Technology: Transforming the Menopause Transition
During 2017, there were many highlights and accomplishments for The North American Menopause Society (NAMS). These accomplishments are only possible through the support and generosity of our members, our donors, our grantors, and our Central Office Staff. Serving as NAMS Executive Director continues to be one of the greatest honors of my professional career.

Working together, I’m pleased to share some of the highlights of 2017 with you:

□ A major initiative of which I’m extremely proud was the finalization of the Society’s 2017 Hormone Therapy (HT) Position Statement. A panel of 23 experts (clinicians, researchers, and epidemiologists) completed an 18-month review of pertinent literature on HT, leading to publication of the statement in July 2017. The statement indicates that HT remains the most effective treatment for vasomotor symptoms and the genitourinary syndrome of menopause (GSM) and has been shown to prevent bone loss and fracture. Our statement was endorsed or supported by 34 well-respected international organizations.

□ In addition to the 2017 HT Position Statement, the expert panel also prepared a 58-page Scientific Background report that expanded on the information included in the statement. A slide set outlining the highlights of the Position Statement was also developed for our members.

□ A major educational initiative in 2017 was the NAMS comprehensive, engaging, and highly clinically relevant Annual Meeting held in Philadelphia. With the theme Technology: Transforming the Menopause Transition, the meeting was outstanding, thanks to the Scientific Program Chair, Dr. Andrew Kaunitz; his hardworking Scientific Program Committee; and all the excellent speakers they selected. As a provider accredited by the Accreditation Council for Continuing Medical Education (ACCME), NAMS continues to offer education credit for its programs.

□ The 2017 Pre-Meeting Symposium addressed Musculoskeletal Health in Postmenopausal Women: Assessment and Management of Fracture Risk and was organized by the Pre-Meeting Co-chair, Dr. Michael McClung. This high-interest topic included presentations on assessment, DXA best practices, new imaging strategies, and osteoporosis therapies.

□ We partnered with the Red Hot Mamas and the Pennsylvania Hospital to offer a live, educational event for women, Making Sense of Menopause, in advance of the Annual Meeting. The program provided comprehensive, accurate, and up-to-date information on menopause and women’s health.

□ The Society and other partners continued efforts with FDA on the issue of product labeling for low-dose vaginal estrogen. We continue to encourage FDA to consider alternate labeling that enhances patient safety by highlighting relevant cautions without an alarming boxed warning.

□ During 2017, we addressed several key issues through our publication, First to Know.

□ We encouraged a call to action for comment on the draft recommendations from the US Preventive Services Task Force (USPSTF) regarding HT for the primary prevention of chronic conditions. This important issue addressed the use of HT for relief of menopause symptoms, prevention of bone loss, and enhancing quality of life for women as they age.

□ We announced that a new long-term analysis from the Women’s Health Initiative confirmed the recommendation of the 2017 HT Position Statement that for women aged 60 years and younger and within 10 years of menopause onset, HT is safe and effective for the treatment of hot flashes, night sweats, and sleep disruption associated with menopause and reduces bone loss and fracture risk.

□ We commented on the updated guidelines from the American College of Cardiology/American Heart Association that addressed blood pressure awareness and promoted healthy lifestyle modification before the need for antihypertensive medications.

□ We issued a concern regarding the USPSTF rating of D for the use of HT for prevention of chronic disease. We indicated that such a sweeping dismissal of HT does not recognize the fact that the USPSTF overgeneralized and grouped all postmenopausal women and all hormone therapies together.

□ NAMS presented 44 recognition awards, scholarships, and prizes during the Annual Meeting. These awards acknowledge the diverse and important contributions of our members as well as provide opportunities for those in training to learn more about menopause and midlife women’s health.

□ Our Donor Cocktail Party continued to be a great success and provided a wonderful opportunity for networking and meeting new friends. Thank you to those who attended the event and to all who donated to the Society during 2017. A special thank you to Dr. Tara Allmen for her continued dedication and efforts to spearhead the Society’s fundraising efforts.

□ In 2017, Menopause marked its 24th year of publication. Two Menopause articles ranked in the Medscape Top 10 most-frequently read articles by obstetricians and gynecologists for 2016. Menopause also established its own Twitter account (@MenopauseJrnl) and promoted information on new articles.
Six Practice Pearls on the topics of cervical cancer screening, caring for the lesbian patient at midlife and beyond, restoring vaginal function in postmenopausal women with GSM, screening mammography for average-risk women, vulvar and vaginal fractional CO2 laser treatments for GSM, and dietary strategies for weight loss in midlife women were published. Each Practice Pearl offered members the opportunity to earn continuing education credits.

We continued the successful e-newsletters for our members, including the quarterly Menopause Care Updates, featuring summaries and in-depth commentaries on recent scientific articles chosen to inform and influence current clinical menopause practice. The bimonthly Menopause e-Consult continued to present questions and cases commonly seen in a menopause specialist’s practice, with recognized experts providing their opinions and practice advice.

A patient education piece, “Deciding About Hormone Therapy Use,” was developed as part of the Society’s MenoNote series. The handout simplified the information in the 2017 Position Statement. The MenoNote on vaginal dryness was also updated during 2017.

NAMS Board Member Dr. Marla Shapiro continued to lead our comprehensive video series for clinicians and women about important midlife health issues. There were 11 new videos for clinicians and 13 for consumers launched during the year.

Topics for videos included

- Contraception in Menopause
- Hormone Therapy for Women Aged 65 and Older
- Tips for Taking a Sexual History
- Sleep Disorders in Midlife
- Clinician’s Guide to Bone Drug Holidays
- Perimenopausal and Postmenopausal Bleeding
- Common Cognitive Complaints
- Hormone Therapy and Cognition
- New Treatment Options for Painful Intercourse
- Biodental Compounded Hormones

The Menopause consumer blog included guest posts from the Board and NAMS members on topics important to women, including midlife weight gain and weight loss strategies, what’s new about hot flashes, diabetes, exercise, bidoidental hormones, and sexual health. Healthline continued to rank the NAMS blog as one of the ten best menopause blogs.

The number of NAMS Certified Menopause Practitioners (NCMPs) reached an all-time high during 2017, growing to more than 1,105 healthcare providers.

Our outreach to increase awareness of NAMS as the go-to source for credible information on menopause and midlife women’s health continued. NAMS was featured in high-profile professional and consumer media outlets, including Reader’s Digest, Forbes, US News, AARP, CBS News, Today, Chicago Tribune, Health, Prevention, Los Angeles Times, and many others.

To promote the health and quality of life of all women during midlife and beyond through an understanding of menopause and healthy aging.

The NAMS Mission is being fulfilled through the work of dedicated health professionals from multiple disciplines who comprise the membership of the Society. At year-end 2017, our 2,053 members from 39 countries included primarily physicians (74%), with most being obstetricians-gynecologists or reproductive endocrinologists, followed by nurse practitioners (14%) and many other healthcare specialists and research scientists focused on the field of menopause.

NAMS 2017 MEMBERSHIP DEMOGRAPHICS

- Physicians (74%)
- Nurse Practitioners (14%)
- Pharmacists (2%)
- Researchers (2%)
- Other Nurses (6%)
- All Others (6%)
NAMS extends its sincere appreciation to the donors who have generously supported the NAMS Mission. Your contributions have touched the lives of many women. NAMS is a §501(c)(3) nonprofit scientific organization.

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Every attempt has been made to accurately list all supporters. Please accept our apologies for any errors or omissions and notify the NAMS Central Office so that we may correct our records.
NAMS Statement of Activities

For the year ended December 31, 2017 | For the year ended December 31, 2016
--- | ---
Membership Fees | $530,349 | $536,955
Contributions and Grants | 531,082 | 574,058
Meeting Fees and Exhibits | 814,147 | 721,795
Competency Exam Fees | 87,525 | 82,550
Royalty Income | 288,935 | 350,892
Sales of Educational Materials | 73,582 | 93,101
Investment/Interest Income | 152,656 | 115,944
Net Realized and Unrealized Gains/Loss on Investments | 490,743 | 165,235
Other | 30,090 | 21,130

Revenue and Support | $2,999,109 | $2,661,660

Membership Activities | $182,342 | $190,221
Educational Activities | 1,578,933 | 1,684,409
Management and General | 514,768 | 522,449
Fundraising | 145,334 | 150,163

Expenses | $2,421,377 | $2,547,242

NAMS Statement of Financial Position

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<th>December 31, 2017</th>
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<td>Cash</td>
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<td><strong>Total Liabilities and Net Assets</strong></td>
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