** Hot and spicy foods, caffeinated beverages and alcohol can trigger hot flashes. Learn to recognize your own triggers and avoid foods or drinks that bring on hot flashes.
- **Relax.** Some women find relief from mild hot flashes through yoga, meditation, relaxation or other stress-reducing techniques. Even if these approaches don't quell your hot flashes, they may provide other benefits, such as easing the sleep disturbances that tend to occur with menopause.
- **Breathe deeply.** Deep, slow abdominal breathing (paced respiration) may decrease hot flashes. It takes some practice to perfect the technique, but paced respiration done for 15 minutes twice daily, or at the beginning of a hot flash, can be helpful.
- **Don't smoke.** Smoking is linked to increased hot flashes. By not smoking, you may reduce hot flashes, as well as your risk of many serious health conditions such as heart disease, stroke and cancer.

Alternative medicine

Some women use dietary supplements to curb hot flashes, including:

- **Black cohosh.** Black cohosh has been used widely in Europe for treating hot flashes and has been popular among women with menopausal symptoms in the United States.
- **Soy and red clover.** Women in Asian countries, where soy is a regular part of the diet, are less likely to report hot flashes and other menopausal symptoms than are women in other parts of the world. One reason might be related to ingestion of isoflavones — estrogen- like compounds in soy, red clover and many other plants. Studies are underway to test out effectiveness of these herbs.

Isoflavones can have weak estrogen-like effects, so there's some concern about cancer risk for women who take them. If you've had breast cancer, talk to your doctor before supplementing your diet with isoflavone pills or red clover.

Take all herbal supplements with caution. Just because manufacturers claim their products are natural doesn't mean they're safe. Even supplements may have potentially harmful side effects, and may interact with medication you're taking for other medical conditions. Always review what you're taking with your doctor.