



Transcript

RhondaNP

The Menopause Guide Podcast with RhondaNP Episode #005

Show notes at <https://www.rhondanp.com/005>

Announcer: Welcome to Rhonda NP's Menopause Guide Podcast with Rhonda Jolliffe, Nurse Practitioner, Hormone Expert, and Menopause Mentor. Balance your menopause experience with natural solutions and regain control to live the life you love. Let's get started.

Chris Dockter: Well, hi there. This is Chris Docter, and I am your co-host for the Menopause Guide Podcast with Rhonda NP. I'll be joined in just a minute by my partner, Rhonda Jolliffe. Hey, if this is your first time joining us, thanks for being here. We produce this podcast weekly and you will be able to find any resources we mention, as well as our show notes, at our website rhondanp.com. Today's episode is number 005, and we are calling it "Why am I Such a Bitch? Mood Swings Explained".

A real quick overview, preview of this podcast. We're going to be covering a lot of things. First thing is looking at the mood swing itself. You know, mood swings really cover the gamut of emotions from irritability to anger to tears, so Rhonda's going to help us understand our complex neurotransmitters and how they regulate our moods, and what's really going on during this time.

We're going to look at mood swings in this time versus in PMS, and really how they're different. We will explore when mood swings get a little bit more serious and what would be the signs of true anxiety or depression. Also in this episode we are going to share two great stress management tips. The first one is Rhonda walks us through a deep breathing exercise, really step by step. It's pretty good, so you can play along as you're listening. We also talk about the benefits of a good nap and some research that has been done. We'll look at our circadian rhythm, cortisol, and melatonin. Don't you just love naps? I love them. They are just the best. There's just a lot of fantastic information in this episode, so let's get moving. Okay. Hello, hello. I'm going to love this podcast. You know why?

Rhonda Jolliffe: Why?

Chris: Because I get to say bitch. Anyway, the title of this podcast is "Why am I Such a Bitch? Mood Swings Explained". Let's talk about one of the symptoms of perimenopause and menopause, the mood swing.

Rhonda: Yes.

Chris: Let's go into that. What's going on with these mood swings?



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- Chris: Okay, so maybe a little bit more on that.
- Rhonda: Okay. If you have changes in your hormones, you can have actually depletions in neurotransmitters. Let's just say like, serotonin. Serotonin is a neurotransmitter that needs hormones, and it needs a lot of other things to really stay in balance in your body. When you don't have that you can suffer from symptoms of anxiety and depression, because those are really related in the serotonin uptake in our body. That's a neurotransmitter that's affected by our hormones.
- Chris: Okay. I think many women, as they kind of head into perimenopause, are noticing that they are irritable, much more irritable. Maybe these mood swings just come out of nowhere. I mean, there's a lot of funny, not so funny comics out there about perimenopause and menopause, where it's like, "Next mood swing five minutes." You change so often. Can you talk a little bit about that and why this is happening?
- Rhonda: Yeah. That is that especially in perimenopause there's that surge of estrogen. When you have a really big surge of estrogen and you don't have progesterone, that irritability just comes out. Estrogen is more of the stimulating hormone. Progesterone is the calming hormone. You're losing your progesterone gradually over time and you're having these surges of estrogen. You have like, no progesterone there and you have these surges of estrogen which can really cause anger, irritability. These are common symptoms, very common symptoms.
- Chris: How is this different than every day PMS, or why is this manifesting in a different way?
- Rhonda: Well again, it all has to do with the whole hormonal changing. It really does. It's your hormones just causing havoc in your body, and that is real. That is real. There's a chemistry to it. If your husband's really getting irritated with you because of your irritability, he needs to understand that the chemistry is really a real deal at this time in your life. Same with ... You know, I always talk about menopause as being puberty two, puberty number two. Think about, those of you that raised daughters, if you can have your husband relate it to that, "Remember when our daughter was fourteen and this is how she acted? My hormones are going through that big change just like hers did back then." If you have a husband that helped you raise your daughters, which I don't, we had sons. I have all testosterone in my house, but if you have that you can help your husband relate to that.
- Chris: How are these mood swings different from a time perspective in PMS versus perimenopause?
- Rhonda: Right. The PMS actually ... You could have PMS as a very young, shortly after your menstrual cycle starts, all through your 20s and 30s. That usually is in the luteal phase, two weeks prior to your cycle. It's usually the worst right around your cycle. In perimenopause or even menopause it kind of stretches out throughout the whole month. That's a complaint I hear of patients. They'll say,



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"Well, I'm like PMS all the time." I'm like, "Yeah. That is the change. That is part of the deal."

Chris: Okay, so there is mood swings, and we know that. Can you talk really briefly about the difference between a mood swing and really anxiety and depression?

Rhonda: Yeah. Mood swings are fluctuations. I always call mood swings ... There are fluctuations day to day. They can be fluctuations week to week. Like, one week is going to be worse than the other. A lot of that has to do with how much stress that you're under. You can keep those under control just by managing your stress. Those are mood swings, but anxiety/depression, I ask, "Have you had these symptoms sustained for longer than two weeks?" Then we're getting into true anxiety, true depression. Both of them you're going to have mood swings where you're going to have that depressed mode or that anxious time, but it's not every day, and it's not severe. When you get into long enough that it continues and it's a day to day basis and it's every day, all day, longer than two weeks, then you really need to look at this is an anxiety disorder. You might have some mild, moderate depression.

Chris: Okay, okay. I'm kind of understanding all of the differences here with mood swings and PMS, what can we do to make this better?

Rhonda: You know, again I hate always blaming our coming back to stress, but it really is the big deal. If you heard my podcast on cortisol, it really has to do with your body is under a lot of stress physically because of the hormonal changes. You haven't changed your outlying stressors. You have to really manage your stress. Most people, and it was interesting ... I was at a conference one time, it was a acupuncture conference as I was sitting next to a psychiatrist. He said to me, he said, "I really don't prescribe antidepressants. I prescribe anti-stress pills. Most people have anxiety and depression because their stress is not being under control or managed." If we can manage our stress, you will be amazed how much you will control your anxiety and depression.

Chris: Let's talk a little bit about ... In your practice, I would assume that you don't prescribe antidepressants very often. Do you?

Rhonda: Well, I don't.

Chris: Can you talk about why?

Rhonda: I have a lot of better things that are working. I have lifestyle changes. When I really ... When somebody really wants to lead a life where they don't want to rely on medications, I can help them do that. They have to be committed. It's not my deal. I can only tell them, "Here's what you need to do." The people that do it and are committed to it, they don't need antidepressants. There's always that outlier of time when maybe they need a little antidepressant to get them through. Certainly if there's moderate to severe or severe depression you might



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want to consider that. I always look at it as a temporary deal if I ever do prescribe it, which I prescribe very little because of the things I've been doing over the past 10 years. I rarely prescribe them because people get better.

Chris: Right. Let's talk about one of the natural solutions that I think works well and I've learned from you. It's really about some of these breathing exercises. You know what? It'd be kind of fun if you could walk us through one, like a real breathing exercise.

Rhonda: Yeah.

Chris: Would you be up for that?

Rhonda: I'd love it.

Chris: Okay, cool.

Rhonda: I would love it because here's the deal on deep breathing. Everybody has heard probably about deep breathing as helping your stress response, but here's what happens, the chemistry of the deep breath. Most of us breathe really shallow, and most of us are under stress. You're under stress and you breathe shallow.

Chris: Or hold your breath like I do sometimes.

Rhonda: Or hold your breath because you're trying to bite your lip.

Chris: Yeah, exactly.

Rhonda: Most of us, that's our day to day thing. If you're breathing shallow and you're under stress, you're actually in your sympathetic nervous system. It has to do with our whole neural pathways in our sympathetic nervous system. You're managing your life in your sympathetic nervous system. That's the Excitve System. We want to put ourselves in the parasympathetic nervous system, which is our calming system. I always joke about it. I'm like, "Okay, girls. Let's get into our parasympathetic here." That is really well done very quickly with deep breathing.

Chris: Okay.

Rhonda: If you do deep breathing, and I usually recommend at least once an hour three breaths. Once an hour it takes a minute. Take a minute out of the hour to do this and it will make a huge difference on how you manage your whole day. I like what's called the 7/7/7 method. That is seven breaths in, hold for seven, and then exhale for seven. Not only do we breathe really shallow, we exhale really shallow too. When you're breathing in you can breathe in ... Everyone goes, "Do I do it through my nose? Do I do it through my mouth?" It doesn't really matter. Just get the air in. Some people are like, "Well, my nose is always



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stuffed up. I can't deep breathe." Yes, you can. Breathe through your mouth. Eventually actually, you'll probably help the whole nose breathing thing.

Chris: Okay, so if you guys ... If you're listening now and you're in your car or you're walking your dog, or you're at work and you're kind of listening to this, sneaking it in, let's actually go through an exercise.

Rhonda: Okay. You can do it with your eyes closed or your eyes open. If you're driving or doing something out there, please keep your eyes open. You can do it with your eyes open. If you really want to get into more of a meditative state with it, then close your eyes and sit calmly. Obviously this is something you can do with your eyes open, and nobody even needs to know you're doing it. I actually do it when I'm in with patients, and they don't even know it. I'm just listening to them. Let's start out. Just kind of get in a comfortable seated position.

Seating is a little bit better, but if you are standing, that's okay too. A seated position, you want to really sit up with your chest out opening up your lungs when we're doing this. You sit in a nice, upright position. Let's just start by taking a nice, big, deep breath in. I'm going to count for you, so we're going to count to seven. It's in, two, three, four, five, six, seven. Then we're going to hold, six, five, four, three, two, one, and exhale, seven, six, five, four, three, two, one. It's seven in, hold for seven, and exhale for seven.

Chris: Excellent.

Rhonda: Yeah.

Chris: Excellent. Well, you know what? For this podcast we'll create a download on this too, so you can have that if you can't remember it. It's not that hard to remember, but sometimes in menopause I can't remember anything.

Rhonda: It's like, "What was that? Seven, six, three in, four out?"

Chris: One of the other really good strategies is napping. When I was doing some research for this podcast I actually found some research from the Harvard Medical School about the benefits of a good nap. Can you talk a little bit about napping and what that does for us?

Rhonda: You know, napping, there's been actually quite a few studies over the years, that people that nap live longer. I've always been really jealous of my husband because he goes home from work at noon. He works from eight to twelve. He goes home, has his lunch, and then he naps for 20 minutes, 15 to 20. I don't know how he does it because he just closes his eyes, falls asleep, and wakes up. I keep thinking I wouldn't wake up for two hours. I've never been able to nap because of my schedule, but it is really something that I think we should all consider taking in. Even talking to your workplace and having a quiet room. Actually, my husband, they have a quiet room at their work site. They have a



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recliner in there and you can go in and take your break and take your nap. It's really a great thing to do.

One of the things about when we get that afternoon lull ... You know, we all kind of get that, if it's from two to four o'clock. Usually it's two to four o'clock and that has to do with our circadian rhythm. When we're under stress, you really get it because your cortisol levels are off. Cortisol actually manages our circadian rhythm. Cortisol and melatonin have to do with our circadian rhythm. What's happening when your cortisol levels are off, from two to four in the afternoon and from two to four in the morning the cortisol is shifting. If it's shifting in the opposite direction of where it should be, you're either waking up from two to four in the morning, or you're falling asleep two to four in the afternoon.

For those of you that are going, "Oh my gosh. Yeah, I wake up at the same time. It's 3:10 every morning, and I'm wide awake." That's your circadian rhythm that is off. To get that back into place you can do a lot of things, but napping in the afternoon is one of them. It will reset your cortisol. Napping from two to four in the afternoon and just a simple 20 minute nap is enough. 15 to 20 minutes is enough. There's many studies out there for years that you will live longer, so that's kind of awesome.

Chris: That is really interesting. I know that's been a problem for me is that waking up at 3:33 or whatever. It's just amazing. I mean, our bodies are so amazing. This episode really has been focused ... We started off talking about why we were such bitches, but now really, thank you for going through that breathing exercise as well as the napping. We'll have some downloads for you on this episode and we'll put them in the show notes and you can find that at our website, rhondanp.com. Any final thoughts on mood swings?

Rhonda: No. Just try and manage them, I guess. Have your husband help you if you're married.

Chris: Yeah. I think that's a really good point. I think it's almost like when you're pregnant. It's not only you that's pregnant. You have to kind of bring your husband through that as well. I mean, I really feel like in menopause I've gone through a pretty big education with my husband who full disclosure, is Rhonda's brother. I don't think we've talked about that yet, but we're sisters-in-law. It's amazing what they don't know, and I think it's just a little education about what you're going through, and a little sympathy, and really at the core of it mutual respect. There's some things that are being taken away from us during menopause, but we believe more things are being given to us. We're going to talk about that at length in podcasts in the future. Thank you for joining us. We really appreciate that you listened.

Rhonda: Thanks for tuning in.



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- Chris: Hey. We appreciate you. We hope you come back often and feel free to add the Menopause Guide Podcast to your favorite RSS feed or subscribe directly on iTunes. You can follow us on Facebook and you can share and like our information with your girlfriends, too. You can also follow Rhonda on Twitter @RhondaJolliffe. Jolliffe is spelled J-O-L-L-I-F-F-E. If you like what you hear, jump on over to iTunes and give us a quick review, so other women can find these resources when they really need them. Leaving a review is really easy. Just navigate to the top of our podcast page, and you'll see Ratings and Reviews. Click on Write a Review. It takes about 30 seconds, and please just share your thoughts with us. We really appreciate it. In the same place, you can also subscribe to the podcast or share on social media. Until next time ...
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