

The Role of Lifestyle Medicine in Menopausal Health

Factsheet 4: Avoidance of Risky Substances and Menopause

These factsheets are based on the IMS White Paper *The Role of Lifestyle Medicine in Menopausal Health: A Review of Non-Pharmacologic Interventions (2025)*. They share clear, practical information on six key areas of lifestyle medicine; healthy eating, physical activity, mental wellbeing, avoidance of risky substances, restorative sleep and healthy relationships, to support health and wellbeing during and after menopause.



World Menopause Day is held every year on 18 October.

Founded by the International Menopause Society (IMS) in 2009, it is a global awareness day that shines a spotlight on the challenges facing women during the menopause transition and highlights advances in research, education, and resources.

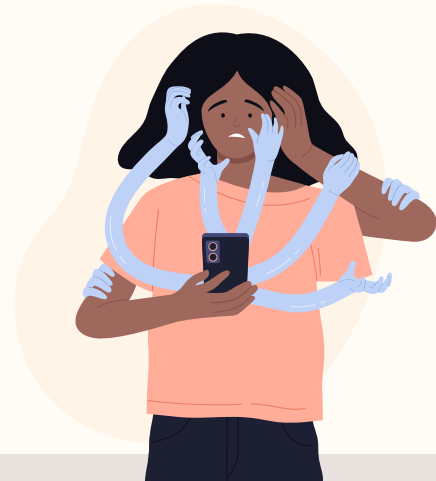
As the founder of World Menopause Day, IMS sets the annual theme, commissions and publishes the White Paper, and creates resources to support women, healthcare professionals, and communities worldwide.

Avoidance of Risky Substances and Menopause

Why it matters

Substance use has often been studied through a male lens, but women's bodies respond differently. Ovarian hormones affect how substances like alcohol, nicotine, and drugs are processed, and women are often more vulnerable to their harmful effects.

During perimenopause and menopause, substance use is rising among women. This can worsen menopausal symptoms, including hot flashes, fatigue, sleep problems, and changes in mood or libido, and increase the risk of chronic health problems.



Substance use and menopause



Women tend to develop alcohol-related diseases earlier than men, even at lower levels of intake.



Risks linked to substance use include HIV/AIDS, hepatitis, psychological distress, and relapse.



Withdrawal symptoms (for example from opioids) can overlap with menopause symptoms, making them harder to manage.

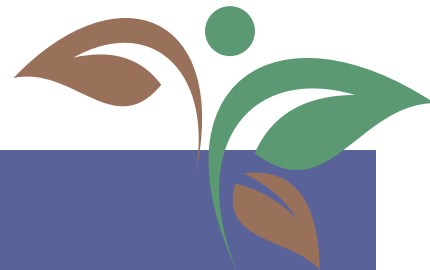


Mood changes in menopause may also contribute to alcohol misuse or risk-taking behaviours.



Hormone fluctuations across the menstrual cycle can change how stimulants (like cocaine or amphetamines) act in the body, though effects on other substances (e.g. nicotine, marijuana, caffeine) are less clear.

Smoking and menopause



Smoking accelerates the onset of menopause and worsens vasomotor symptoms (VMS).

The length of time a woman smokes has more impact on health than the number of cigarettes smoked per day.

Women who do not smoke tend to report fewer menopausal symptoms and better quality of life.

Stopping smoking reduces cardiovascular risks during menopause. While quitting may cause some weight gain, this is not linked to worse cholesterol levels and it also lowers blood pressure and improves overall health.

Alcohol and menopause



Alcohol disrupts hormonal balance and may increase estrogen levels, influencing reproductive health and breast cancer risk.



The link between alcohol and menopause onset is mixed:

- Light-to-moderate drinking (1-3 drinks per week) may slightly delay menopause, but evidence is weak.
- Heavy drinking is linked to earlier menopause, bone loss, and higher fracture risk.



Some studies suggest that moderate alcohol (e.g. wine, up to 30 g/day) may protect against cardiovascular disease and type 2 diabetes. However, the risks, particularly breast cancer, generally outweigh any potential benefits.



National guidelines recommend no more than 10–20 g of alcohol per day, with alcohol-free days each week.



Alcohol use disorder (AUD)



AUD causes around 85,000 deaths each year and is rising among women.



It is associated with liver disease, reproductive dysfunction, loss of bone density, and increased fracture risk.



Menopause-related stress and depression may trigger or worsen alcohol misuse.

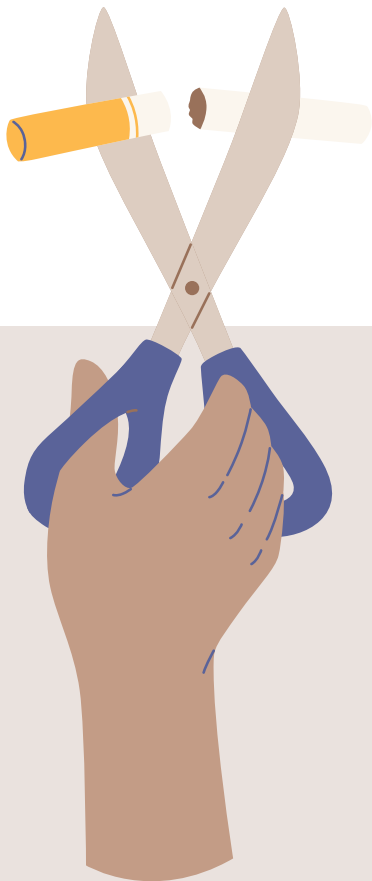


Moderate alcohol may lower markers of bone turnover, but definitions of “moderate” intake vary widely across studies.

Key takeaway

Avoiding or reducing risky substances like nicotine, alcohol, and illicit drugs is especially important during menopause. These substances can worsen symptoms, accelerate health risks, and reduce quality of life.

Quitting smoking, limiting alcohol, and seeking support for substance misuse are powerful steps women can take to protect their health, strengthen bones and heart, and improve wellbeing during and after menopause.



What you can do: lifestyle strategies that work

- ☐ Quit smoking if you can and get support to help you succeed, stopping at midlife improves symptoms, strengthens bones, and lowers your risk of heart disease.
- ☐ Limit alcohol to no more than 1–2 small drinks on drinking days and include alcohol-free days.
- ☐ Avoid recreational drugs, which can worsen menopause symptoms and increase health risks.
- ☐ Notice how alcohol affects you, cutting back can improve your sleep, mood, and energy.
- ☐ Remind yourself that quitting smoking brings benefits even if you gain a little weight.

Additional Resources

Stress management and good sleep habits can make it easier to cut down or quit.

See the Mental Wellbeing & Stress and Restorative Sleep factsheets for support.





The International Menopause Society hopes these factsheets will provide useful, trustworthy guidance to support conversations with healthcare professionals, families, and communities.

Together, we can continue to improve understanding of menopause and ensure women worldwide have access to the care and support they deserve.

Access all World Menopause Day factsheets on Lifestyle Medicine in Menopausal Health online at worldmenopauseday.com

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