NAMS in the News 2016
Menopause in the News

“Exercise during menopause could reduce hot flashes, study says”

By Carina Storrs, Special to CNN

“...great support showing that being sedentary is not only not good for your health, it is not good for your menopause symptoms,’ said Dr. JoAnn Pinkerton, executive director of The North American Menopause Society”
Menopause in the News

10 Myths About Menopause

“Menopause can seem scary—it might be the biggest change your body has gone through since pregnancy or even puberty. But there’s no reason to be intimidated. You can turn these into the best years yet by putting your mind at ease. A good place to start: Read on to hear experts clear up the biggest misconceptions about menopause.”

“...is all about the ovary fluctuating’ says JoAnn Pinkerton, executive director at The North American Menopause Society.”
Menopause in the News

“Regular physical activity reduces the risk of breast and colon cancer, dementia, heart attacks, stroke, depression; loss of lean muscle mass, and bone loss, and improves immune system function,’ said JoAnn Pinkerton, executive director for The North American Menopause Society.”
“Overall, women taking the daily DHEA suppository improved more than the placebo group on measures of dryness and thinning of the vaginal lining, the researchers reported in *Menopause: The Journal of The North American Menopause Society.*”
Menopause in the News

"Intervention for women at risk or who are developing metabolic syndrome should not wait until 50 or postmenopause,’ said JoAnn Pinkerton, executive director of The North American Menopause Society.

Risk factors for heart disease increase before menopause

"Intervention for women at risk or who are developing metabolic syndrome should not wait until 50 or postmenopause,” she said. "We need to start looking at women in the 40s before they hit those hormonal fluctuations.”
Menopause in the News

“Reliable online sources are the site for The North American Menopause Society (NAMS), where you will find a consumer portal.”
Menopause in the News

Endocrinology Advisor

“The finding that both shorter and longer reproductive durations were associated with risk of diabetes has important implications for women with early or late menopause,” stated JoAnn Pinkerton, executive director of The North American Menopause Society.”
“Women may see a worsening of their migraines as early as 42 to 47 years old if they are going to have an average-age menopause,’ said The North American Menopause Society executive director Dr. JoAnn Pinkerton.”
Menopause in the News

“[This study shows the benefit of counseling women at risk of diagnosis with fatty liver disease about the benefits of increased physical activity,’ JoAnn Pinkerton, executive director of The North American Menopause Society.”]
“Sometimes, women need both vaginal estrogen therapy and work with vaginal dilators to stretch the vagina,’ says JoAnn Pinkerton, executive director of The North American Menopause Society (NAMS)”
Menopause in the News

Physical therapy cuts urine leaks dramatically for women with osteoporosis

Adapted Media Release
Published: Wednesday 17 February 2016

After menopause, women with osteoporosis struggle more with urinary incontinence than women with healthy bones do. But physical therapy that includes pelvic floor muscle training can produce dramatic improvements, shows a study published online in Menopause, the journal of the North American Menopause Society. The study is the first-ever randomized, controlled trial of physical therapy for these urinary troubles in postmenopausal women with osteoporosis or low bone mass.

The researchers from the BC Women’s Hospital & Health Centre in Vancouver, British Columbia, and the University of Montreal, Quebec, recruited 48 women age 55 and older from an osteoporosis clinic and the waitlist for a continence clinic. All the women had gone through menopause and had incontinence and osteoporosis or low bone density. Incontinence included stress incontinence.

Three months after the study began, the women who underwent physical therapy enjoyed a dramatic 75% reduction in urine leaks, whereas the other women did not improve. The physical therapy group also had significantly better results on the incontinence questionnaires. One year later, the women who got physical therapy still enjoyed the 75% reduction in leak episodes, whereas the other women got worse. The physical therapy group also had better pad test results and maintained better scores on one of the incontinence questionnaires.

No one knows why women with osteoporosis after menopause have worse problems with incontinence than those who don’t have osteoporosis. But it is crucial for them to have effective treatment for incontinence.

As NAMS Executive Director JoAnn V. Pinkerton, MD, NCMP, points out, “Many women with incontinence find themselves limiting physical activity out of fears of leakage. But women with bone loss or at risk for bone loss need strength training in addition to adequate calcium and vitamin D to prevent further bone loss and decrease fracture risk.”

Dr. Pinkerton finds this study particularly important for clinical care of these women because of the sustained, long-term improvement in continence with physical therapy in the group of postmenopausal women who need treatment the most—those who already have bone loss and need physical activity to improve their bone density.

“Women with bone loss or at risk for bone loss need strength training in addition to adequate calcium and vitamin D to prevent further bone loss and decrease fracture risk, said NAMS executive director JoAnn Pinkerton”
Menopause in the News

Blood clot risk lower for estrogen-only, transdermal, and vaginal estrogen at menopause

March 30, 2016

A Swedish population study is helping answer lingering questions about hormone therapy safety. Published online today in Menopause, the journal of The North American Menopause Society, the study shows that estrogen-only therapy carries a lower risk of blood clots than combined estrogen-progestogen therapy, but there is no significantly increased risk of clots with combination therapy when the estrogen is transdermal, and vaginal estrogen doesn’t raise the risk at all.

Blood clots, or "venous thromboembolism" (VTE), can have serious consequences, such as pulmonary embolism (blood clots to the lung). The risk of having them is known to be higher in women who use hormone therapy. In 2002, the Women's Health Initiative (WHI) showed that oral hormone therapy at a standard dose, whether estrogen alone or estrogen combined with progestogen, increased the risk of...
Menopause in the News

“Instead of just thinking hot flashes as a nuisance, we need to look at them as a marker,’ said JoAnn Pinkerton, executive director of The North American Menopause Society.”
Menopause in the News

Managing Menopause: Are the WHI Results Being Misunderstood?

JoAnn E. Manson, MD, DrPH

Disclosures | March 03, 2016

Hello. This is Dr JoAnn Manson, professor of medicine at Harvard Medical School and Brigham and Women's Hospital. I would like to talk with you about a prospective piece that I and my colleague, Dr Andrew Kaunitz, have recently published in the New England Journal of Medicine, titled "Menopause Management: Getting Clinical Care Back on Track." We wrote this article to address ongoing confusion about the Women's Health Initiative (WHI) and what it did and did not address. There has been continued misunderstanding about some of the WHI findings.

The WHI was designed to address a very specific question: What is the balance of benefits and risks when menopausal hormone therapy is initiated for the express purpose of trying to prevent chronic disease in postmenopausal women across a broad range of ages, including many women in their 60s and 70s? At the time when the WHI was initiated, it was becoming an increasingly common practice to start hormone therapy in women more than a decade past menopause for the purpose of trying to prevent heart disease, cognitive decline, and many other chronic diseases. The WHI put the brakes on...
Menopause in the News

The New York Times

Treating Incontinence in Women with Osteoporosis

By Roni Caryn Rabin  February 24, 2016 11:58 am

Many women with osteoporosis also suffer from incontinence. Now a Canadian clinical trial has found that simple pelvic floor muscle training can significantly reduce leakage episodes.

Women with osteoporosis are at risk for incontinence because fractures of the lumbar spine can make them slump, putting more pressure on the pelvic floor, said Chantale Dumoulin, a professor in the faculty of medicine at the University of Montreal and senior author of the study, published online earlier this month in Menopause: The Journal of the North American Menopause Society.

In the study, 46 post-menopausal women with osteoporosis or low bone density and occasional incontinence reduced their leakage episodes by 75 percent after just 12 weekly sessions of physical therapy. A comparison group of similar women who did not get physical therapy saw no improvement, the study found.
Menopause in the News

“The Women's Health Initiative provides a unique setting to evaluate the associations between reproductive characteristics and diabetes ...” says JoAnn Pinkerton, executive director of The North American Menopause Society.
Menopause in the News

Women with later start to periods, menopause more likely to reach age 90

By Andrew M. Seaman

(Reuters Health) - Women with later menarche and later menopause are more likely to reach age 90 than those whose reproductive milestones come at earlier ages, suggests a new study.

"People have always wondered whether the timing of reproductive events affect longevity, but no study to date has evaluated that relationship," said lead author Aladdin Shadyab, of the University of California, San Diego School of Medicine.

The research team used data collected from 16,251 participants in the Women's Health Initiative, starting between 1993 and 1996 and continuing until August 2014.

All the women were born before September 1924; 8,892, or 55%, survived to age 90.

Women who were at least 12 years old at menarche were about 9% more likely to reach age 90 than those who were younger.

And women who were at least 50 when their periods stopped were about 20% more likely to reach age 90 than women who entered menopause before age 40. This was true whether menopause was natural or surgical.

A longer reproductive lifespan was also tied to longevity. Women who menstruated for more than 40 years were 13% more likely to reach age 90 than those who had less than 33 reproductive years, the authors reported in a paper released July 27 by The Journal Menopause.”
Menopause in the News

Suppository Eases Vaginal Dryness in Small Study

JANUARY 05, 2016 2:00 PM
TUESDAY, Jan. 5, 2016 (HealthDay News) -- For postmenopausal women, suppositories containing the hormone DHEA may reduce vaginal dryness, discomfort and pain during sex without raising overall estrogen levels, researchers report.

DHEA is an anti-aging hormone produced by both women and men. In supplement form, it is used to improve thinking skills in older people. But DHEA is also a hormonal precursor of estrogen and testosterone, so some women who have low levels of certain hormones take it to improve well-being and sexuality, according to the U.S. National Library of Medicine.

"Although this medication is considered 'hormonal,' the mechanism appears to be primarily local with minimal side effects beyond vaginal discharge from the suppository," said Dr. JoAnn Pinkerton, executive director of the North American Menopause Society (NAMS).

Generally, without hormonal treatment after menopause, vaginal tissues shrink and produce less moisture, leading to discomfort during sex, and vaginal and urinary problems, according to background information in the study.

In this phase 3 clinical trial, 325 women who used the DHEA suppository daily saw significant improvements in vaginal dryness after 12 weeks, compared to 157 women using a placebo.

"Its action seems to be entirely within [vaginal] cells, and no significant amount of sex hormone gets released into the circulation," Pinkerton said in a society news release.

"That means that intravaginal DHEA avoids the raised hormone levels that might stimulate breast tissue or the lining of the uterus, which are concerns for women at risk of estrogen-sensitive cancers, or cancer recurrence, in these organs," she said.

The findings were published online Jan. 5 in the journal Menopause, a NAMS publication.

One woman's health expert noted that DHEA may be a better option than estrogen treatments for some women.

“Although this medication is considered 'hormonal,' the mechanism appears to be primarily local with minimal side effects beyond vaginal discharge from the suppository,' said Dr. JoAnn Pinkerton, executive director of The North American Menopause Society (NAMS).”
Menopause in the News

“A large study published in *Menopause*, examined the lifestyles of 6,000 middle-aged Hispanic women in Latin America, and determined that a sedentary lifestyle was linked to greater incidences of depression in menopause, anxiety, insomnia, and obesity.”
Menopause in the News

“As your estrogen levels decline during perimenopause, expect night sweats, hot flashes and vaginal dryness. And as progesterone levels fall, your periods may be irregular, heavier and longer, according to The North American Menopause Society.”
“We now know that hormone therapy has more benefits than risks for the majority of women under age 60, or who are within 10 years of menopause,” says JoAnn Pinkerton, executive director of The North American Menopause Society.”
"While stretching before bed isn’t a bad idea, it is impossible to tell if the positive effect on menopausal and depressive symptoms was due to the stretching, the increased movement, or not doing whatever they normally do during the 10 minutes before bed,’ said JoAnn Pinkerton, executive director of The North American Menopause Society.”
Menopause in the News

“Vaginal estrogen contains a black box warning, which tends to deter cancer survivors from its use, though The North American Menopause Society (NAMS) is in the process of trying to get that changed.”
Menopause in the News

Can grandkids keep Alzheimer's at bay?

BY: Anne State
POSTED: 9:08 PM, Mar 29, 2016

SAN DIEGO - Grandchildren may be a possible weapon in the fight against Alzheimer's disease.

A study in The Journal of the North American Menopause Society says grandmothers who babysit their grandkids once a week had “the highest cognitive scores.”

San Diego grandfather, Ernie McCray, has no trouble believing the findings.

“I just think being active is the key to anything,” he said.

McCray, a former principal with San Diego City Schools, was watching his grandson, Lyric, at Balboa Park.

Two-year-old Lyric loves going up and down the slide at the playground known as “Toddler’s Park.”

McCray watches him from the sidelines.

“A study in The Journal of The North American Menopause Society says grandmothers who babysit their grandkids once a week had ‘the highest cognitive scores.'”
Menopause: Not all hot flashes are created equal

The study was published in the July issue of *Menopause: The Journal of The North American Menopause Society.*
Menopause in the News

“While it is certainly less likely, ‘some women are going to break through and get pregnant,’ says Nanette Santoro, a member of the board of The North American Menopause Society.”
Menopause in the News

EndocrinologyAdvisor

DHEA Suppository May Improve Vaginal Symptoms of Menopause

“Although this medication is considered 'hormonal,' the mechanism appears to be primarily local with minimal side effects beyond vaginal discharge from the suppository,’ JoAnn Pinkerton, executive director of The North American Menopause Society”
Menopause in the News

"Recently, The North American Menopause Society (NAMS) and the International Society for the Study of Women’s Sexual Health (ISSWSH) endorsed using the term genitourinary syndrome of menopause (GSM) instead of using VVA."
Menopause in the News

Grandma’s brain benefits from time with the kids

Finally, we don’t have to feel guilty for dropping the kids off at grandma’s house. We’re not exploiting her for free babysitting; we’re helping keep her brain healthy — just ask a doctor.

A new study from real doctors shows that post-menopausal women who take care of grandkids have a lower risk of developing Alzheimer’s disease and other cognitive disorders. The brilliant research we plan on citing all the time was published in Menopause, The Journal of The North American Menopause Society. Parents everywhere will be sharing this new info when calmly explaining why the kids are going to grandma’s house again this weekend.

So how did we find out this magical piece of information we plan on using regularly? It’s all thanks to the researchers at the Women’s Healthy Aging Project in Australia. They tested 186 post-menopausal ladies, most of whom are grandmothers, with three different cognitive tests. The results came in and showed that the ladies who helped with childcare at least one day a week scored better on the brain tests.

We know what you’re thinking, “what will I do with all this extra time thanks to grandma’s free babysitting?” Aimlessly stroll the aisles of Target, finally try out that spin class, or catch up on the hot mess that is Bachelor in Paradise are just a few ideas that come to mind. But don’t get too excited, mamas and papas, because there’s a catch. Apparently, five or more days a week with the kids isn’t so great for grandma’s brain and ends up lowering her scores on those fancy cognitive tests.

In a nutshell, your kids will drive her as batty as they drive you if she spends too much time caring for them.

Plus, since grandmas are people too they don’t exactly love being treated like an unpaid, live-in nanny. “The researchers also found the grandmothers who helped out more often felt their own children — the parents of the grandkids — were too demanding of their time,” CBS News explained. “The researchers suggest that feeling overextended dampened the mood of those grandmothers, which impacted brain function.” Grandmas have lives too, mamas? Let’s not go overboard.

The key to keeping grams happy and healthy is some babysitting, but not so much that you forget your kids’ names. If this highly scientific research doesn’t convince grandma to pick up a few babysitting shifts we’ve got another study for you. Researchers have shown that older people without close contact with their family and friends had a 26 percent higher death risk over a seven-year period. That’s not a grim statistic to site at all. We’re sure “we’re saving your life” will go over well the next time you try to convince her to take the kids for the day.

“A new study from real doctors shows that post-menopausal women who take care of grandkids have a lower risk of developing Alzheimer’s disease and other cognitive disorders.”

“The brilliant research we plan on citing all the time was published in Menopause, The Journal of The North American Menopause Society.”
"Estrogen fills the epithelium, or your vaginal lining, so when estrogen decreases, that vaginal lining thins out," says Wulf Utian, MD, founder and medical director for The North American Menopause Society."
Menopause in the News

“The study, partly funded by the U.S. National Institutes of Health, is scheduled for presentation Wednesday at the North American Menopause Society's annual meeting in Orlando, Fla. Research released at meetings should be considered preliminary until it appears in a peer-reviewed medical journal.”
Menopause in the News

“A Low Libido May Be More Common In Older Women Than You Think

Older women who have robust sex lives tend to enjoy lower blood pressure, fewer migraines, and a myriad other health benefits. Yet despite the perks, many older women harbor negative feelings about sex, according to a new Australian study.

Researchers at Monash University in Melbourne discovered that of the 1,548 women aged 65 to 79 involved in the study, 88 percent of those surveyed over age 70 said they have little or no sexual desire, while 15.5 percent said it causes them distress. The presence of both low desire and related distress is known as hypoactive sexual desire dysfunction (HSDD), as reported in Menopause, the journal of The North American Menopause Society (NAMS).

So what’s a possible solution? For one thing, the vaginal dryness that’s often linked to sexual discomfort — and therefore a reduced interest in sex — can be treated with low dose vaginal estrogen, senior author Susan R. Davis of Monash University in

THE HUFFINGTON POST

“Dr. JoAnn Pinkerton, NAMS executive director, said that the new Australian study demonstrates the need for healthcare providers to have ‘honest and open discussions with their patients as they age with regard to desire, mood, vaginal dryness, and pelvic floor issues to determine whether these factors are affecting a woman’s desire or ability to be sexual.”
Menopause in the News

“Dr. JoAnn Pinkerton, executive director of the North American Menopause Society, said: ‘This study additionally confirms that better communications are needed between healthcare providers and their middle-aged women patients to address sexual function concerns.’
Menopause in the News

“Indeed, other research has found that women who develop insulin resistance during perimenopause or menopause are at higher risk for these conditions also. Insulin resistance may also promote cell proliferation, thus increasing breast cancer, says Dr. JoAnn Pinkerton, MD, NCMP, Executive Director of the North American Menopause Society.”
“Dr. JoAnn Pinkerton, executive director of NAMS, said the findings confirm earlier studies that suggest estradiol serum levels affect memory in women as they transition through menopause.

‘Women often report increased forgetfulness and ‘brain fog’ as they transition into menopause,’ she told CBS News.”
Menopause in the News

"Kingsberg recommends older women find a menopause certified practitioner by using the find-a-provider tool on the website of the North American Menopause Society."

"The study, being presented at the North American Menopause Society meeting this week, asked more than 500 women aged 40 to 75 years and older, who were currently in a partnered relationship, about the quality of their sexual lives and how that impacted their relationships."

"Kingsberg recommends older women find a menopause certified practitioner by using the find-a-provider tool on the website of the North American Menopause Society."
“JoAnn V. Pinkerton, MD, Executive Director of the society said that it is important for patients to be monitored for certain risks, but not at the expense of preventing them from getting the best care possible.”
Menopause in the News

“Thinning hair happens to about half of all women by age 50, and up to 15 percent of women have unwanted hair growth on the face, according to the North American Menopause Society.”
Menopause in the News

Perimenopause Symptoms, Explained

This fertility rite of passage can be surprising, annoying, and sometimes painful. Since Judy Blume hasn’t written a book about it (yet), we’ve gone to the experts for the full details.

By Melanie Mannarino

For many of us, our fertility ends as it began, with irregular periods. You might find yourself getting up from a chair in, say, your office conference room, and feel that familiar teenage horror and total certainty that you just bled right through your clothes. Afterward, once you’ve heeded to the nearest restroom to clean up as best you can, you’ll have one thought: “Why didn’t anyone warn me about this?”

Making the transition

Welcome to perimenopause. (Sorry we couldn’t warn you in time—but please share with friends so they’ll be prepared.) That’s the name for the transition a woman goes through as her ovaries start shutting down their baby-making operation, causing the hormones they produce—estrogen, progesterone, and testosterone—to fluctuate and decline. As they do, you might notice heavy bleeding and other symptoms like hot flashes, intense breast tenderness, longer/shorter menstrual cycles, acne, loss of libido and/or vaginal dryness, extreme PMS, anxiety, depression and trouble sleeping. (You see why no one wants to talk about it.)

The hot flashes of menopause capture all the attention, but the perimenopause transition is much harder,” says JoAnn V. Pinkerton, MD, NCMP, executive director of the North American Menopause Society and Professor of Obstetrics and Gynecology at the University of Virginia. That heavy flow? “We call it opening the floodgates,” Pinkerton says. “As estrogen surges you bleed very heavy and often unpredictably—and unexpectedly—then it slows back down again.”
Menopause in the News

“This study highlights the need for health care providers to screen for an insomnia disorder in the highest-risk groups, and to be knowledgeable about the various interventions,” JoAnn V. Pinkerton, MD, NCMP, executive director of NAMS, added in the release.”
Menopause in the News

“The North American Menopause Society, the National Institute for Health and Care Excellence, the Endocrine Society and the International Menopause Society all released consensus and position statements to better guide women on MHT.”
Menopause in the News

“We have estrogen receptors in two brain areas that control memory, and when there’s less estrogen, there are structural changes in those areas,” explains Pauline Maki, PhD, a professor of psychiatry and psychology and the director of the women’s mental health research program at the University of Illinois at Chicago, and president of the North American Menopause Society.”