

**Female & Male Menopause:** The gains women had made in the paid labor market because of World War I began slipping away immediately after the Depression. It was at that time in 1931 that a gynecologist named Robert T. Frank first published an article in *The Archives of Neurology and Psychiatry* in which he created the term premenstrual tension. Women, he wrote, complained of “a feeling of indescribable tension...unrest, irritability, ‘like jumping out of their skin’ and a desire to find relief by foolish and ill considered actions.” The problem that has no name about which Betty Friedan wrote in *The Feminine Mystic*, of “the vague emptiness and desolation that plagued many women in the postwar era” was during the time after World War II when the “Rosie the Riveters” in the work force had been displaced as Johnny came marching home and back into the business world where women had had gained autonomy.

The fact that these feelings in women which Frank chronicled were followed by menstruation made it easy, if not logical, to connect the two and identify hormonal fluctuations as female. British physician Katharina Dalton and her colleague Dr. Raymond Greene coined the term premenstrual syndrome in a number of articles published in the 1950s. Dalton titled her 1964 book, *The Premenstrual Syndrome*. PMS, hormones, and hormonal imbalance became synonymous with women and a vast amount of research studies concerned with female hormones followed.

Once constructed as a female menopausal phenomenon, it seemed no evidence existed at that time to suggest research of hormonal imbalance in mid-life men irrespective that men have hormones and hormonal changes also. In the 1990’s hormonal studies on men were receiving attention.

Psychologist Carole Tavris wrote that premenstrual emotional and behavioral symptoms (PMS) “may not have much to do with menstruation and in any case, are not limited to women.” Tavris reports that the “evidence of weekday mood cycles in both sexes suggest that treating emotional fluctuations as unhealthy symptoms, and assuming that only women usually manifest them, is misleading...Men report having as many ‘premenstrual symptoms’ as women do -- when the symptoms aren’t called PMS.”

Skeptical at first regarding the concept of male menopause, Jed Diamond, author of *Male Menopause* writes: “After four years of research, I concluded that midlife men have significant hormonal and physiological changes and that ‘male menopause’ was the proper name to describe what all men experience as they move from the first half of life to the second.” Diamond defines it as follows: “Male menopause begins with hormonal, physiological, and chemical changes that occur in all men generally between the ages of forty and fifty-five...or as late as sixty-five. These changes affect all aspects of a man’s life. Male menopause is, thus, a physical condition with psychological, interpersonal, social, and spiritual dimensions.”

These midlife changes in men occur as their gender-constructed role as provider becomes reconstructed due to emerging new issues such as downsizing, career change, or retirement. Similarly, the hormonal changes of women in menopause occur as their gender-constructed role as mother becomes reconstructed. Women’s increased presence in the work force, forces men accustomed to the power and male privilege afforded them by their occupations, to redefine themselves in more humane roles surrounding home and family. Simultaneously, traditional marriage gender role-constructs document women’s

greatest gains on their marital investments occur after about thirty years of marriage. Diamond quotes, “Barbara, a fifty-two-year-old mother of three...‘I can finally begin to think about myself and what I want to do with the rest of my life. For the first time ever, I feel free.’” Willard Gaylin, M.D. writes “the real answer lies not in role reversal but in the gradual mitigation of the sharp distinctions between the two sexes.” Nonetheless, in reality it is often difficult to recognize and accept revisions in rigid gender-role constructs.

Diamond writes that there are “similarities in hormonal, physiological, and chemical changes that both men and women experience during this midlife transition.” His studies found, and he concluded, that between male and female midlife changes, not only are there similarities, “there are more similarities than differences.”

Sources: *Male Menopause*, Jed Diamond; *The Mismeasure of Woman*, Carol Tavris;  
[www.tidesoflife.com](http://www.tidesoflife.com) / [www.menalive.com](http://www.menalive.com)