

# Integrative Practices in Menopause: Evidence on Relief of Climacteric Symptoms and Quality of Life

Práticas Integrativas na Menopausa: Evidências no Alívio dos Sintomas Climatéricos e na Qualidade de Vida

Prácticas Integrativas en la Menopausia: Evidencias en el Alivio de los Síntomas Climatéricos y en la Calidad de Vida

## RESUMO

**Introdução:** A menopausa é caracterizada por intensas modificações fisiológicas, hormonais, físicas e emocionais, que impactam negativamente na qualidade de vida. Diante desse cenário, as práticas integrativas e complementares (PICs - yoga, mindfulness, meditação, acupuntura, musicoterapia, aromaterapia e fitoterapia, entre outras) é uma alternativa viável e de baixo risco, que oferece uma abordagem holística que pode aliviar os sintomas e promover o equilíbrio entre corpo e mente. Sendo assim, uso das PICs, tem importante indicação em mulheres que buscam alternativas aos tratamentos farmacológicos ou tem contraindicação ao uso reposição hormonal. **Objetivo:** Realizar uma revisão da literatura sobre o uso de PICs por mulheres na menopausa, os principais benefícios e possíveis efeitos colaterais. **Metodologia:** Foi realizado uma revisão da literatura, no período de fevereiro a junho de 2025. **Resultado:** A prática PICs, mostrou resultados satisfatórios na redução de ondas calor, melhora da ansiedade, melhora qualidade do sono, diminuição do estresse e sintomas depressivos e com poucos efeitos colaterais. **Conclusão:** A prática de PICs na menopausa, tem resultado favorável na melhora da qualidade de vida e redução de sintomas climatéricos.

**DESCRITORES:** Menopausa, medicina integrativa, qualidade de vida, tratamento.

## ABSTRACT

**Introduction:** Menopause is characterized by intense physiological, hormonal, physical, and emotional changes that negatively impact quality of life. In this context, integrative and complementary practices (ICPs—yoga, mindfulness, meditation, acupuncture, music therapy, aromatherapy, and herbal medicine, among others) are a viable, low-risk alternative that offers a holistic approach that can alleviate symptoms and promote balance between body and mind. Therefore, ICPs are highly recommended for women seeking alternatives to pharmacological treatments or who have contraindications to hormone replacement therapy. **Objective:** To review the literature on the use of ICPs by menopausal women, including their main benefits and possible side effects.

**Methodology:** A literature review was conducted from February to June 2025. Results: ICPs showed satisfactory results in reducing hot flashes, improving anxiety, improving sleep quality, and decreasing stress and depressive symptoms, with few side effects. **Conclusion:** The practice of PICs during menopause has a favorable result in improving quality of life and reducing climacteric symptoms.

**KEYWORDS:** Menopause, integrative medicine, quality of life, treatment.

## RESUMEN

**Introducción:** La menopausia se caracteriza por intensas modificaciones fisiológicas, hormonales, físicas y emocionales, que impactan negativamente la calidad de vida. Ante este escenario, las prácticas integrativas y complementarias (PICs: yoga, mindfulness, meditación, acupuntura, musicoterapia, aromaterapia y fitoterapia, entre otras) representan una alternativa viable y de bajo riesgo, que ofrece un enfoque holístico capaz de aliviar los síntomas y promover el equilibrio entre cuerpo y mente. Así, el uso de las PICs tiene una importante indicación para mujeres que buscan alternativas a los tratamientos farmacológicos o que presentan contraindicación para la terapia de reemplazo hormonal. **Objetivo:** Realizar una revisión de la literatura sobre el uso de PICs por mujeres en la menopausia, sus principales beneficios y posibles efectos secundarios. **Metodología:** Se realizó una revisión de la literatura en el período de febrero a junio de 2025. **Resultados:** La práctica de PICs mostró re-

# Integrative Review

Rego AD, Farias LS, Rego GF, Rego LFF

Integrative Practices in Menopause: Evidence on Relief of Climacteric Symptoms and Quality of Life


sultados satisfactorios en la reducción de los sofocos, mejora de la ansiedad, mejor calidad del sueño, disminución del estrés y síntomas depresivos, además de presentar pocos efectos secundarios. **Conclusión:** La práctica de PICs en la menopausia muestra resultados favorables en la mejora de la calidad de vida y en la reducción de los síntomas climatéricos.


**DESCRIPTORES:** Menopausia; medicina integrativa; calidad de vida; tratamiento.


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 **Aljerry Dias do Rego**  
Professor of Medicine at UNIFAP

 **Giovanna Farias do Rego**  
Medical students at Cesupa – Pará

 **Leda do Socorro Farias**  
Breast specialist at Alberto Lima Hospital – Macapá

 **Luiz Fernando Farias Rego**  
Medical students at Cesupa – Pará

## INTRODUCTION

Menopause is a unique and transformative period in women's lives, marked by intense hormonal, physical, emotional, and social changes. It is defined as the absence of menstruation for a minimum period of 12 months, resulting from ovarian failure. The climacteric, in turn, refers to the transition period between the reproductive and non-reproductive phases. Although natural and universal, this phase is often surrounded by fears and uncertainties, often aggravated by negative reports from family and friends, misinformation shared on social media, and the lack of adequate guidance from health professionals<sup>1</sup>. These circumstances lead many women to associate menopause with negative aspects, such as premature aging, chronic health problems, loss of sexuality, and impacts on marital relationships. This perception can create psychological and emotional barriers that exacerbate the challenges already inherent in this moment<sup>2</sup>

Although some women go through

this phase smoothly, with mild symptoms or even no symptoms at all, others face severe manifestations that include intense hot flashes, persistent insomnia, anxiety, depression, changes in body weight, decreased libido, and urogenital symptoms, such as vaginal dryness. These changes can significantly affect quality of life, reinforcing the need for a careful, multidisciplinary, and specialized approach, providing comprehensive care and psychological support to patients<sup>2,3</sup>.

Given the diversity of symptoms and their implications, it is essential to assess the quality of life of menopausal women using standardized instruments. Specific questionnaires can be used to investigate the impact of vasomotor symptoms, mood swings, sleep disorders, somatic and cognitive manifestations, as well as the level of anxiety and general well-being.<sup>1,3,4</sup>

One of the main challenges in managing menopause is choosing the most appropriate treatment. Hormone replacement therapy (HRT), widely recognized as one of the most effective approaches to relieving climacteric symptoms, nevertheless

faces resistance from many women. This reluctance is often fueled by distorted or alarmist information, often disseminated by non-specialized sources, which generates fear and mistrust.<sup>5</sup> However, HRT can be safely prescribed after a thorough medical evaluation that takes into account symptoms, preexisting conditions, and complementary tests. In addition, in cases where HRT is contraindicated, alternatives such as tibolone, bi-identical hormones, and herbal remedies have been shown to be effective in managing symptoms<sup>4,6</sup>. However, pharmacological treatments alone often fail to address the multifaceted complexity of menopause, requiring a more comprehensive approach.

With the growing appreciation of an integrative view of women's health, it is becoming clear that care during menopause must transcend conventional treatments. The integrative approach emphasizes the need to view women holistically, including their biopsychosocial and spiritual aspects. In this context, integrative and complementary practices (ICPs) have gained prominence as additional

care strategies. Interventions such as yoga, mindfulness, acupuncture, aromatherapy, and music therapy, when combined with lifestyle changes, regular physical activity, and a balanced diet, can not only alleviate climacteric symptoms but also promote a state of general well-being. These practices help prepare women for the challenges of menopause by strengthening their physical and emotional resilience<sup>7</sup>.

In Brazil, PICs gained recognition with the implementation of the National Policy on Integrative and Complementary Practices (PNPIC), formalized in 2006 by Ordinance No. 971. Initially composed of five therapies, this policy has expanded to include 29 interventions in the Unified Health System (SUS), covering approaches such as yoga, aromatherapy, acupuncture, music therapy, meditation, and herbal medicine<sup>8</sup>.

Therefore, given this complexity, the objective of this article is to review the indications and results of different PICs in the management of climacteric symptoms that usually accompany menopause, evaluating their effects, benefits, and impact on patients' quality of life.

## METHOD

The search and selection of clinically relevant scientific evidence was carried out using the *OpenEvidence* database (<https://www.open-evidence.com/>), an advanced health information platform powered by artificial intelligence (AI), on the Google Scholar, Bireme, and Lilacs platforms.

The searches were conducted using structured questions covering the specific 'problem/population', 'intervention', 'comparison', and 'outcome' (PICO questions: *Population/problem; Intervention; Comparison; Outcome*) related to the theme of this monograph to refine the results ob-

tained in terms of search sensitivity and specificity. The research questions formulated included, separately, the following integrative practices: 1) herbal medicine, 2) music therapy, 3) *mindfulness*, 4) acupuncture, and 5) other more common integrative practices.

The search period on the platforms described above was from February to June 2025. Medical literature search engines were used: Google Scholar, Library, PubMed, SciELO, BIREME, Cochrane Library, and Up to Date. After analyzing and reading articles and abstracts, the team made a careful selection and read the selected articles in full.

### Inclusion criteria:

Scientific articles correlating climacteric/menopause and the use of PICs.

Articles in Portuguese, English, and Spanish.

### Exclusion criteria:

Articles published more than 20 years ago

Article abstracts

Clinical case reports

## RESULTS/DISCUSSION

Studies indicate that the adoption of integrative practices can contribute significantly to improving quality of life, helping to manage systemic and local symptoms, as well as providing benefits to mental health and emotional well-being<sup>8,9</sup>. Therefore, PICs are broad in nature, allowing for a more comprehensive approach to the challenges faced by menopausal women, who often seek alternatives to hormone replacement therapy with a low risk of side effects, and requires an understanding of individual needs and a broader perspective that enables the choice of interventions that are most appropriate for each case, respecting the uniqueness of each woman and providing truly personalized care.

A 2017 meta-analysis involving 4,165 women compared the effectiveness of 12 classes of treatment for hot flashes, including HRT, antidepressants, acupuncture, and herbal remedies. The results indicated that isoflavones and *Cimicifuga racemosa* (black cohosh) were superior to placebo, although less effective than HRT<sup>10</sup>, while St. John's wort, *Ginkgo biloba*, Peruvian maca, vitamin E, omega-3, and ginseng did not show proven efficacy against vasomotor symptoms. In addition, there is no established safety for the consumption of soy and isoflavones by women with a history of breast cancer<sup>10</sup>.

A literature review analyzing 13 articles concluded that the use of the following herbal remedies: *Foeniculum vulgare* (fennel), *Crocus sativus* (saffron), red ginseng, *Pueraria mirifica*, *Morus nigra*, soy isoflavones, *Tribulus terrestris*, and *Glycine max*, demonstrated positive effects in controlling menopausal symptoms and benefits in preventing cardiovascular disease<sup>7,8,11</sup>. A double-blind randomized clinical trial compared the use of *Melissa officinalis* with citalopram 30 mg/day and placebo for eight weeks, concluding that the herbal medicine was significantly effective in improving insomnia<sup>9</sup>.

A comprehensive review of national and international studies highlighted the herbal medicine (*Foeniculum vulgare* (fennel), *Crocus sativus* (saffron), red ginseng, *Pueraria mirifica*, *Morus nigra*, soy isoflavones, and *Glycine max*) as the most widely used PIC among menopausal women, followed by yoga, acupuncture, aromatherapy, and music therapy<sup>8</sup>.

The practice of yoga, aromatherapy, and music therapy promotes improved mental and emotional health, reduces anxiety and depression, improves mood, and promotes sleep quality<sup>9,11,12</sup>. Table 1 summarizes the main conclusions of the studies cited above.

# Integrative Review

Rego AD, Farias LS, Rego GF, Rego LFF

Integrative Practices in Menopause: Evidence on Relief of Climacteric Symptoms and Quality of Life

**Table 1 - Summaries of seven articles used in the literature review with results of CPLs in women with climacteric symptoms.**

Author	Result
SARRI, G. et al, 2017.	Study involving 4,165 women - Superiority of isoflavone and black cohosh over placebo
SILVA, M et al, 2024.	Literature review - <i>Foeniculum vulgare</i> (fennel), <i>Crocus sativus</i> (saffron), red ginseng, <i>Pueraria mirifica</i> , <i>Morus nigra</i> , soy isoflavones, and <i>Glycine max</i> - effect + menopause symptoms
Sobral, B et al, 2024.	Femal extract, red ginseng - improves hot flashes
Santos K, et al, 2022.	Use of <i>Melissa officinalis</i> improves insomnia X citalopram X placebo
Nascimento AC, 2021.	Yoga - reduces hot flashes, improves mood and sleep
Pilar T et al, 2020.	Reduction of anxiety and improvement of sleep - Use of yoga, aromatherapy, music therapy

Source - bibliographic references used in the preparation of the article

Among aromatherapy-based interventions, a study conducted by Darsareh et al. demonstrated that massage with essential oils of lavender, rose geranium, rose, and rosemary, almond oil, and evening primrose oil resulted in a significant reduction in menopausal symptoms, with a positive impact on anxiety, insomnia, and mood<sup>8</sup>. This same study also evaluated the combination of olfactory aromatherapy with breathing exercises based on yoga therapy and the use of herbal medicine, such as *Ginkgo biloba*, suggesting a positive synergy in

promoting the health and well-being of menopausal women:

A 2020 study showed that acupuncture had a positive effect on reducing anxiety, while practices such as flower therapy, auriculotherapy, and therapeutic touch showed favorable results in controlling climacteric symptoms: A study analyzing 93 women in the acupuncture group showed a success rate of 96.8% compared to 73.3% in the control group<sup>13</sup>. In Brazil, a study of women between 40 and 60 years of age who underwent acupuncture sessions recorded significant reductions in anxiety, depression, muscle pain, and insomnia<sup>8</sup>. The AIM study

demonstrated a significant reduction in vasomotor symptoms and improvements in quality of life measures with acupuncture compared to a control group on a waiting list, with benefits persisting for at least six months after treatment<sup>14,15</sup>. On the other hand, another study found no significant differences between Chinese acupuncture and noninvasive sham acupuncture for menopausal hot flashes, indicating that acupuncture was not superior to sham treatment in this context<sup>16</sup>. The main results discussed are presented in Table 2.

**Table 2 - Abstracts of three articles used in the literature review with results of the application of PICs in women with climacteric symptoms.**

Author	Result
Silva et al., 2024.	Use of essential oil massage - reduction of climacteric symptoms and improvement of anxiety and insomnia
Pilar et al., 2020.	Positive effect on anxiety reduction with acupuncture. Use of floral therapies and auriculotherapy to improve climacteric symptoms
Costa A, 2021.	Improvement in symptoms 96.8% acupuncture vs. 73.3% placebo

Source - bibliographic references used in the preparation of the article

A 2021 article concluded that the combination of herbal medicine, dietary supplementation, religiosity, and mind-body practices has a positive impact on climacteric symptoms, notably reducing hot flashes and improving sleep and hot flashes<sup>17</sup>.

Hypnosis emerges as a promising alternative for improving sleep quality and reducing hot flashes, with effects similar to those of venlafaxine,

but without the side effects associated with the medication<sup>11</sup>.

The practice of mindfulness meditation has been shown to have a positive impact on reducing menopausal symptoms, helping to control anxiety, depression, and hormonal fluctuations. In one specific study, women who practiced meditation for 35 minutes daily for eight weeks reported improved sleep quality and reduced hot flashes<sup>18, 19,20,21</sup>. However, other authors found no significant effects of

mindfulness on vasomotor symptoms or quality of life in their review<sup>22</sup>.

Music therapy has also been identified as an effective therapeutic resource, benefiting mental health by promoting relaxation and reducing bodily tension. This technique promotes a shift in attentional focus, helping to reduce negative thoughts, improve sleep quality, and relieve climacteric symptoms<sup>23,24,25</sup>. The intervention consisted of listening to music for 30 minutes before bedtime for

four weeks.

A Chinese study explored the combination of Chinese Five Elements Music Therapy with auricular patch therapy in the treatment of insomnia and anxiety in perimenopause. This combination proved to be more effective than alprazolam in improving sleep quality and reducing anxiety, highlighting the potential of music therapy as part of a comprehensive treatment approach.

Auriculotherapy was evaluat-

ed in a study involving 12 sessions, held weekly, lasting between 10 and 30 minutes. Participants received semi-permanent needles at the Yang points of Liver 1 and 2, Apex in sedation, and Kidney, Liver, Endometrium, and Ovary points in tonification. The results were significant, especially in reducing anxiety and insomnia, symptoms frequently reported during menopause. Auriculotherapy, flower therapy, and therapeutic touch have been evaluated as effective interven-

tions for the relief of menopausal symptoms. Studies indicate that these practices, alone or in combination, contribute to the reduction of insomnia, anxiety, and hot flashes<sup>27</sup>.

Massage therapy, foot baths, and hydrotherapy have been shown to be effective in reducing stress, anxiety, and muscle pain, improving circulation and muscle tone<sup>18,23</sup>. The conclusions summarizing the main findings of three articles are presented in Table 3.

**Table 3 - Summary of the main findings and conclusions of three articles cited in the discussion**

Autor	Resultado
Lopes NB, 2022.	Mindfulness practice - anxiety control, depression reduction, hot flashes reduction
Cowel et al., 2024.	Music therapy improves mental health, relaxation, and tension reduction, and improves sleep quality. Foot baths and hydrotherapy as a resource for improving well-being, reducing muscle tension, and anxiety
Li L et al, 2024.	Auricular therapy with adhesive patches + music therapy showed improvement in sleep and reduction in anxiety during perimenopause

Source: bibliographic references used in the preparation of the article

The scientific findings cited in this review reinforce that PICs are a relevant therapeutic approach for the management of menopause, being fundamental both as a complement to hormone therapy and as independent alternatives. However, their use must be based on robust scientific evidence—since many of these studies have serious methodological limitations—and with proper qualified professional monitoring to ensure safe and effective use. The integrative approach to menopause, therefore, broadens therapeutic possibilities and reinforces the importance of a multi-dimensional view of women's health.

In this context, it is essential to provide adequate training to health professionals through practical and theoretical courses to ensure the safe and effective use of these interventions, minimizing risks and maximizing the observed benefits<sup>28</sup>.

Despite promising evidence, research on PICs has methodological limitations that need to be over-

come. The heterogeneity of the sample groups, the short duration of the studies, and the absence of standardized questionnaires to assess the evolution of symptoms make it difficult to compare results. In addition, there are few studies that directly compare different PICs to determine which interventions offer the greatest benefit in each context. Another limiting factor is the lack of a clear distinction between perimenopausal and menopausal women, which could provide more accurate data on the effectiveness of these therapies at different stages of the climacteric. Therefore, there is an urgent need for more robust and methodologically rigorous clinical trials to expand the evidence base and consolidate the role of PICs as effective and safe alternatives for the management of menopause.

Studies indicate that women with strong beliefs, whether through religion or a subjective spiritual connection, may face this phase with less suffering and greater emotional resilience<sup>29,30</sup>.

Thus, this study contributes to the

development of complementary strategies that promote comprehensive and humanized care, helping women experience this transition phase with greater well-being and quality of life.

The methodological limitations of the studies are also relevant. Many have small samples, lack standardization in protocols, and heterogeneity in the outcomes evaluated, which makes it difficult to generalize the findings. More robust studies, with greater methodological rigor and appropriate controls, are essential to strengthen the evidence and consolidate the role of these practices in clinical practice. From an EBM perspective, CAMs should not be seen as substitutes for conventional therapies, but rather as complementary, particularly in cases where traditional therapies are poorly tolerated or contraindicated. The decision to incorporate these practices should be based on informed discussions with patients, respecting their values and preferences, and aligned with the best available evidence. The potential of these practices to improve quality of

# Integrative Review

Rego AD, Farias LS, Rego GF, Rego LFF

Integrative Practices in Menopause: Evidence on Relief of Climacteric Symptoms and Quality of Life

life and relieve climacteric symptoms, combined with their low risk, makes them valuable tools in comprehensive women's health care.

## CONCLUSION

The use of PICs in the management of climacteric symptoms and the promotion of quality of life in menopausal women reveals a promising outlook, but one that still requires improvement in the areas of research

and clinical practice. The integration of these practices should be done with caution, based on solid evidence, well-designed protocols, and professional supervision to ensure their effectiveness and safety.

Interventions such as yoga, mindfulness, acupuncture, and aromatherapy have been shown not only to relieve physical and emotional symptoms but also to promote overall well-being and strengthen patients' autonomy in relation to their health,

incorporating strategies that value the balance between body, mind, and environment.

It is necessary to invest in the education and training of healthcare teams for the correct application of these practices, especially in primary care. The development of clinical guidelines based on robust evidence is essential to minimize risks and optimize benefits.

## REFERENCES

- 1 - PERES, M. M.; KAWAMOTO, L. C.; SILVA, G. M. Conceitos atuais do tratamento hormonal em mulheres na pós-menopausa com transtorno de desejo sexual hipoativo. *Brazilian Journal of Development*, v. 9, n. 6, jun. 2023
- 2 - MACHADO, R. B.; POMPEI, L. M.; PAIVA, L. H. S. C.; et al. (ed.). *Consenso Brasileiro de Terapêutica Hormonal do Climatério*. 3. ed. Barueri, SP: Alef Editora, 2024.
- 3 - LEITE, T. A.; NUNES, J. S.; PEREIRA, A. J.; SILVA, M. L. Conhecimento de mulheres jovens sobre a menopausa e sintomas climatéricos. *Brazilian Journal of Health Review*, v. 3, n. 3, jun. 2020.
- 4 - SOBRAC – Consenso brasileiro de terapêutica hormonal da menopausa – Pompei, Luciano Melo et al. Associação brasileira de climatério – 2018.
- 5 - MELO, A. B.; NASCIMENTO, M. E. B.; et al. Terapia de reposição hormonal: benefícios e riscos durante a menopausa. *Periódicos Brasileiros de Pesquisa Científica*, v. 5, n. 3, 2023.
- 6 - FERNANDEZ, C. E. *Endocrinologia feminina*. 1. ed. São Paulo: Manole, 2016. ISBN 9788520446140
- 7 - SOBRAL, B. A. B.; SILVA, R. A.; et al. Benefícios das práticas integrativas e complementares na qualidade de vida e nos sintomas de mulheres no climatério: revisão sistemática. *Saúde e Debate*, v. 48, n. 2, out. 2024
- 8 - SILVA, J. L.; MELO, E. A.; MARQUES, M. C. Práticas integrativas e complementares utilizadas em mulheres no climatério e menopausa: uma revisão de escopo. *Contribuciones a Las Ciencias Sociales*, São José dos Pinhais, v. 17, n. 3, p. 01-21, 2024.
- 9 - SANTOS, K. M. P.; SOUZA, M. H. M.; et al. Menopausa e os possíveis impactos das práticas integrativas e complementares nos sintomas físicos e psicológicos das mulheres em Petrolina – PE. *Revista de Psicologia Online*, v. 16, 2022.
- 10 - SARRI, G. et al. Vasomotor symptoms resulting from natural menopause: a systematic review and network meta-analysis of treatment effects from the National Institute for Health and Care Excellence guideline on menopause. *BJOG, Oxford*, v. 124, n. 10, p. 1514-1523, set. 2017
- 11 - NASCIMENTO, A. C. Práticas integrativas e complementares como estratégia de cuidado no climatério. 2021. Trabalho de Conclusão de Curso (Bacharelado em Enfermagem) – Universidade Federal de Pernambuco, Centro Acadêmico de Vitória, Vitória de Santo Antão, 2021
- 12 - PILAR, T. M. I.; MENDES, V. B.; BATISTA, N. N. L. Percepção de usuárias no climatério sobre práticas integrativas. *Research, Society and Development*, v. 9, n. 10, e8179109213, 2020.
- 13 - COSTA, A. C. B.; SILVA, W. O.; BETIM, F. C. M. Acupuntura como tratamento auxiliar na diminuição da queixa gineco-patológica: breve revisão. *Revista Brasileira de Práticas Integrativas e Complementares em Saúde*, Curitiba, v. 1, n. 1, p. 4-15, 2021
- 14 - Avis NE, Coeytaux RR, Isom S, Prevet

K, Morgan T. Acupuncture in Menopause (AIM) Study: A Pragmatic, Randomized Controlled Trial. *Menopause (New York, N.Y.)*. 2016;23(6):626-37. doi:10.1097/GME.0000000000000597

15 - Nedeljkovic M, Tian L, Ji P, et al. Effects of Acupuncture and Chinese Herbal Medicine (Zhi Mu 14) on Hot Flushes and Quality of Life in Postmenopausal Women: Results of a Four-Arm Randomized Controlled Pilot Trial. *Menopause (New York, N.Y.)*. 2014;21(1):15-24. doi:10.1097/GME.0b013e31829374e8

16 - Ee C, Xue C, Chondros P, et al. Acupuncture for Menopausal Hot Flashes: A Randomized Trial. *Annals of Internal Medicine*. 2016;164(3):146-54. doi:10.7326/M15-1380.

17 - PINHEIRO, L. K.; SOUZA, T. B.; et al. Práticas integrativas e complementares: uma estratégia na promoção da saúde da mulher. *Research, Society and Development*, v. 10, n. 17, 2021.

18 - LOPES, N. B. Práticas integrativas e complementares em saúde e sua influência no climatério. 2022. Trabalho de Conclusão de Curso (Bacharelado em Enfermagem) – Universidade Federal do Rio Grande do Norte, Natal, 2022.

19 - Li M, Hung A, Lenon GB, Yang AWH. Chinese Herbal Formulae for the Treatment of Menopausal Hot Flushes: A Systematic Review and Meta-Analysis. *PloS One*. 2019;14(9):e0222383. doi:10.1371/journal.pone.0222383

20 - Van Driel CM, Stuursma A, Schroevers MJ, Mourits MJ, de Bock GH. Mindfulness, Cognitive Behavioural and Behaviour-Based Therapy for Natural and Treatment-Induced Menopausal Symptoms: A Systematic Review and Meta-Analysis. *BJOG: An International Journal of Obstetrics and Gynaecology*. 2019;126(3):330-339. doi:10.1111/1471-0528.15153.

21 - Goldstein KM, Shepherd-Banigan M, Coeytaux RR, et al. Use of Mindfulness, Meditation and Relaxation to Treat Vasomotor Symptoms. *Climacteric: The Journal of the International Menopause Society*. 2017;20(2):178-182. doi:10.1080/13697137.2017.1283685.

22 - COWELL, A. C.; ATKINSON, D.; GILMOUE, A.

Support mechanisms for women during menopause: perspectives from social and professional structures. *Women*, v. 4, p. 53–72, 2024.

23 - SOUZA ALMEIDA, V. As práticas integrativas e complementares na atenção à saúde da mulher. 2019. Trabalho de Conclusão de Curso (Bacharelado em Enfermagem) – Universidade Federal do Sul – Chapecó, 2019

24 - Keskin Töre F, Yağmur Y. The Effects of Therapeutic Touch and Music on Sleep Quality, Menopausal Symptoms, and Quality of Life in Menopausal Women. *Menopause (New York, N.Y.)*. 2023;30(12):1221-1229. doi:10.1097/GME.0000000000002269.

25 - Koçak DY, Varişoğlu Y. The Effect of Music Therapy on Menopausal Symptoms and Depression: A Randomized-Controlled Study. *Menopause (New York, N.Y.)*. 2022;29(5):545-552. doi:10.1097/GME.0000000000001941

26 - Li L, Xu X, Tao Y, Zhang X. A Clinical Study on Chinese Five-Element Music Therapy Combined With Auricular-Plaster Therapy in Treating Perimenopausal Insomnia and Anxiety. *Alternative Therapies in Health and Medicine*. 2024;:AT10182

27 - CREMONTE, A. L. Auriculoterapia como tratamento em mulheres com sintomas de climatério e menopausa na atenção básica: revisão integrativa. 2023. Trabalho de Conclusão de Residência (Enfermagem de Família e Comunidade) – Secretaria Municipal de Saúde do Rio de Janeiro, Rio de Janeiro, 2023

28 - CARMO OLIVEIRA, S. B.; VETOEAZO, J. V.; et al. O uso de plantas medicinais e de fitoterápicos no período do climatério e menopausa. *Revista Eletrônica – Acervo Saúde*, v. 24, 2024