Selección de Resúmenes de Menopausia

Semana del 29 de noviembre al 5 de Diciembre de 2017
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Waist circumference and risk of breast cancer in Korean women: A nationwide cohort study.

Lee KR, Hwang IC, Do Han K, Jung J, Seo MH.

Although postmenopausal breast cancer (BC) risk has been linked to adiposity, associations between adiposity and premenopausal BC remain unclear. To address this question, we investigated the association of BC risk with measures of adiposity, including body mass index (BMI) and waist circumference (WC), in a large cohort of Asian women. We used a nationwide cohort of adult Korean women selected from the National Health Insurance Corporation database merged with national health examination data from 2009 to 2015. A total of 11,227,948 women were tracked to retrospectively identify incident cases of BC. Our analysis used Cox proportional hazards models to calculate hazard ratios and assess the association of BC risk with BMI and/or WC in both pre- and postmenopausal women. BMI and WC were robustly associated with increased risk for postmenopausal BC (Ptrend <0.001 for both BMI and WC) but not with premenopausal BC. Association between WC and premenopausal BC was only statistically significant when considering BMI (Ptrend =0.044). In contrast, postmenopausal BC was negatively associated with WC when considering BMI (Ptrend =0.011). In premenopausal women, WC may predict increased BC risk when considering BMI. However, in postmenopausal women, WC is not superior to BMI as an indicator of BC risk.

Depressive symptoms and their risk factors in midlife women in the Middle East: a systematic review.

Azizi M, Fooladi E, Masoumi M, Orimi TG, Elyasi F, Davis SR.

INTRODUCTION: Women may experience different menopausal symptoms across different cultures around the world. The purpose of this study was to determine the prevalence and contributing factors of depression in midlife women in the Middle East. METHODS: Electronic databases including PubMed, Medline, PsycINFO, CINAHL, Web of Science, SCOPUS, and Google scholar were searched. The quality of articles was assessed by using the risk of bias tool. RESULTS: Sixteen articles were used for this review. The prevalence for depressive symptoms in perimenopausal women is higher than in premenopausal women. The overall data also suggest that depressive symptoms may be more prevalent in postmenopausal women than in premenopausal women. Studies reported sociodemographic, physical, psychological, cultural and sexual risk factors for depressive symptoms in middle-aged women. Risk of bias for a majority of the studies conducted in the Middle Eastern region on depression in midlife was moderate. CONCLUSION: Consistent with other areas in the world, midlife women in the Middle East region are at higher risk for depression due to the presence of different factors. High-quality longitudinal studies of representative samples, using validated questionnaires, are needed to provide more accurate prevalence data and the association between menopause and menopausal symptoms in women in the Middle East.

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Atherogenic Lipoprotein Subfractions and Carotid Atherosclerosis in Menopausal Women.

Iannuzzi A, Gentile M, Iannuzzo G, Covetti G, Panico C, Mattiello A, La Fata E, D'Elia L, De Michele M, Rubba P.

The aim of the study was to evaluate the relationship between cholesterol contained in very-low-density lipoproteins (VLDL-C), intermediate-density lipoproteins (IDL-C), low-density lipoproteins, high-density lipoproteins, and carotid intima-media thickness (cIMT) and carotid plaques in 228 postmenopausal women (63.1 ± 8.2 years) who participated in the ATENA Project and underwent clinical, biochemical (including the assay of lipoproteins using the Lipoprint system), and carotid ultrasound tests. Very-low-density lipoprotein cholesterol had a statistically significant linear association with cIMT ($P < .001$), which remained significant after adjustment for age, smoking, systolic blood pressure, glucose, and body mass index ($r2 = .20, P < .05$). Higher concentrations of IDL-C and cholesterol contained in triglyceride-rich lipoproteins (TRL-C, ie, VLDL-C + IDL-C) were associated with plaques in the common carotid (tertile III/tertile I: odds ratio [OR] = 2.52, 95% confidence interval [CI] = 1.21-5.32, $P < .02$; OR = 2.30, 95% CI = 1.05-5.01, $P < .05$, respectively), after adjustment for main cardiovascular risk factors. In conclusion, high concentrations of VLDL-C and TRL-C are independently associated with the presence of carotid plaques. Their assay represents a useful tool for improving our knowledge on the role of different classes of lipoproteins in atherosclerosis.

Women's attractiveness is linked to expected age at menopause.

Bovet J, Barkat-Defradas M, Durand V, Faurie C, Raymond M.

A great number of studies have shown that features linked to immediate fertility explain a large part of the variance in female attractiveness. This is consistent with an evolutionary perspective, as men are expected to prefer females at the age at which fertility peaks (at least for short-term relationships) in order to increase their reproductive success. However, for long-term relationships, a high residual reproductive value (the expected future reproductive output, linked to age at menopause) becomes relevant as well. In that case, young age AND late menopause are expected to be preferred by men. However, the extent to which facial features provide cues to the likely age at menopause has never been investigated so far. Here, we show that expected age at menopause is linked to facial attractiveness of young women. As age at menopause is heritable, we used the mother's age at menopause as a proxy for her daughter's expected age of menopause. We found that men judged faces of women with a later expected age at menopause as more attractive than those of women with an earlier expected age at menopause. This result holds when age, cues of immediate fertility and facial ageing were controlled for. Additionally, we found that the expected age at menopause was not correlated with any of the other variables considered (including immediate fertility cues and facial ageing). Our results show the existence of a new correlate of women's facial attractiveness, expected age at menopause, which is independent from immediate fertility cues and facial ageing.

A Pilot Study of a Topical Intervention for Treatment of Female Sexual Dysfunction.

Gomaa AA, Abdel Aziz NM, Thabet RH, Fouly HA, Altellawy SH, Gomaa GA.

PURPOSE/BACKGROUND: Many investigators reported that pharmacological treatment of female sexual dysfunction (FSD) has been a promising field yet to be explored. The purpose of this pilot study was to investigate the efficacy and safety of a topical cream containing small concentrations of three vasodilators with different mechanisms of action in treating FSD. METHODS: In this randomized, controlled pilot trial, premenopausal (n = 30) and postmenopausal (n = 30) cases of 21- to 62-year age range with FSD were allocated randomly into 15 given placebo

or 15 given active cream in each group. The women included had FSD for more than a 6-month duration and a total score of Female Sexual Distress Scale-Revised of at least 15. Assessing sexual function by measuring female sexual function index (FSFI) during five clinic visits, one at the end of baseline week and at the end of each week of the 4-week treatment period. The primary end point was changed from baseline FSFI total scores to week 4 treatment. Secondary end point included the changes from baseline arousal, desire, orgasm, and satisfaction scores to week 4 treatment. FINDINGS/RESULTS: The sexual problem reported by patients was orgasmic or/and arousal disorders. In premenopausal cases, active cream led to a high significant increase in mean change FSFI total score from the baseline to week 4 compared with placebo (1.7 ± 1.886 vs 13.35 ± 4.646, respectively; $P < 0.0001$). Greater improvement of mean change of orgasm and arousal domain score was also observed (0.3 ± 0.45 and 0.35 ± 0.39 vs. 2.66 ± 0.63 and 1.87 ± 0.168, respectively; $P < 0.0001$). In postmenopausal cases, there were significantly greater improvements with active cream in all sexual functions compared with placebo cream ($P < 0.0001$). In triple cream, mean change of FSFI total score, orgasm domain score, and arousal score domain were 14.85 ± 6.33, 1.87 ± 0.168 and 2.66 ± 1.182, whereas in the placebo cream, they were 1.54 ± 2.1, 0.7 ± 0.76 and 0.22 ± 0.44, respectively. Meanwhile, orgasm scores increased significantly after the use of placebo cream. No serious adverse effects were reported during treatment. IMPLICATIONS/CONCLUSIONS: The results of the pilot trial suggest that topical cream containing small concentrations of three vasodilators may act synergistically, and was effective in improving arousal, orgasmic, and satisfaction disorder with a safer profile for premenopausal and postmenopausal women with FSD. Further studies are recommended to be conducted using a large number of nondepressive and depressive patients.

The risks of avoiding hormone replacement therapy during menopause: impair the quality of life

Blümel JE, Arteaga E.

Menopause is associated with several symptoms which, if they reach certain intensity, can severely impair the quality of life. Overall, 90.9% of Latin American women will have at least one climacteric symptom and in 25%, these will be severe. Musculoskeletal pain, physical and mental fatigue and depressed mood are the most common climacteric symptoms. Dyspareunia, mood disorders and irritability can significantly alter female sexuality. Hot flashes are the symptoms most frequently related to menopause by both physicians and patients. However, it is one of the less common menopausal symptoms. This symptom reflects the neurochemical brain disorders caused by estrogen deficiency. The central nervous system (CNS) is also involved in changes of body composition leading to higher adipose tissue accumulation during climacterium, deteriorating quality of life and increasing the risk for chronic non-transmittable diseases. Menopausal discomfort also overloads health systems increasing the demand for medical services and decreasing productivity by labor absenteeism. Hormone therapy of menopause (HTM) decreases menopausal symptoms and improves quality of life. If we do not prescribe HTM to those women who need it, we could deprive them from several potential health benefits.