Awareness is Key
When a child has a disability it is important for their parents or primary caregiver to talk to the primary care physician about puberty well before they start to go into it. Someday their daughter will go into menses. There are options to make the process much easier. The parent will want to be aware of the early signs of puberty. Although it might seem a relief to some that their child has not started menses at an average age, it is important to talk to the physician to make sure they don’t need to be treated for something like hypothyroidism.

How do I know my daughter if my daughter has reached puberty?
An early sign of puberty might typically be breast budding. There are a lot of kids with disabilities that develop pubic hair very early on but no other signs of puberty, this really isn’t true puberty. Typically menses are about a year and a half to two years after you first start noticing changes. This gives the parent time to think about it and prepare, not worrying so much about it happening anytime soon.

There are many factors that go into deciding whether to allow an individual to manage their menses or whether to choose suppression. Here are some important factors;

- Hygiene
- Sensory integration issues (if they don’t like the feel of the pad they rip it off when they get to school).
- Getting them to tolerate menses can be difficult.
- Many kids perceive the pads as diapers, so you may have a child who was continent, but is no longer continent because they perceive they have been put back in diapers.
- How is this process going to affect the teenager’s independence?
- How does the family feel about managing the child’s menses?
- Another factor is if there are somatic problems that come up with the menses. Problems with abdominal pain may be a reason to suppress menses.
- Behavioral issues that exacerbate with cycling that needs to be managed although instead of suppressing menses, treating PMS may be a better way.

Be sure to talk to your physician if you want to learn more about how to handle puberty and menses. There are several options to discuss. There are also many things to take into consideration, and once you make the decision with the physician, it can always change. You can try something for a year or two to see how it works for you and your child.

Resources

Menstrual Hygiene Management for the CSHCN Population (source)

Women and Disability: Health Care and Wellness (Disability Studies-Syracuse University)
http://disabilitystudies.syr.edu/resources/healthcare.aspx

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