

Menopause Diary

Use your menopause diary to keep track of any symptoms you experience.

Make a note of the relevant symptom's number on the corresponding day.

This will become a useful document for discussing your symptoms with your physician.

Symptoms:

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|---------------------------------------|------------------------------------|--------------------------------------|
| 1. Heart beating quickly or strongly | 8. Loss of interest in most things | 15. Headaches |
| 2. Feeling tense or nervous | 9. Feeling unhappy or depressed | 16. Muscle and joint pains |
| 3. Difficulty in sleeping | 10. Crying spells | 17. Loss of feeling in hands or feet |
| 4. Excitable | 11. Irritability | 18. Breathing difficulties |
| 5. Attacks of anxiety, panic | 12. Feeling dizzy or faint | 19. Hot flashes |
| 6. Difficulty in concentrating | 13. Pressure or tightness in head | 20. Sweating at night |
| 7. Feeling tired or lacking in energy | 14. Parts of body feel numb | 21. Loss of interest in sex |

Month:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday