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Misperceptions from WHI Prevent Women from Benefitting from Hormone Therapy

New study suggests additional education needed for clinicians so women can safely get relief from hot flashes and other menopause symptoms

CLEVELAND, Ohio (October 11, 2017)—More than a decade after the Women’s Health Initiative (WHI) clinical trials, lingering misperceptions regarding hormone therapy (HT) still prevent many women from getting relief from their menopause symptoms. A new study from the University of Virginia Health System uncovers knowledge gaps of clinicians treating postmenopausal women and identifies need for additional education. The study results will be presented at the 2017 Annual Meeting of The North American Menopause Society (NAMS) in Philadelphia, October 11-14.

Despite the fact that published evidence from the WHI suggests that HT is a relatively safe, viable solution for symptomatic menopausal women under age 60 or within 10 years postmenopause, the number of women being prescribed and using hormones continues to decline. To counteract ongoing skepticism amongst medical professionals regarding the safety of hormones, a new medical education program was shared with 1,087 physicians, nurse practitioners (NPs), and physician assistants (PAs).

Participants were asked a series of questions before and after reviewing the educational program to identify knowledge gaps relative to hormone safety and determine if additional education would help to overcome misperceptions. Among physicians, the average percentage of participants who correctly answered test questions related to outcomes of the WHI trials was 57% pre-activity and 70% post-activity; for NPs, the average percentage answering correctly was 49% pre-activity and 68% post-activity; and for PAs, 52% and 70% respectively.

“We had expected physicians to demonstrate better results in both the pre- and post-activity tests. As a result of the added education there was improvement in some key areas including the newer analysis of the WHI showing different risks depending on age of starting HT. Although our data suggest there is still uncertainty about HT risks, differences between findings for estrogen alone or with progestin, the interpretation of WHI follow-up studies, and the benefits and risks of newer medications for menopause symptoms,” says Dr. JoAnn Pinkerton, lead author of the study from the University of Virginia Midlife Health Center and NAMS executive director. “This indicates that future educational interventions are warranted to reinforce appropriate treatment so women at menopause can get the symptom relief they need.”

Dr. Pinkerton is available for interviews before the presentation at the Annual Meeting.

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.