

Managing menstruation

People with intellectual disability should be involved in all decisions about their health and wellbeing.

Some people can make decisions alone and some people will need support. It is critical that supporters know the person's will and preferences to make sure the right support is provided and the right decision is made.

Periods are a normal part of being a woman. Women with intellectual disability have the same choices as other women. Managing periods is not a problem for most women with intellectual disability. But for some, it can be complicated.

Women with intellectual disability often need clear information and support to make choices about their periods.

Assisting women to manage their periods

All women should be given the opportunity to manage their own periods. They might need:

- Teaching - Women should be taught to manage their periods as independently as possible. Some women learn quickly. Some need formal teaching programs and regular refreshers of their knowledge.
- Support - Some women need someone to change their pads and underwear. Some need reminders to change pads or someone in the background prompting them through the process.

If you are helping a woman with her periods, you should be respectful of her dignity and privacy. Let the

women choose who supports her with this personal task. Many women would be uncomfortable being supported by a man. Also, people's religious and cultural beliefs can affect how they manage their periods.

When supporting any person with personal care, remember the basics of good hygiene.

Problems with periods

Families and support workers should watch out for:

- Painful periods - ordinary pain relief medication may help.
- Heavy periods need close monitoring. It may be a woman's normal period but new heavy bleeding may need further review and she should see a doctor.
- Some women do not have regular periods. Keep notes of the dates and changed amounts to help the doctor.
- Pre-menstrual syndrome (PMS) - can include tender breasts, headaches, mood swings and crying. PMS occurs before a period starts.
- Sometimes, epilepsy can be harder to control around the time of a woman's period.

If any of these problems is having an impact on a woman's life, a visit to the doctor is necessary.

Also, a woman should see a doctor if her periods stop. This could mean pregnancy, menopause or other conditions. Sometimes, a woman may not even start to have periods. Ask the doctor to investigate why this is so.

Role of the general practitioner

A GP may do some tests to understand what is happening. These might include a physical examination, a blood test, an ultrasound or the Cervical Screening Test. This can be frightening and the woman may need lots of support from someone she trusts. Sometimes, the GP will refer on to a specialist women's doctor - a gynaecologist.

Treatments for problem periods

If a woman is having major problems with her periods, the doctor might suggest a treatment to control or even stop the periods. These include the contraceptive pill, or implanted devices- like 'Implanon' (put in the upper arm for two years) or 'Mirena' (put in the uterus for five years).

All medications can have side effects. Ask the doctor what to watch out for. It may take time to find the treatment that best suits the woman.

The woman may need support to understand and decide about these treatments. If she understands it is her choice and decision. If she does not understand, NSW law says that the doctor needs consent from a "person responsible" (usually a guardian or close family member) or the Guardianship Division of the NSW Civil and Administrative Tribunal.

Decisions about treatment for problem periods must be based on what is best for the woman. Periods should not be stopped just to make life easier for carers.

Operations to stop periods

Occasionally, major health problems lead a woman to consider an operation which will stop her periods permanently. This could be a hysterectomy or an endometrial ablation. This is the same for women with or without a disability. Special legal rules apply to these operations since they result in sterilisation of the woman so that she can never have children. See the **Contraception** fact sheet for information about the legal consent required for these operations.

For more information

See the places to get information and advice at the end of the **Sexuality** fact sheet.

There are resources on managing menstruation on the following websites

Centre for Developmental Disability Health (Victoria)

www.cddh.monash.org

Queensland Centre for Intellectual and Developmental Disability

www.qcidd.centre.uq.edu.au

Family Planning NSW

www.fpnsw.org.au

You might be interested in these fact sheets

- **Consent to medical treatment**
- **Contraception**
- **Sexuality**

This fact sheet was updated in **2018**.

The fact sheet contains general information only and does not take into account individual circumstances. It should not be relied on for medical advice. We encourage you to look at the information in this fact sheet carefully with your health professional to decide whether the information is right for you.