



## **The impact of menstrual bleeding on people and employers**

**Written by the Peppy Menopause Team**

From our expert practitioners



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**Based on insights from over 1,300 people, this survey analysis explores how menstrual bleeding affects everyday lives, gaps in care and education, and what employers need to know to better support their workforce**

Periods are often treated as a trivial issue, but for many people they can be heavy, painful, unpredictable or disruptive.

Symptoms such as prolonged bleeding, severe pain or significant mood changes can affect people's physical health, emotional wellbeing and day-to-day life, yet are often normalised or overlooked.

This survey was designed to better understand people's experiences of menstrual bleeding and cycle-related symptoms, and the impact these have on work and daily life.

It also highlights gaps in recognition, support and education, what these gaps mean for employers, and how Peppy can help organisations provide earlier, more effective care for their workforce.

# Methodology

An anonymous online survey was sent to Peppy's menopause and women's health service users.

The survey included a mix of multiple-choice questions (some allowing multiple responses), closed questions and open-ended free-text responses.

The key areas it explored were:

- menstrual bleeding patterns and symptoms
- impact on daily life, work and social participation
- healthcare access, diagnosis and treatment
- menstrual health education and information sources.

A total of 1,337 people completed the survey, with 1,094 from the menopause service and 243 from the women's health service.

The average age of participants was 46 years old, with most aged 45-54 (**60.7%**), followed by ages:

- 35-44: **19.8%**
- 55-64: **13.7%**
- 25-34: **4.8%**
- 18-24: **0.9%**
- 65+: **0.1%**

## Key findings

### Menstrual cycle characteristics

The survey revealed that many people are managing unpredictable and challenging cycles.

Of the 1,012 who said they still have a bleed, **34%** reported that their cycles vary in length from month to month.

While the most common cycle length shared was 25-28 days (**29%**), many people told us their cycles fall outside this range:

- 21-24 days: **12%**
- 29-35 days: **14%**
- More than 35 days: **5%**

When it comes to bleeding duration, most people (**44%**) said their periods last 3-5 days, but others reported:

- Under three days: **10%**
- Six days or more: **31%**
- Changes month to month: **14%**

Flow varied just as much:

- Moderate: **26.2%**
- Heavy: **16.9%**
- Light: **16.3%**
- Very heavy: **12.5%**

Unpredictable cycles can make it harder for people to plan workdays, manage energy levels or commit to fixed schedules.

For employers, this highlights the importance of flexibility and avoiding assumptions about what a 'normal' cycle looks like.

## Symptom burden and clinical red flags

A substantial proportion of respondents reported symptoms that are recognised as clinically significant:

- Irregular or unpredictable periods: **58%**
- Extremely heavy bleeding (soaking through pads or tampons in less than 2 hours): **54%**
- Very painful periods: **48%**
- Passing blood clots larger than a 10p coin: **43%**
- Periods lasting longer than seven days: **40%**

Passing clots larger than a 10p coin is a recognised clinical red flag, yet only **21%** of people were told their bleeding is abnormal.

The most common symptoms accompanying the above bleeding problems were:

- Mood changes: **70%**
- Bloating: **64%**
- Fatigue: **62%**
- Breast tenderness: **58%**
- Cramps: **54%**
- Headaches or migraines: **44%**

Despite this level of symptom burden, only **13%** of people are currently receiving treatment.

And among those who sought medical help, fewer than half (**46%**) felt taken seriously.

This suggests that the issue isn't people over-reporting symptoms — it's that many are not receiving timely recognition or support.

For employers, this means employees may be managing significant health issues at work without adequate support, increasing strain and the risk of symptoms worsening.

## Everyday impact of periods

Many people shared how much their symptoms impact their daily lives. Overall:

- **73%** said their periods interfere with everyday activities
- **35%** reported mild interference
- **27%** reported moderate interference
- **26%** experienced no interference
- **10%** described the impact as severe

This means that for every 10 people, roughly seven experience some impact on daily life, and one deals with symptoms severe enough to affect work, social plans or overall wellbeing.

This echoes wider UK research showing that menstrual health is a significant public-health issue — not just an inconvenience.

## Existing conditions, treatments and healthcare interactions

Many people are also living with underlying conditions that influence their cycles. The most common were:

- perimenopause: **54%**
- menopause: **22.5%**
- endometriosis: **8.6%**
- polycystic ovary syndrome (PCOS): **6.6%**

Only **17%** said they had no condition affecting their menstrual cycle.

These overlaps raise important questions about joined-up care.

For example, endometriosis symptoms can worsen during perimenopause, but may be dismissed as 'just hormonal changes', leading to missed opportunities for treatment.

Interestingly, although over 60% of respondents were aged 45-55 – the typical age range for perimenopause – only **54%** reported having a perimenopause diagnosis.

Given the level of symptoms reported, this gap suggests many people may be undiagnosed, or that perimenopause symptoms are being missed or not formally recognised in primary care.

While only 13% are receiving treatment specifically for problematic bleeding, many people are using medications that can influence bleeding patterns:

- Prescribed contraception: **62%**
- Hormone replacement therapy (HRT): **37%**

This suggests that many people may not know how these treatments can affect their cycles, which can create uncertainty about what's normal for them.

When employees are working with conditions that are real and impactful but not formally named or understood, symptoms may go unsupported because there is no clear diagnosis to anchor conversations about adjustments or care.

Employers also risk losing experienced employees at important stages of their working lives.

## The impact on work and social life

Menstrual bleeding and period-related symptoms don't just affect people physically – they shape how they work, socialise and take part in activities they enjoy.

- **63.7%** avoided social or physical activities due to bleeding
- **58.4%** avoided activities due to other period-related symptoms
- **28.9%** took time off work because of bleeding
- **31.6%** took time off due to other period-related symptoms

When looking at specific conditions:

### Endometriosis:

- Time off work: **66%**
- Avoided social activities: **86%**
- Avoided both: **50%**

## PCOS:

- Time off work: **50%**
- Avoided social activities: **77.5%**
- Avoided both: **36%**

## Perimenopause:

- Time off work: **27%**
- Avoided social activities: **63.5%**
- Avoided both: **10%**

## Menopause:

- Time off work: **33%**
- Avoided social activities: **58.5%**
- Avoided both: **31.5%**

Given that 73% report daily disruption yet far fewer report time off, it's possible many people push through symptoms, work while struggling or avoid disclosing the true impact.

For employers, presenteeism can affect productivity and increase the risk of longer-term absence.

## Education and knowledge of menstrual health

Many people told us that they didn't receive enough education about menstruation growing up:

- **74%** said they weren't given enough information
- **Only 4%** learned most of what they know from school

Most people (**74%**) now rely on online sources to understand menstrual health, followed by:

- Healthcare professionals: **46%**
- Family and friends: **34%**
- Peppy: **31%**

Only **five** people said they've never looked for menstrual health information at all.

For many, online resources fill the gaps left by healthcare professionals and by earlier education at school.

Given the impact of menstrual health on work and wellbeing, this creates a clear opportunity for employers to support access to credible, evidence-based information.

## Opinions and lived experience

The survey asked participants what would most improve support for people experiencing menstrual health issues.

While responses were varied, three consistent themes emerged:

### 1. Education

Respondents highlighted the need for earlier and clearer education, particularly in schools, alongside better understanding of what constitutes normal versus abnormal menstrual bleeding.

## **2. Healthcare access and quality**

Many respondents called for easier access to advice, improved training for healthcare professionals, and clearer referral pathways.

Being listened to and taken seriously was repeatedly identified as a priority, alongside greater availability of menstrual health specialists and further research into menstrual conditions.

## **3. Societal and workplace understanding**

Participants emphasised the importance of increased awareness, particularly among men and in workplace settings, to reduce stigma, dismissal and misunderstanding of menstrual health concerns.

The survey also invited participants to share any additional experiences related to menstrual bleeding.

Many described challenges including limited access to appropriate care, uncertainty about how prescribed treatments affected their symptoms, and the cumulative physical and emotional impact of ongoing menstrual problems.

Mood changes were the most commonly reported symptom (**70%**) to accompany menstrual bleeding.

When considered alongside the experiences shared in the free-text responses, this suggests a potential mental health impact that is not always recognised or addressed.

Not all responses were negative. A number of respondents shared positive reflections, with **35** people specifically highlighting the support they had received through Peppy.

## Conclusion

This survey highlights a clear unmet need in menstrual health recognition, support and education, with direct implications for employee wellbeing and workplace performance.

The findings also provide valuable insight into how Peppy can continue to evolve and strengthen its support.

### **1. Improving recognition and early support**

Peppy can help reduce delays in diagnosis by offering clearer red-flag guidance, structured symptom assessment and practical support to help people prepare for GP consultations and understand when further investigation may be needed.

This early intervention can prevent symptoms worsening and reduce longer-term workplace absence.

### **2. Enhancing education and self-management**

Targeted resources on bleeding patterns, perimenopause, endometriosis, PCOS and medication effects can help address longstanding gaps in menstrual health education and support people to better understand and manage their symptoms.

For employers, this means employees are better equipped to understand their symptoms, manage their health and communicate their needs at work.

### **3. Providing holistic, joined-up support**

The overlap between hormonal transitions and gynaecological conditions highlights the need for integrated, whole-person care.

Peppy is well placed to support both physical and emotional needs, while helping employers better understand and respond to symptoms that affect attendance, productivity and wellbeing.

Overall, this survey reinforces both the scale of the issue and the opportunity for better support.

By using these insights to continue refining its care and education, Peppy can improve menstrual and hormonal health support for employees while delivering clear value for employers.

*This content was last reviewed in December 2025.*