



DISCUSSION

Are Monthly Menstrual Periods Optional?: A European Perspective

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Abstract: *Throughout human history, women have experienced menstruation, whether as a positive or a negative experience. The timing of periods was impossible to predict or to change. For the first time in human history, hormonal contraception has changed women's options, and the use of oestrogen-progestogen contraception can control whether and when a woman has a period. This article argues, on the basis of recent studies in the Netherlands, Germany, France and Italy, that a growing number of Western European women want no periods or would like to have a longer interval between periods. And why not!* ©2007 Reproductive Health Matters. All rights reserved.

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Hormonal contraception: controlling menstrual periods

For many years, oral contraceptives allowed for monthly bleeding because this was perceived as more natural and therefore more easily acceptable. Currently, two options for controlling whether and when a woman has a period with combined oestrogen-progestogen contraception are possible. The first is to take more or fewer pills than those provided in the monthly pill package. The second is to space the interval between periods to every three months (with the pill brand Seasonale®) or every year (with the pill brand Anya®).

Many clinical trials have been carried out with the aim of modifying the rhythm of menstruation. These include:

- a pill with a dosage of 20 µg ethinyl estradiol/150 mg levonorgestrel taken non-stop for 84 days (3 months);¹
- a pill with a dosage of 20 µg ethinyl estradiol/100 mg levonorgestrel taken non-stop for 168 days (6 months);²
- a patch with a dosage of 20 µg ethinyl estradiol/150 mg norelgestromine worn non-stop for 84 days (3 months);³ and

- a ring with a dosage of 15 µg ethinyl estradiol/120 mg etonorgestrel used for 46 days (1.5 months).⁴

The results of these clinical trials show a diminution in the frequency of pre-menstrual symptoms and a decrease in the amount of blood lost during periods when women stop taking the contraceptive pill. There were no additional harmful effects on health or on the endometrium. Bleeding between periods can occur, however, though the frequency decreases the longer the contraceptive is used. Hence, it is not currently possible to promise complete amenorrhoea, and women must be warned about this.

Progestogen-only contraception has also changed women's options. It allows them to have periods every three to five years though often with unpredictable blood loss in the intervals.

The trend in Europe: less or no menstruation?

In future, it seems reasonable to think that hormonal contraception will allow women to control the intervals between their periods, even to stop having menstruation without any bleeding

at all. The question is, what are women's attitudes towards this new possibility?

In 1981, a study by the World Health Organization (WHO) found that women throughout the world preferred to have monthly periods and did not want to use a contraceptive method that changed their menstruation.⁵

However, more recent studies in Western European countries show that there has been a change of attitude in women aged 15-49 towards their menstruation, with no significant differences between age groups. The following are some of the data from the studies in the Netherlands, Germany, France and Italy.

In the Netherlands in 1999, only around 30% of the 974 women surveyed wanted to have periods every month. About 25% did not want to have periods any more. The rest wanted to modify the frequency of their period to 3, 6 or 12 months.⁶

In Germany in 2004, again about 30% of the 1,195 women surveyed wanted to have periods every month and about 41% did not want to have periods any more. The number of women aged 15-34 years who wanted no periods at all was greater in the same age group than in the 1999 Dutch survey.⁷ The rest wanted to modify the frequency of their period to 3, 6 or 12 months. In France, in a large survey in 2005 of 1,513 women aged 16-49 years, only 11% liked to have their periods every month, while 75% considered menstruation to be a constraint and 57% said they would take a pill that stops periods.⁸

And in Italy, among 270 women without menstruation-related symptoms, more than 50% would like to change the rhythm of their periods, 28% would like a longer interval between periods and 29% would prefer not to have their periods at all any more.⁹

In sum, a majority of women wished to modify the rhythm of their menstruation and around 30% would even like not to have periods at all.

The young German women's motivations (ages 15-19) for spacing menstruation in-

cluded the wish to decrease the discomfort brought about by menstruation (71%), better hygiene (67%), a better quality of life (50%) and less loss of blood. The Italian survey provides further details of women's motivations for spacing their periods: an improvement in their sexual life (76%), fewer problems at work (29%) and fewer problems in playing a sport (49%).

However, a strong minority of the young German women still preferred to have their periods. Their motivation included fear of being pregnant without knowing it (72%), fear of becoming infertile later (34%) and the side effects of the hormones (51%). Their motivations also included the fact that menstruation is a natural phenomenon to be respected (47%), and that menstruation permits the elimination of "bad blood". In France, it is also considered a sign of femininity.

Conclusion

Current medical knowledge allows women to space the intervals between their periods and almost to eliminate menstruation though there does remain the possibility of some light bleeding. Women are currently divided on this subject. However, compared to 1980, an increasing majority of women wish to regulate the frequency of their periods. An important minority of women, while admitting that menstruation is a burden, do not wish to modify their natural cycle. In future, I believe medical techniques for spacing and even eliminating menstruation will improve. More and more women will become aware of the advantages brought to them by these techniques, and I believe that when prescribing oral contraceptive pills, doctors should inform women of the possibility of reducing the number of menstrual cycles per year. It is even possible to expect that in 10 or 20 years, menstruation will be totally optional... and, why not, completely obsolete!

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Résumé

De tout temps, les femmes ont connu la menstruation, comme expérience positive ou négative. La date des règles était impossible à prévoir ou à modifier. Pour la première fois dans l'histoire de l'humanité, la contraception hormonale a changé la donne et une femme peut déterminer si elle aura ses règles et à quel moment, grâce à la contraception à oestrogènes et progestatifs. Se fondant sur de récentes études en Allemagne, en France, en Italie et aux Pays-Bas, cet article avance qu'un nombre croissant d'Européennes ne veulent plus de règles ou aimeraient un intervalle plus long entre deux cycles.

Resumen

A lo largo de la historia de la humanidad, las mujeres han vivido con la menstruación, ya sea ésta una experiencia positiva o negativa. El momento en que llegaba la regla era imposible de prever o cambiar. Por primera vez en la historia, la anticoncepción hormonal ha cambiado las opciones de las mujeres, y el uso de anticoncepción con estrógeno-progestágeno puede controlar si la mujer menstrúa y cuándo. A raíz de estudios recientes realizados en los Países Bajos, Alemania, Francia e Italia, en este artículo se sostiene que un creciente número de mujeres de Europa Occidental no desean tener el período menstrual o les gustaría alargar el intervalo entre períodos.