

Nurses for the care of menopausal women

Several abstracts presented at the Annual meeting of the British Menopause Society and published in *Menopause International* discuss the **role of nurses in providing menopausal care**. In one study, the authors discuss the various roles that nurses may provide in menopausal care, ranging from those nurses who may serve as **chaperones** (házánkban háziasszonyok) in exam rooms to the advance **practice nurses** (házánkban a diplomás nővérek, akik minden valószínűség szerint kevesebb jogosítvánnyal bírnak, pl. gyógyszerrendelés) **who may conduct exams and prescribe hormone therapy [1]**. In another abstract, some of these same authors describe a course offered to nurses that included the physiology and psychology of menopause, menopause symptomatology, long-term postmenopausal biological effects, hormone replacement therapy and other therapies, evaluation and assessment of the menopause, multidisciplinary practice and sociocultural aspects of menopause care [2]. The nurses who completed the above-mentioned course completed an evaluation that showed that a number of the nurses described their knowledge as moving from 'poor' prior to the course to 'excellent' following the course.

Comment

The role of nurses in providing menopausal care is probably under-utilized in many parts of the world. Many nurses may describe their knowledge about menopause as poor, like the nurses prior to the menopause course, although one might also find that physicians not specializing in menopause might also describe their knowledge of menopause as 'poor'. Nevertheless, the utilization of nurses in the care of the menopausal patient could improve the standard of care if these nurses are provided with an adequate knowledge base about the menopause.

Menopause is not a disease. Menopausal care requires an assessment of a woman's needs and provision of the means to manage symptoms and maintain or improve her health after the menopausal transition. Most often, this type of care is focused on counseling and education – skills in which nurses excel and for which nurses generally have more time than their physician colleagues. Counseling and education must be based on accurate knowledge about menopause.

In the United States, nurse practitioners have been providing primary care, including diagnosis and treatment, since the mid-1960s. Today, there are over 140,000 nurse practitioners in the US. In the US, nurse practitioners diagnose, treat, prescribe, and counsel in a wide number of areas. Many are involved in the provision of menopausal care; most work within physician practices or clinic settings, and a much smaller number have their own practices. Alexander found that many women actually preferred nurse practitioner care over physician care due to the focus of nurse practitioners on education and counseling, and the greater amount of time that nurse practitioners were able to spend in appointments with patients [3].

Nurse practitioners have also begun to practice in other parts of the world, primarily in English-speaking countries. Christensen and colleagues describe nurse practitioners as a disruptive innovation [4]. They describe 'disruptive innovations' as both less expensive and less complex than the status quo, yet able to provide consumers with what they need. (Think personal computer versus main-frame computers as another example of a disruptive innovation.) Indeed, in menopausal care, cost savings are as much about providing the kind of care that is needed – health counseling and education which are historically the purview of nurses – and leaving more complex care, such as surgical care or treatment of complex illnesses, to physicians.

Both nurse practitioners as well as other nurses specifically educated in menopausal care can be of great benefit in providing care and counseling to menopausal women. Nurses can spend more time and practice in the nursing philosophy that employs a holistic model of care, focusing on wellness and quality-of-life issues. It is a perfect fit for providing care to women during the menopausal transition.

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