



# Menopause

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CME

Continuing Medical Education.

SDC

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**The role of nursing with the journal *Menopause* and NAMS over the last 25 years: contributions and collaboration**

Diane T. Pace, PhD, APRN, FNP-BC, NCMP, FAANP, FAAN,  
Lisa Astalos Chism, DNP, APRN, BC, NCMP, CSC, FAANP, and  
Linda Kelly, DNP, CNP, NCMP

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## Consensus Recommendations

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### **Management of genitourinary syndrome of menopause in women with or at high risk for breast cancer: consensus recommendations from The North American Menopause Society and The International Society for the Study of Women's Sexual Health**

Stephanie S. Faubion, MD, FACP, NCMP, IF, Lisa C. Larkin, MD, FACP, NCMP, IF, Cynthia A. Stuenkel, MD, NCMP, Gloria A. Bachmann, MD, Lisa A. Chism, DNP, APRN, BC, NCMP, CSC, FAANP, Risa Kagan, MD, FACOG, CCD, NCMP, Andrew M. Kaunitz, MD, FACOG, NCMP, Michael L. Krychman, MD, FACOG, MPH, IF, Sharon J. Parish, MD, IF, NCMP, Ann H. Partridge, MD, MPH, JoAnn V. Pinkerton, MD, FACOG, NCMP, Tami S. Rowen, MD, MS, Marla Shapiro, CM, MDCM, CCFP, MHSC, FRCPC, FCFP, NCMP, James A. Simon, MD, CCD, NCMP, IF, FACOG, Shari B. Goldfarb, MD, and Sheryl A. Kingsberg, PhD

*Genitourinary syndrome of menopause is more prevalent in survivors of breast cancer, is commonly undiagnosed and untreated, and may have early onset because of cancer treatments or risk-reducing strategies.*

## CME Exam

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### **NAMS CME activity self-assessment examination**

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### **Trends in oral and vaginally administered estrogen use among US women 50 years of age or older with commercial health insurance**

Joel L. Weissfeld, MD, MPH, Wei Liu, PhD, Corinne Woods, RPh, MPH, Rongmei Zhang, PhD, Jie Li, PhD, MBBS, Theresa H. van der Vlugt, MD, MPH, and Shelley R. Slaughter, MD, PhD  
*Analyses of prescription claims between 2006 and 2015 for US women 50 years-of age and older described an age-specific decline in the use of vaginal rings and inserts, in the face of steadily declining oral estrogen use and stable transdermal patch estrogen use.*

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### **Constipation and diarrhea during the menopause transition and early postmenopause: observations from the Seattle Midlife Women's Health Study**

Nini G.L. Callan, ND, MS, Ellen S. Mitchell, PhD, RN, Margaret M. Heitkemper, PhD, RN, FAAN, and Nancy F. Woods, PhD, RN, FAAN

*This current study assesses the relationship of constipation and diarrhea severity in the Seattle Midlife Women's Health Study population with age, menopausal transition stage, reproductive biomarkers, stress-related biomarkers, and stress-related perceptions.*

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### **Hormone therapy and urine protein excretion: a multiracial cohort study, systematic review, and meta-analysis**

Andrea G. Kattah, MD, MSc, Maria L.G. Suarez, MD, Natasa Milic, MD, PhD, Kejal Kantarci, MD, Burcu Zeydan, MD, Thomas Mosley, PhD, Stephen T. Turner, MD, Erin B. Ware, PhD, MPH, Sharon L.R. Kardina, PhD, and Vesna D. Garovic, MD, PhD

*In this large, multi-racial cohort study, women who used hormone therapy had a reduced risk for microalbuminuria after adjusting for traditional risk factors for kidney disease, including diabetes and hypertension.*

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**History of vasomotor symptoms, extent of coronary artery disease, and clinical outcomes after acute coronary syndrome in postmenopausal women**

Luca A. Ferri, MD, Nuccia Morici, MD, Giorgio Bassanelli, MD, Nicoletta Franco, MD, Leonardo Misuraca, MD, Laura Lenatti, MD, Emilia Lo Jacono, MD, Chiara Leuzzi, MD, Elena Corrada, MD, Tiziana C. Aranzulla, MD, Delia Colombo, MD, Angelo Cagnacci, MD, Francesco Prati, MD, Stefano Savonitto, MD, and LADIES ACS Investigators

*The objective of this study was to investigate the relation between vasomotor symptoms and angiographic extent of coronary artery disease.*

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**Hormonal, metabolic, and endometrial safety of testosterone vaginal cream versus estrogens for the treatment of vulvovaginal atrophy in postmenopausal women: a randomized, placebo-controlled study**

Tatiane Fernandes, MD, Adriana O. Pedro, MD, PhD, Luiz F. Baccaro, MD, PhD, and Lucia H. Costa-Paiva, MD, PhD

*Intravaginal testosterone provides efficacy and safety for postmenopausal vaginal atrophy treatment.*

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**Association between HIV status and psychological symptoms in perimenopausal women**

Sara E. Looby, PhD, Christina Psaros, PhD, Greer Raggio, PhD, Corinne Rivard, BA, Laura Smeaton, MS, Jan Shifren, MD, Steven Grinspoon, MD, and Hadine Joffe, MD, MSc  
*Perimenopausal HIV-infected women, with relatively stable HIV-infection, have greater depressive and anxiety symptoms compared to carefully matched non-HIV-infected women, and these symptom levels remain significantly elevated compared to non-HIV-infected women after one-year of follow-up. An association of hot flash severity and both depression and anxiety scores was observed.*

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**Fractional microablative CO<sub>2</sub> laser in breast cancer survivors affected by iatrogenic vulvovaginal atrophy after failure of nonestrogenic local treatments: a retrospective study**

Tiziana Pagano, MD, Pasquale De Rosa, MD, Roberta Vallone, MD, Francesco Schettini, MD, Grazia Arpino, MD, PhD, Mario Giuliano, MD, PhD, Rossella Lauria, MD, Irene De Santo, MD, Alessandro Conforti, MD, PhD, Alessandra Gallo, MD, Giovanni Nazzaro, MD, PhD, Sabino De Placido, MD, PhD, Mariavittoria Locci, MD, and Giuseppe De Placido, MD

*This study provides evidence of efficacy and tolerability for fractional microablative CO<sub>2</sub> laser as treatment for vulvovaginal atrophy induced by systemic therapies for breast cancer.*

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**Long-term follow-up of bulking agents for stress urinary incontinence in older patients**

Francesco Plotti, MD, Roberto Montera, MD, Corrado Terranova, MD, Daniela Luvero, MD, Francesca Marrocco, MD, Andrea Miranda, MD, Alessandra Gatti, MD, Carlo De Cicco Nardone, MD, Roberto Angioli, MD, and Giuseppe Scaletta, MD

*Bulking agent implementation is an effective treatment for people with intrinsic sphincter deficiency and is a valid alternative to more invasive surgeries in elderly patients.*

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**Comparisons of low-intensity versus moderate-intensity combined aerobic and resistance training on body composition, muscle strength, and functional performance in older women**

Yoko Shiotsu, MS, and Masahiko Yanagita, PhD

*Preliminary findings suggest that combined aerobic and low- or moderate-intensity resistance training increase muscle strength and gait, regardless of exercise order.*

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**Association between insulin resistance and the magnetic resonance spectroscopy-determined marrow fat fraction in nondiabetic postmenopausal women**

Guanwu Li, MD, Zheng Xu, MS, Haiyang Lin, MD, Yilei Chen, BS, Xuefeng Li, BS, and Shixin Chang, MD

*Insulin resistance had a positive association with marrow adiposity and a negative association with bone density independent of body weight and other potential covariates.*

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**Prevalence of hormone therapy, factors associated with its use, and knowledge about menopause: a population-based household survey**

Poliana Pacello, MD, MSc, Luiz F. Baccaro, MD, PhD, Adriana O. Pedro, MD, PhD, and Lucia Costa-Paiva, MD, PhD

*Menopausal status, information source, surgical menopause, work interruption due to hot flashes, and knowledge about menopause were associated with hormone therapy use.*

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**Association between polycystic ovary syndrome and hot flash presentation during the midlife period**

Ophelia Yin, BA, Howard A. Zacur, MD, PhD, Jodi A. Flaws, PhD, and Mindy S. Christianson, MD

*This study found that history of polycystic ovary syndrome did not affect hot flash incidence, duration, frequency, or severity on univariate analysis or hot flash incidence on multivariate analysis. There was no difference in follicle stimulating hormone, estradiol, progesterone, or testosterone levels between the polycystic ovary syndrome cohort and the control cohort in the midlife period.*

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**Clinical Corner**

**NAMS Practice Pearl**

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**Dietary strategies for weight loss in midlife women**

Krista A. Varady, PhD

*As women go through menopause, their risk of gaining weight increases. Clinicians will generally recommend dietary change as the first step toward losing weight, but which diets work best? This Practice Pearl reviews whether certain dietary therapies are more effective than others in facilitating weight loss in postmenopausal women.*

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**Personal Perspective**

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**What's in a name: are menopausal "hot flashes" a symptom of menopause or a manifestation of neurovascular dysregulation?**

Virginia M. Miller, PhD, Juliana M. Kling, MD, MPH, Julia A. Files, MD,

Michael J. Joyner, MD, Ekta Kapoor, MD, Ann M. Moyer, MD, PhD,

Walter A. Rocca, MD, MPH, and Stephanie S. Faubion, MD

*Hot flashes as manifestations of an underlying autonomic neurovascular dysregulation are addressed.*

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#### A systematic review of intravaginal testosterone for the treatment of vulvovaginal atrophy

Robin J. Bell, MBBS, PhD, MPH, FAFPHM, Farwa Rizvi, MBBS, MPH, Rakabul M. Islam, MPH, PhD, and Susan R. Davis, MBBS, PhD, FRACP

*Available data suggests intravaginal testosterone may offer an alternate approach to treating vulvovaginal atrophy. However this systematic review shows that adequately powered double-blind placebo-controlled clinical trials of intravaginal testosterone therapy are still needed to establish both efficacy and safety.*

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### Letters to the Editor

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