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Baseline age and time to major fracture in younger postmenopausal women
Younger postmenopausal women without osteoporosis on a first bone density test were very unlikely to sustain a major osteoporotic fracture before age 65.

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Does menopausal hormone therapy reduce myocardial infarction risk if initiated early after menopause? A population-based case-control study
Germán D. Carrasquilla, MD, Anita Berglund, PhD, Bruna Gigante, MD, PhD, Brit-Marie Landgren, MD, PhD, Ulf de Faire, MD, PhD, Johan Hallqvist, MD, PhD, and Karin Leander, PhD
The SHEEP (Stockholm Heart Epidemiology Program) is a large population-based case-control study, where neither the early initiation of menopausal hormone therapy in relation to the onset of menopause nor hormone therapy duration was significantly associated with myocardial infarction risk.

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Effects of estrogen and venlafaxine on menopause-related quality of life in healthy postmenopausal women with hot flashes: a placebo-controlled randomized trial
Bette Caan, DrPH, Andrea Z. LaCroix, PhD, Hadine Joffe, MD, MSc, Katherine A. Guthrie, PhD, Joseph C. Larson, MS, Janet S. Carpenter, PhD, RN, FAAN, Lee S. Cohen, MD, Ellen W. Freeman, PhD, JoAnn E. Manson, MD, DrPH, Katherine Newton, PhD, Susan Reed, MD, MPH, Kathy Rexrode, MD, MPH, Jan Shifren, MD, Barbara Sternfeld, PhD, and Kris Ensrud, MD
Treatment with both estradiol and venlafaxine resulted in significantly greater improvement in overall quality of life. Estrogen had beneficial treatment effects specifically in vasomotor, physical, and sexual symptoms, while venlafaxine benefits were observed most strongly in the psychosocial domain.

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Diagnostic methods for fast-track identification of endometrial cancer in women with postmenopausal bleeding and endometrial thickness greater than 5 mm
Margit Dueholm, MD, Edvard Marinovskij, MD, Estrid Stær Hansen, MD, Charlotte Möller, MD, and Gitte Ørtoft, MD
Endometrial pattern evaluated with transvaginal ultrasound, and gel infusion sonography is a fast and efficient first-line diagnostic tool that outperforms endometrial sampling in women with postmenopausal bleeding and endometrial thickness ≥ 5mm. A fast-track diagnostic setup based on pattern recognition is presented.

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North Central Cancer Treatment Group N10C2 (Alliance): a double-blind placebo-controlled study of magnesium supplements to reduce menopausal hot flashes
Haeseong Park, MD, MPH, Rui Qin, PhD, Thomas J. Smith, MD, Pamela J. Atherton, MS, Debra L. Barton, PhD, RN, Keren Sturtz, MD, Shaker R. Dakhil, MD, Daniel M. Anderson, MD, Kathleen Flynn, RN, Suneetha Puttasavaiah, BSc, BA, Nguyet Anh Le-Lindqwister, MD, Gilbert D.A. Padula, MD, and Charles L. Loprinzi, MD
Despite reasonable pilot data suggesting that magnesium oxide would decrease hot flashes, this double-blind, placebo-controlled, randomized trial did not support this contention.
Hormone therapy after uterine cervical cancer treatment: a Swedish population-based study

Ása Hallqvist Everhof, MD, Tommy Nyberg, MSc, Karin Bergmark, MD, PhD, Anna Citarella, PhD, Angelique Flöter Rädestad, MD, PhD, Angelica Lindén Hirschberg, MD, PhD, and Karin E. Smedby, MD, PhD

Less than half of cervical cancer survivors in early menopause due to oophorectomy or radiotherapy used hormone therapy at a recommended dose and the use decreased during time of follow-up.

Effects of conjugated estrogens/bazedoxifene on lipid and coagulation variables: a randomized placebo- and active-controlled trial

Sven O. Skouby, MD, DMSc, Kaijie Pan, MS, John R. Thompson, PhD, Barry S. Komm, PhD, and Sebastian Mirkin, MD

Conjugated estrogens/bazedoxifene had largely favorable effects on lipid profile and small but significantly positive effects on haemostatic variables in this secondary analysis from the phase 3 SMART-5 trial. At 12 months, rates of cardiovascular and venous thromboembolic events were similar to placebo.

Reduction in menopause-related symptoms associated with use of a noninvasive neurotechnology for autocalibration of neural oscillations

Charles H. Tegeler, MD, Catherine L. Tegeler, BS, Jared F. Cook, MA, Sung W. Lee, MD, MSc, and Nicholas M. Pajewski, PhD

Hot flash frequency and severity, symptoms of insomnia and depression, and temporal high-frequency brain electrical activity decrease after HiRes Resonance-based Electroencephalographic Mirroring.

Pregnancy-induced hypertension is associated with an increase in the prevalence of cardiovascular disease risk factors in Japanese women

Kazushi Watanabe, MD, Chiharu Kimura, MD, Ai Iwasaki, MD, Toshitaka Mori, MD, Hiroshi Matsushita, MD, Koichi Shinohara, MD, Akihiko Wakatsuki, MD, Masahiko Gohsho, PhD, and Ichiro Miyano, MD

This study aimed to assess the association between pregnancy induced hypertension (PIH) and the prevalence of cardiovascular diseases risk factors in later life in Japanese women.

Disability and multimorbidity in women older than 50 years: a population-based household survey

Luiza Borges Aguiar, PhT, Luiz Francisco Baccaro, MD, PhD, Vanessa de Souza Santos Machado, MD, PhD, Aarão Mendes Pinto-Neto, MD, PhD, and Lúcia Costa-Paiva, MD, PhD

In this study, the prevalence of disability was high and the results have improved understanding of the factors associated with disability in postmenopausal women and may help identify those who need multidisciplinary support to reduce the effects on quality of life.
Prevalence of nonalcoholic fatty liver disease and its metabolic risk factors in women of different ages and body mass index
Zhongli Wang, MD, PhD, Ming Xu, MD, Zhengguo Hu, MD, and Umid Kumar Shrestha, MD, PhD

The study shows that non-alcoholic fatty liver disease (NAFLD) is highly prevalent in obese and postmenopausal women. The prevalence of non-alcoholic steatohepatitis with advanced fibrosis is estimated to be considerably increased in obese and postmenopausal women with NAFLD.

Review Article

Treatment of chronic insomnia disorder in menopause: evaluation of literature
Hrayr Attarian, MD, Helena Hachul, MD, PhD, Thomas Guttsuo, MD, and Barbara Phillips, MD, MPH

Treating comorbid obstructive sleep apnea and restless legs syndrome are first line interventions for chronic insomnia and clinical trials of specific pharmacological and non pharmacological interventions suffer from lack of uniformity.