



FREE GUIDE

Menopause

Perimenopause and menopause: heart, blood sugar, thyroid, iron and bones.

Blood tests around the menopause: what helps and what does not

From 45, with symptoms, the menopause is identified without a hormone test. The tests that help are the ones for your heart, blood sugar, thyroid and iron.

It can

- ✓ Show your cholesterol as it changes around your last period
- ✓ Check whether your thyroid could explain your symptoms
- ✓ Show whether heavy periods have lowered your red cells and iron

It cannot

- ✗ Confirm the menopause if you are 45 or over: that comes from your symptoms
- ✗ Check your hormones on HRT: how you feel guides the dose
- ✗ Show your bone density: that needs a scan

WHY IT MATTERS

01

Cholesterol rises around the menopause, not just with age

In a study of 3,302 women, total and LDL cholesterol rose sharply in the year before and the year after the last period, a pattern linked to the menopause and not to age. The American Heart Association calls this a time of rising heart risk.^[1, 2]

02

A hormone test is rarely what is missing

UK guidance identifies the menopause without tests in women aged 45 or over with symptoms, and the NHS says there is no routine test for it. The tests that change the conversation with your GP are heart, blood sugar, thyroid and iron.^[3, 4]

03

The thyroid can look like the menopause

UK guidance warns that thyroid symptoms may be mistaken for the menopause. Tiredness, mood, weight and sleep show up in both.^[5]

WHY IT MATTERS

04

Heavy periods before the menopause can lower your iron

UK guidance recommends a full blood count for every woman with heavy periods, and no female hormone tests for heavy periods.^[6]

05

Blood sugar and bones come into this stage

UK guidance encourages a diabetes risk check for everyone over 40. The menopause can weaken bones, and vitamin D is the part of bone health a blood test measures.^[3, 7, 8, 9]

What usually makes sense, and when to repeat it

TEST	WHY	WHEN TO REPEAT
Cholesterol (total, LDL, HDL, non-HDL, triglycerides)	Cholesterol, especially LDL, tends to rise around your last period. Knowing your numbers helps the conversation with your GP. No fasting needed. ^[1, 2, 10, 11]	Around and after your last period, as your GP advises. The NHS Health Check repeats it every 5 years from 40 to 74.
HbA1c (average blood sugar)	Your average blood sugar over the past two to three months. UK guidance encourages a diabetes risk check for everyone over 40. ^[7]	With your cholesterol.
Thyroid (TSH and free T4)	Thyroid problems can feel like the menopause: tiredness, mood, weight and sleep. A thyroid test helps tell them apart. ^[5]	With symptoms, as your GP advises.
Full blood count and ferritin (heavy periods)	Heavy periods are common as the menopause approaches and can lower your iron. UK guidance recommends a full blood count for heavy periods. ^[6]	While the heavy bleeding goes on, as your GP advises.
Hormones (FSH, LH, oestradiol): only when they make sense	If you are 45 or over with menopause symptoms, you do not need a hormone test: UK guidance identifies the menopause from your symptoms and periods. An FSH test can help from 40 to 45 with symptoms and changes in your periods, or under 40 if your GP suspects an early menopause. It does not work if you use combined hormonal contraception or high-dose progestogen. ^[3]	Under 40, two tests 4 to 6 weeks apart, through your GP.
Vitamin D, 25(OH)D	Bone health matters more after the menopause. Vitamin D is the part of bone health a blood test can measure; bone density itself needs a scan. ^[3, 8, 9, 12]	Late autumn or winter.

What to do with your result

Your result arrives in your account, with reference ranges. A value outside the range, or a symptom with a normal result, is a conversation with your GP: treatment and supplements are their call. Repeat the same test later to compare.

SOURCES

1. Matthews KA, Crawford SL, Chae CU, et al. Are changes in cardiovascular disease risk factors in midlife women due to chronological aging or to the menopausal transition?. J Am Coll Cardiol. 2009;54:2366-2373. doi:10.1016/j.jacc.2009.10.009. PMID 20082925
2. El Khoudary SR, Aggarwal B, Beckie TM, et al. Menopause Transition and Cardiovascular Disease Risk: Implications for Timing of Early Prevention: A Scientific Statement From the American Heart Association. Circulation. 2020;142:e506-e532. doi:10.1161/CIR.0000000000000912. PMID 33251828
3. NICE. Menopause: identification and management (NG23). nice.org.uk. 2026. <https://www.nice.org.uk/guidance/ng23/chapter/Recommendations>
4. NHS. What are menopause and perimenopause?. nhs.uk. 2026. <https://www.nhs.uk/conditions/menopause-and-perimenopause/what-are-menopause-and-perimenopause/>
5. NICE. Thyroid disease: assessment and management (NG145). nice.org.uk. 2023. <https://www.nice.org.uk/guidance/ng145/chapter/Recommendations>
6. NICE. Heavy menstrual bleeding: assessment and management (NG88). nice.org.uk. 2026. <https://www.nice.org.uk/guidance/ng88/chapter/Recommendations>
7. NICE. Type 2 diabetes: prevention in people at high risk (PH38). nice.org.uk. 2017. <https://www.nice.org.uk/guidance/ph38/chapter/Recommendations>
8. NHS. Menopause and perimenopause: symptoms. nhs.uk. 2026. <https://www.nhs.uk/conditions/menopause-and-perimenopause/symptoms/>
9. Scientific Advisory Committee on Nutrition. Vitamin D and Health. Public Health England. 2016. <https://www.gov.uk/government/publications/sacn-vitamin-d-and-health-report>
10. NICE. Cardiovascular disease: risk assessment and reduction, including lipid modification (NG238). nice.org.uk. 2023. <https://www.nice.org.uk/guidance/ng238/chapter/Recommendations>
11. NHS. NHS Health Check. nhs.uk. 2026. <https://www.nhs.uk/tests-and-treatments/nhs-health-check/>
12. NHS. Vitamin D. nhs.uk. 2026. <https://www.nhs.uk/conditions/vitamins-and-minerals/vitamin-d/>



Scan for the full page, the tests that cover these markers, a short video and the guided check-up.

bpr.clinic/blood-tests/for/menopause

General information, not personal medical advice. Talk to your GP about your own situation. Questions: hello@bpr.clinic or message us in the BPR app.

Reviewed October 2026