

The Medical Scenario

To illustrate the "medicalization" of menopause, here is a sequence of medical events which can overtake a woman in midlife. This scenario describes extreme medical intervention, but variations of this scenario are unfortunately all too common. At the beginning of menopause, the midlife woman may have irregular or heavy bleeding which she reports to her doctor. The doctor does a D and C for diagnostic purposes, which may also reduce the bleeding temporarily. She is relieved to find out that her uterus is healthy. However, as the year passes, she may have more irregular or heavy bleeding. Her doctor advises another D and C; she follows his advice. Again, she finds nothing untoward, and there may be temporary relief.

More time elapses. Heavy or irregular bleeding returns and the woman may become anemic. The doctor now recommends hysterectomy. At this point, the woman is frightened by her symptoms, confused about the exact state of her uterus and in all likelihood intimidated by what she feels is the doctor's superior knowledge of her body. So she has the hysterectomy, convinced by the physician to have her ovaries out, too, "in case" of future cancer. Since hormone levels commonly fluctuate after the operation, she may become depressed. For this, too, the doctor offers medical remedies: tranquilizers and estrogen, which can be "safely" administered since there is no longer a risk of uterine cancer. She may be referred to a psychiatrist. If the woman is anxious about the risk of breast cancer, either because she already is in a high-risk group or because she is taking estrogen, she may easily succumb to the suggestion of a "prophylactic" mastectomy. And here this scenario ends: little more can be done to this unfortunate woman's body, gynecologically speaking. Paradoxically, she may feel grateful, not realizing that she has had dangerous and unnecessary medical "care."

Dr. Robert A. Wilson, author of *Feminine Forever*, is the worst offender, for he builds fear while he writes. His chapter 5 is titled "Menopause—the Loss of Womanhood and the Loss of Good Health." Here are some quotations from his chapter:

. . . the ovaries shrivel up and die as a result of menopause.

. . . the woman becomes the equivalent of a eunuch.

I have known cases where the resulting physical and mental anguish was so unbearable that the patient committed suicide.

. . . no woman can be sure of escaping the horror of this living decay. Every woman faces the threat of extreme suffering and incapacity.

. . . most women are well aware of the extent to which menopause cripples them.

I have seen untreated women who had shriveled into caricatures of their former selves.

Though the physical suffering from menopausal effects can be truly dreadful, what impressed me most tragically is the destruction of personality.

Outright murder may be a relatively rare consequence of menopause—though not as rare as most of us might suppose.

. . . this common aberration.

To be suddenly desexed is to her a staggering catastrophe. . . .

. . . she is incapable of rationally perceiving her own situation.

The transformation, within a few years, of a formerly pleasant, energetic woman into a dull-minded but sharp-tongued caricature of her former self is one of the saddest of human spectacles.

In a maze of longing and delusion they sometimes lose touch with reality, and thus a menopausal neurosis develops.

Enlightened physicians who see menopause for what it is—a preventable and curable deficiency disease—are still in the minority. [Thank the Goddess!]

Dr. Robert A. Wilson, author of *Feminine Forever*, is the worst offender, for he builds fear while he writes. His chapter 5 is titled "Menopause—the Loss of Womanhood and the Loss of Good Health." Here are some quotations from his chapter:

. . . the ovaries shrivel up and die as a result of menopause.

. . . the woman becomes the equivalent of a eunuch.

I have known cases where the resulting physical and mental anguish was so unbearable that the patient committed suicide.

. . . no woman can be sure of escaping the horror of this living decay. Every woman faces the threat of extreme suffering and incapacity.

. . . most women are well aware of the extent to which menopause cripples them.

I have seen untreated women who had shriveled into caricatures of their former selves.

Though the physical suffering from menopausal effects can be truly dreadful, what impressed me most tragically is the destruction of personality.

Outright murder may be a relatively rare consequence of menopause—though not as rare as most of us might suppose.

. . . this common aberration.

To be suddenly desexed is to her a staggering catastrophe. . . .

. . . she is incapable of rationally perceiving her own situation.

The transformation, within a few years, of a formerly pleasant, energetic woman into a dull-minded but sharp-tongued caricature of her former self is one of the saddest of human spectacles.

In a maze of longing and delusion they sometimes lose touch with reality, and thus a menopausal neurosis develops.

Enlightened physicians who see menopause for what it is—a preventable and curable deficiency disease—are still in the minority. [Thank the Goddess!]