

**Andropause in the Workplace Guidance Document**

**Introduction**

This document provides guidance for employees and managers to enable them to be able to support our colleagues who are experiencing andropause related issues, creating an environment where anyone who may be directly affected by andropause feels confident to raise concerns, instigate conversations about the andropause and ask for reasonable adjustments in the workplace if deemed appropriate.

East Midlands Ambulance Service NHS Trust seeks to promote a better understanding and support for those experiencing the andropause and will raise awareness through training and development for all staff.

Andropause typically occurs for people in the UK between the ages of 40 and 60, although it has been known to be experienced by some as early as 30 years old.

**Definitions**

**Andropause** – (also known as the male menopause) is a condition that is associated with the decrease in the hormone testosterone produced in the testicles.

**Testosterone** -is the hormone responsible for deep voices, muscle mass, and facial and body hair patterns made in the testicles of men and the ovaries of women, although in smaller amounts.

**Causes**

The decrease in testosterone is an important factor in those suspected of experiencing the andropause. Through aging, testosterone starts to be reduced at a rate of less than 1% per year (<https://www.nhs.uk/conditions/male-menopause/>).

**Symptoms**

Symptoms that are experienced can vary from person to person, however some of the common symptoms experienced are:

* Loss of libido.
* Lack of energy.
* Depression.
* Irritability.
* Mood swings.
* Loss of strength or muscle mass.
* Reduced ability to exercise.
* Increased body fat.
* Hot flashes (**Hot flashes** are sudden feelings of warmth, which are usually most intense over the face, neck and chest. Your skin might redden, as if you're blushing. **Hot flashes** can also cause sweating, and if you lose too much body heat, you might feel chilled afterward).
* Fat redistribution.
* General lack of enthusiasm.
* Difficulty with sleeping (insomnia) and or increased tiredness.
* Poor concentration and short-term memory.

**This list is not exhaustive**

**Complications**

Some of the severe complications associated with the andropause include an increased risk of cardiovascular problems and potentially osteoporosis better known as brittle bone.

**Diagnosis of Andropause**

If it is suspected that a colleague is encountering the andropause, they must seek advice from their GP who will then undertake a blood test to ascertain the levels of testosterone in the blood. The test will also rule out other factors that are also associated with low testosterone before giving the definitive outcome of possible andropause.

**Treatment**

The treatment for andropause is a common treatment and includes things such as minor lifestyle changes such as

* Increased exercise.
* Stress reduction techniques.
* Good healthy nutritional diet.

Other things are also available to help with testosterone such as:

* **Skin patches** – this allows for the testosterone to be absorbed through the skin slowly allowing for a steady release into the blood stream.
* **Testosterone gel** – this is applied directly on the skin, and usually applied to the skin around the arms. Care must be taken to ensure that the gel does not meet others through contact.
* **Testosterone capsules** – these are taken orally daily. Although advice will be given by the GP, these should not be taken if you have any liver or kidney disease or problems or if there are any issues with too much calcium in the blood (this will be evident through the same blood test).
* **Testosterone injections** – These are injections given directly into the muscle every 2-4 weeks.
  + Side effects of these can include mood swings which are due to the change in levels of testosterone. The respective GP will advise accordingly with this.

**Managing Attendance**

When managing attendance, consideration needs to be given to any issues related to andropause including the signs, symptoms and side effects of the treatment being received. The Line Manager will need to ensure that the member of staff is not put at a detriment either by capability discussions or applying attendance sanctions outside of the reasonable adjustments agreed by the Trust, Occupational Health / GP / specialist and/or the individual.

**Supporting Our Staff**

Line managers should be supportive and maintain awareness so that our colleagues are not embarrassed to approach their line manager to discuss how the andropause is affecting their health and role at work. The symptoms can interfere with everyday life, so it’s important that support is put in place so that they are confident to seek medical advice to find the underlying cause and work out what can be done to resolve the issue.

The member of staff should not be placed in a position of embarrassment where they are expected to suffer in silence but to have the support offered to be able to identify the issue is real. Remember that perception of the individual is a reality to them so do not dismiss what they are saying or feeling.

Regular, informal conversations between the manager and employee may enable discussion of changes in health, including issues relating to the andropause. It good to acknowledge this is a normal stage of life and that adjustments can easily be made to reduce / remove any barriers for the member of staff. These conversations can identify the support mechanisms such as Occupational Health that can help and encourage them to discuss any relevant health concerns also to ensure they consult with their GP.

General health and wellbeing discussions should naturally form part of the discussion in one to ones, wellbeing conversations or the appraisal process and managers should maintain confidentiality when addressing health information associated with the andropause or any health-related concerns.

**Reasonable Adjustments or Specific Needs (not exhaustive)**

Reasonable adjustments should be considered for anyone that shares that they are experiencing symptoms of the andropause. Reasonable adjustments should be made on a case-by-case basis as no two cases will be identical. If in doubt, please refer to the local HR Team for further advice and support. The advice from Occupational Health can also be used to assist implementing any changes or potential reasonable adjustment to support our colleagues. Any discussions that result in mutually agreed reasonable adjustments should be documented on the Tailored Adjustment Plan and a review period agreed.

Remember, never make assumptions on what the member of staff can or cannot do or make assumptions of what they will need. Always ask what they feel they need and what they can or cannot do without support or any reasonable adjustment(s).

**Provision of additional uniform** – ensure that natural fibres are preferable to synthetic material if an employee is experiencing hot flushes/flashes and sweating.

**Flexible working** – may be considered for staff experiencing symptoms. Shift patterns and start/finish times may be adjusted temporarily to enable staff to work productively where the provision of the service allows. For further guidance, support and information please refer to the Work Life Balance Policy

Flexibility should be given for staff needing to attend medical appointments associated with andropause symptoms and for those seeking advice relating to the andropause. Phased returns may be supported for staff suffering with severe impairment. This will be particularly beneficial for those who are taking medication for the condition.

**Comfortable working environment** – this may include a temperature-controlled environment, washing facilities and access to drinking water. Positioning near a window or a door may help or ensuring portable fans or heaters are available, enabling the individual to personally control the temperature surrounding them

**Management Responsibilities**

Managers may wish to consider undertaking a risk assessment for those who are experiencing andropause symptoms with consideration of the following:

* Is a referral to Occupational Health required?
* Is there an appropriate manager the staff member feels comfortable and confident in discussing the concerns?
* Does the working environment have adequate rest facilities?
* Does the working environment have access to private washing and changing facilities available?
* Are facilities available to ensure an ambient temperature can be personally controlled?
* Do uniforms and PPE reflect the needs of the staff member?
* Is a workstation assessment required taking into consideration symptoms of the andropause?
* Should alternative duties be considered for a short period?
* Does job related training/education e.g., manual handling and CPR assessments take andropause issues into account?
* Is it possible to offer a flexible approach to working hours and break times?
* Is time off to attend medical appointments required?
* Has a review of Wellbeing Impact Assessments been conducted taking into account the new information?

**Useful Contacts**

**Occupational Health**

Occupational Health can undertake an assessment to ascertain whether the andropause is contributing to the symptoms/wellbeing of an employee. They can provide advice and guidance and signpost staff to appropriate sources of help.

Should you wish to contact our employee assistance programme they can be contacted on 0800 0280199 accessible 24/7. The mobile app ‘My Healthy Advantage’ can be downloaded using the unique code **MHA223608** or visiting [www.healthassuredeap.com](http://www.healthassuredeap.com) and using the username **wellbeing** and password **pastrestflexs**

**General Practitioners** – They can offer medical advice and emotional support for staff experiencing difficulty in coping with andropause symptoms.

**Helpful Links**

<https://www.nhs.uk/conditions/male-menopause/>

<https://www.healthline.com/health/menopause/male>

Mind Blue Light Infoline - Mind have a confidential Blue Light Infoline for emergency service staff, volunteers and their families. Their team can look for details of help and support in your area. \*9am–6pm, Mon to Fri, calls charged at local rates Call 0300 303 5999\* Text 84999, Email bluelightinfo@mind.org.uk or visit <http://mind.org.uk/information-support/ambulance/mental-wellbeing-ambulance> for more information.

P2P (Peer 2 Peer) and PCW (Pastoral Care Workers) support schemes are now available. Should you wish to access the scheme for support simply approach a member of staff wearing a P2P/PCW badge, email peer2peernetworkgroupmembers@emas.nhs.uk, or contact Reverend Kev Charles on 07815 945405 who will be able to help further.

**Equality Statement**

Equality, Diversity, Inclusion and Human Rights encompass all our aims, objectives and actions addressing inequalities and promoting diversity in healthcare and employment. The key principle of Diversity and Inclusion is that it belongs to everyone and that every individual has the right to be treated with respect and dignity as aligned to our core values.

EMAS will ensure that its services are anti- discriminatory enabling equality of access and provision and meeting the legal requirements under the Equality Act 2010 and the specific elements of the Public-Sector Equality Duty. EMAS will use the EDS2 to ensure that service priorities are influenced and set by the health needs of all our local and regional communities through consultation, equality monitoring and partnership working. We will demonstrate “Due Regard” in all aspects of our business to ensure we remain focused on equality of outcome and purpose.