

Supplemental Digital Content 1

Appendix 1: Symptoms Included in WLB Survey

Sleep Disruption

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

- I have a hard time falling asleep
- I wake in the middle of the night but get back to sleep easily
- I wake in the middle of the night and am awake for an hour or more
- I wake up in the middle of the night and feel panicked, anxious and/or worried
- I wake up very early in the morning

Vasomotor Symptoms (night sweats and hot flashes) and Palpitations

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

- I have hot flashes (e.g., sudden feelings of warmth, I generally heat up more than I used to)
- I have night sweats or cold sweats
- I have heart palpitations (e.g., racing heart)

Mood Changes

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

Some of us have dealt with anxiety or depression for most of our lives. Please keep in mind that we are interested in learning about mood changes that are new or more common now than previously for you.

- I am irritable (e.g., short tempered, grumpy, impatient with others)
- I have feelings of anxiety (e.g., more nervous, nervous tension)
- I feel easily overwhelmed, less able to cope than I used to be
- I worry more
- I have low feelings (e.g., sad, blue, depressed, down, blah)
- My mood changes suddenly (mood swings)
- I'm experiencing panic attacks or feeling panicky
- I experience sudden anger (e.g., raging feelings, fly off the handle)
- I'm experiencing tearfulness, crying spells
- I feel like I can't calm down on the inside (e.g., jumpy, startle easily, sensitive fight or flight response)

Headaches and Sore Breasts

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

apply)

If none are relevant, move on to the next question.

- I have more frequent tension headaches (pressure or tightening feeling, on both sides)
- I have more frequent migraine headaches (throbbing pain, made worse with exertion, tends to be on one side)
- I have sore breasts, breast tenderness

Brain Fog and Dizziness

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

- I am more forgetful (i.e., can't remember names or where I've put things)
- I have a harder time concentrating
- I have more difficulty making decisions (e.g. fuzzy thinking, confusion)
- I feel dizzy
- I have vertigo (I feel like I'm on a boat)
- I feel lightheaded (I feel like I might pass out)

Dryness, Itchiness and Acne

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

- My skin is drier than it used to be
- I have more breakouts/acne than I used to
- My skin is itchier than before (body and breasts)
- My eyes are drier than they used to be

Hair Changes

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

- My hair is drier than it used to be
- My hair is thinner than it used to be
- My hair is falling out/I am losing hair
- I have new facial hairs

Digestive Issues

Which of the following have you experienced at least once in the past three months *(Check all that apply)*

If none are relevant, move on to the next question.

Again, since many of us experience digestive symptoms throughout our lives, please select only those that are new or more common now than previously for you.

- I am experiencing new bloating

- I am experiencing new heartburn
- I am experiencing new nausea
- I am experiencing new constipation
- I am experiencing new diarrhea
- I am experiencing new abdominal pain, heaviness, tightness

Pain and Fatigue

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

Again, since many of us experience pain and fatigue throughout our lives, please select only those that are new or more common now than previously for you.

- I am experiencing new joint/muscle pain
- I am experiencing new back pain
- I am experiencing new leg pain
- I am experiencing new neck pain
- I am experiencing new shoulder pain
- I am experiencing new joint/muscle stiffness
- I am experiencing new fatigue, tiredness, sluggishness

Painful Sex and Libido

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

- I have pain with vaginal intercourse and other kinds of vaginal sex
- I have less vaginal lubrication during arousal than I used to
- I am less interested in sexual activities
- I am more interested in sexual activities
- I have more difficulty experiencing orgasm
- I have more trouble feeling sexually aroused

Vaginal and Urinary Changes

Which of the following have you experienced at least once in the past three months? *(Check all that apply)*

If none are relevant, move on to the next question.

- I have vaginal dryness
- I have vaginal itchiness
- I have vulvar/vaginal pain when not having sex
- I have urinary leakage when sneezing or coughing
- I have urinary leakage at other times than when sneezing or coughing
- I have increased frequency of urination
- I have urinary urgency (i.e., sudden, urgent need to urinate)

