College of Human Medicine
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Goal-based Care: A Case Study in Menopause Symptom Management

true. WOMEN'S HEALTH

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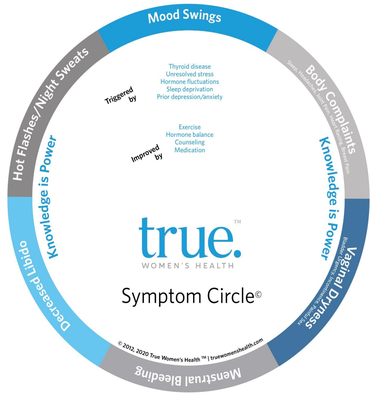
Introduction



- Over 25 million women enter menopause each year, a number projected to rise with the aging population[1]
- Hormonal fluctuations during perimenopause and menopause increase risk for chronic illnesses such as cardiovascular disease, obesity, and diabetes[2-7]
- Traditional problem-based care often reduces patients to their diagnoses rather than addressing their unique goals, lifestyles, and challenges[8-10]
- W*A*I*Pointes © ("Who Am I Pointes") introduces a goal-oriented, personalized care framework that enhances patient engagement and quality of life in menopause management.

Figure 1 the Symptom Circle is a tool offered to patients at true.Women's Health that allows users to see triggers and solutions for common menopause symptoms

Patient Description

- Patient is a G1P1 female who initially sought gynecological care in 2008 at the age of 42 with a complaint of irregular heavy periods, bloating, acid reflux, and weight gain
- Symptoms treated with problem-based care including hysterectomy with no relief of her symptoms
- Began goal-oriented care at age 54 with W*A*I*Pointes © program at true. Women's Health
- Care centered around Picture of Self (POS), or her overall goal within categories of concern and her Picture in Place (PIP), her current state of being

Visit 1 (06/2020)	• Patient identified 3 of the 9 Wellness categories as her primary concerns which includes: (A) Ability to be Active: Wants to be more active, confident, and continue to golf/ski (B) Body Composition: Wishes to fit comfortably in clothes (F) Phase of Ovarian Function: Reduce/Eliminate unpredictable menopause symptoms
Visit 2 (09/2020)	• Patient continues to progress toward milestone goal, unsatisfied with weight and energy (A) Ability to be Active: Stay active, wakeboard and ski with son (B) Body Composition: Feel comfortable wearing shorts, strong (F) Phase of Ovarian Function: Continue to reduce unpredictable menopause symptoms
Visit 3 (01/2021)	• No change in overall milestone, wishes to walk Detroit without limits during graduation (A) Ability to be Active: Hike, walk and golf with family (B) Body Composition: Spoke about weight reduction goals, lose 10lbs by graduation (F) Phase of Ovarian Function: Wants to achieve better orgasm, improve mood

Clinical Tools and Handouts

Phase of Ovarian Function PIP

3 - Symptoms are minimal and predictable	• Minimal or rare distress: no or mild hormone-related symptoms • MTS >19 • Knowledge of phase and symptoms
2 - Symptoms are moderate and somewhat predictable	• Symptoms mild and predictable • MTS 12-18
1 – Symptoms are severe, not predictable	• Sometimes able to predict symptoms and severe distress • MTS <12 • Minimal knowledge of symptom triggers, no knowledge of phases

My Phase of Ovarian Function PIP is 3 (3, 2 or 1)

Phase of Ovarian Function POS

3 - Symptoms are minimal and predictable	• Minimal or rare distress: no or rare hormone-related symptoms • *MTS >19 • Knowledge of phase and symptoms
2 - Symptoms are moderate and somewhat predictable	• Symptoms are moderate and predictable • *MTS 12-18
1 - Symptoms are severe and not predictable	• Able to sometimes predict symptoms and severe distress • *MTS <12 • Minimal knowledge of symptom triggers, no knowledge of phases

*To find your MTS score, see page 67.

My POS for Phase of Ovarian Function is 3 (3, 2 or 1)

Why? *I would like to be able to better predict my symptoms and have better orgasms. Also interested in tracking my symptoms in order to understand my triggers.*

The Workbook Example of how our patient would gain insight into current symptom state and visualize her goal state of being

Symptom	3 (Easy)	2 (Moderate)	1 (Hard)
Hot flashes	Rare, predictable	Moderate, predictable	Frequent, unpredictable
Weight	Stable, healthy, overweight but losing	Overweight, not losing	Obese or gaining
Energy	Good, feels rested	Mostly rested, good and bad days	Mostly tired, poor function
Libido	Both partners initiate, connected, playful	Only male initiation, relationship OK	Rare, strained
Moods	Good, minor cyclical variations, predictable	Cyclical, noticed by others, some dysfunction	Mostly depressed or anxious, poor function
Vaginal dryness	Minor dryness, rare urgency	Cyclical dryness, some leaking, urgency	Dyspareunia, urgency
Vaginal bleeding	Cyclical, light	Moderate to heavy, predictable, mild pain	Heavy, interfering, unpredictable, severe pain

Menopause Transition Scale (MTS) ©
Used to assess and track progression of menopause symptoms

Intervention/Response to Treatment

- Ability to be Active: Completed physical therapy addressing physical barriers and regained ability to walk, golf, and perform high-intensity exercise
- Body Composition: Met with nutrition coach, identified foods affecting blood glucose and began continuous glucose monitoring and metformin therapy
- Phase of Ovarian Function: Initiated estrogen patch (no progesterone due to hysterectomy) and tracked progress using MTS
- Outcome: By her milestone event, she achieved all goals – maintaining an active lifestyle, improving body composition, and achieving stable, predictable menopause symptom control

Discussion

- This case study highlights the effectiveness of goal-based care, emphasizing individualized patient goals over disease-centered management
- Active patient participation in the care process fosters empowerment, engagement, and a clearer vision of personal health goals
- Further research is needed to evaluate the impact of goal-based care on menopause symptom management and long-term health outcomes.

Referenced Literature