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WEDNESDAY, JANUARY 3, 2018**

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New Study Demonstrates Increased Risk of Heart Disease After Hysterectomy

Risk remains even if ovaries not removed; women aged younger than 35 years at time of surgery at greatest risk

CLEVELAND, Ohio (January 3, 2018)—In an effort to reduce the associated increased risk of heart disease after hysterectomy, more surgeons are opting to leave a woman’s ovaries intact. However, a new study shows that women (especially those aged younger than 35 years) having a hysterectomy with ovarian conservation are still at increased risk. Study results are published online today in *Menopause*, the journal of The North American Menopause Society (NAMS).

Hysterectomies are often the recommended treatment for women suffering from heavy menstrual bleeding and other gynecologic problems. More than 400,000 hysterectomies are performed each year in the United States, most for benign disease. Although multiple studies have previously documented an increased risk of cardiovascular disease and other chronic problems from hysterectomies involving the removal of both ovaries, few studies have focused on the health risks after the removal of only the uterus.

The article “Cardiovascular and metabolic morbidity after hysterectomy with ovarian conservation: a cohort study” details results from the nearly 22-year follow-up of more than 2,000 women who underwent hysterectomy with ovarian conservation for benign indications. The study found that these women experienced increased risks of hyperlipidemia (a high concentration of fats in the blood), hypertension, obesity, cardiac arrhythmias, and coronary artery disease. Women who underwent hysterectomy aged 35 years or younger had a 4.6-fold increased risk of congestive heart failure and a 2.5-fold increased risk of coronary artery disease.

“These study results suggest that alternative uterine-preserving treatments may need to be considered more often in lieu of hysterectomies, especially in benign situations,” says Dr. JoAnn Pinkerton, NAMS executive director. “For those women having hysterectomy, hormone therapy should be considered for added protection, because ovarian function appears to be impaired by the surgery.”

For more information about menopause and healthy aging, visit www.menopause.org.

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Founded in 1989, The North American Menopause Society (NAMS) is North America’s leading nonprofit organization dedicated to promoting the health and quality of life of all women during midlife and beyond through an understanding of menopause and healthy aging. Its multidisciplinary membership of 2,000 leaders in the field—including clinical and basic science experts from medicine, nursing, sociology, psychology, nutrition, anthropology, epidemiology, pharmacy, and education—makes NAMS uniquely qualified to serve as the definitive resource for health professionals and the public for accurate, unbiased information about menopause and healthy aging. To learn more about NAMS, visit www.menopause.org.