

ACTIVE LEARNING TEMPLATE: *System Disorder*

STUDENT NAME **Kevin Juarez**

DISORDER/DISEASE PROCESS **Menopause**

Alterations in Health (Diagnosis): Based on the absence of menstruation for 12 consecutive months and symptoms such as hot flashes, night sweats, and vaginal dryness. Lab tests showing elevated follicle-stimulating hormone (FSH) levels and decreased estrogen levels can confirm the dx.

Pathophysiology: occurs as a natural biological process when the ovaries cease to produce sufficient amounts of estrogen and progesterone, leading to the end of ovulation and menstruation.

Health Promotion and Disease Prevention: Engage in regular physical activity, eat a balanced diet, and maintain routine health screenings to prevent complications like osteoporosis or cardiovascular issues.

ASSESSMENT

Risk Factors: Age (45–55 years) family history of early menopause, smoking, autoimmune disorders, chromosomal abnormalities, ovarian surgery, or chemotherapy, thyroid disorders

Expected Findings: Hot flashes and night sweats, vaginal dryness or atrophy, mood swings, irritability, or depression, insomnia or fatigue, irregular menstrual cycles leading to cessation, reduced libido, thinning hair and dry skin

Laboratory Tests: Elevated follicle-stimulating hormone (FSH) levels, decreased estrogen levels, lipid profile changes (↑ HDL, ↓ LDL), altered glucose levels, bone density tests to assess risk of osteoporosis

Diagnostic Procedures: Clinical evaluation of symptoms (hot flashes, vaginal dryness, irregular periods), blood tests to measure hormone levels (elevated FSH, decreased estrogen). Bone density scan (DEXA) to assess risk of osteoporosis. Lipid profile and glucose testing for metabolic changes.

SAFETY

CONSIDERATIONS: Monitor for signs of thromboembolic events, such as swelling, pain, or tenderness in extremities, chest pain, or sudden headaches. Caution against smoking, as it significantly increases cardiovascular risks during estrogen therapy. Educate about the importance of sunscreen to prevent increased pigmentation. Advise on routine follow-ups for early detection of complications, and emphasize reporting any abnormal bleeding, depression, or symptoms of fluid retention promptly.

PATIENT-CENTERED CARE

Nursing Care: Promote hydration and skin care to alleviate dryness and discomfort. Monitor VS and assess for symptoms like hot flashes, night sweats, and mood changes.

Medications: Estrogen therapy, progesterone or progestin therapy, selective serotonin reuptake inhibitors (SSRIs), Gabapentin, Clonidine, Bisphosphonates, Prasterone (Intrarosa)

Client Education: Explain the process of menopause its symptoms, discuss treatment options and their risks, and encourage healthy lifestyle (regular health screenings) Provide resources for managing symptoms and emotional

Therapeutic Procedures: Hormone replacement therapy, vaginal estrogen therapy, non-hormonal medications, bone density management, and lifestyle interventions.

Interprofessional Care: gynecologists, endocrinologists, cardiologists, psychologists, nutritionists, and nurse specialists

Complications: osteoporosis, fractures, cardiovascular disease, urinary incontinence, UTI, vaginal atrophy, weight gain, metabolic syndrome, mood disorders, depression, anxiety, discomfort and pain during sexual intercourse.

