

LETTER to the Editor

To the Editor:

In “gender (female) medicine” we have now to consider newborns, infants, adolescents (pre- and postmenarche), mature women, climacteric women (premenopausal and postmenopausal), and old women (early and late geriarche). “Geripause” is a term coined by Bernard Eskin, MD, in *The Geripause: Medical Management during the Late Menopause*.¹ In a recent issue of *Menopause Management* Dr. Eskin was quoted as stating: “Early geripause is defined as beginning at age 65, and late geripause at age 85.”²

I fully agree that this phase of a woman’s life exists. But I disagree with the use of the term “geripause.” Etymologically it means only the end (-pause) of old age (geras-), not the beginning. For this obvious reason I propose, instead, “geriarche” (geras = old + arche = beginning), which means the *beginning* of old age.

In addition, instead of “gynecology” (which does, in fact, mean *the knowledge of women*, but is today meant to be *diseases of women...*), I have previously proposed the term “feminology” (the knowledge of the female gender), to which I added “holistic” (the woman considered as a *whole*, as a psychosomatic unit), leaving “gynecology” as it is—the study of the physiology and pathology of a woman’s body. For this simple reason my own clinic is designated “Holistic Feminology.” This term helps a lot; when my clients ask me what it means it gives me the opportunity to explain what a broad range of help, support and understanding we can offer them.

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Author’s Response:

I appreciate your agreement that the phase of life described by the term “geripause” does really exist. The term geripause was academically presented to several linguists in 1998 for evaluation for its future use in medical parlance.¹ Estrogen serum levels persist in the immediate postmenopausal period, although they are below the threshold for menses; these levels continue to decrease, but are measurable throughout geripause. Follicle-stimulating hormone and luteinizing hormone predictably decrease as the anterior pituitary ages. More important, the periods that the term expresses cover a definitive series of events. The early aspect represents a slowly diminishing cascade of hormones, particularly estrogens, and an increase in aging. In late geripause maturation escalates and, combined with a rapid hormonal decrease, results in severe changes. Thus, “geripause” describes an aging process that intertwines with the climactic decline of reproductive hormones.¹

Since the term geripause encompasses all of these factors, linguists feel that it serves well as a descriptive neologism and, as such, it has been accepted since 2000 (as mentioned in the 4th and 5th editions of *The Menopause: Comprehensive Management*). Thus, it is already in standard use in journal articles globally, and particularly in the medical literature.³

I hope that you will continue to consider the importance of geripause in women’s health and how our increased knowledge of this essential subject will help us aid women as they live longer, healthier lives.

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References (for Letter and Response)

1. Eskin BA, Troen BR. *The geripause: medical management during the late menopause*. New York and London: CRC Parthenon Publishing, 2003.
2. Clinicians’ Forum. *Menopause Management* 2008;17:34-5.
3. Eskin BA. *The menopause: endocrinologic basis and management options*, 5th ed. London: Informa Healthcare, 2007.