Women’s health depends on a lifetime of answers—one test at a time.

Women and Puberty and the Menstrual Cycle

www.siemens.com/women-and-puberty

As an integrated healthcare company, our comprehensive solutions follow the complete continuum of reproductive care. In addition, our solutions in healthcare IT support the exchange of data for making informed decisions.

- A higher gain in body mass index (BMI) during childhood is related to an earlier onset of puberty.¹
- Women with a history of infertility and pelvic tenderness are more than three times as likely to report having heavy or prolonged bleeding compared to women without these conditions.²
- Among women of reproductive age, the prevalence of amenorrhea ranged from approximately 5 to 13%.²
- 5–20% of women report severe dysmenorrhea, or pain, that prevents them from participating in their usual activities.²
- Von Willebrand disease is the most common medical disorder associated with menorrhagia at menarche.¹
- The prevalence of oligomenorrhea, or cycles longer than 35 days, ranged from 8 to 22%.²
- 9–14% of reproductive-aged women have blood loss that exceeds 80 mL.²
- Prolonged and excessive bleeding may provoke or exacerbate anemia and, in a certain percentage of cases, may eventually be life threatening if left untreated.²
- Traditional cultures of silence often surround menstruation and may inhibit women from obtaining information about menstruation or from seeking care for menstrual morbidities.²

Answers for life.
Causes of Menstrual Irregularity

• Pregnancy
• Endocrine causes
  – Poorly controlled diabetes mellitus
  – Polycystic ovary syndrome
  – Cushing’s disease
  – Thyroid dysfunction
  – Premature ovarian failure
  – Late-onset congenital adrenal hyperplasia
• Acquired conditions
  – Stress-related hypothalamic dysfunction
  – Medications
  – Exercise-induced amenorrhea
  – Eating disorders (both anorexia and bulimia)
• Tumors
  – Ovarian tumors
  – Adrenal tumors
  – Prolactinomas

Menstrual Conditions That May Require Evaluation

Menstrual periods that:

• Have not started within 3 years of thelarche
• Have not started by 13 years of age with no sign of pubertal development
• Have not started by 14 years of age with signs of hirsutism
• Have not started by 14 years of age with a history or examination suggestive of excessive exercise or eating disorder
• Have not started by 14 years of age with concerns about genital outflow tract obstruction or anomaly
• Have not started by 15 years of age
• Are regular, occurring monthly, and then become markedly irregular

• Occur more frequently than every 21 days or less frequently than every 45 days
• Occur 90 days apart even for one cycle
• Last more than 7 days
• Require frequent pad or tampon changes (soaking more than one every 1–2 hours)

A longstanding market leader in the area of reproductive endocrinology, Siemens Healthcare Diagnostics offers a broad range of systems and assays to address the various clinical needs in reproductive health—throughout life.

References

For more information log onto www.siemens.com/women-and-puberty

Empowering you to advance the health and vitality of women throughout the continuum of life. Your results. Her lifetime.