

Menopause

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More promising news (mostly) on manipulating neurokinin B activity as a nonhormonal treatment of hot flashes

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Original Studies



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A phase 2b, randomized, placebo-controlled, double-blind, dose-ranging study of the neurokinin 3 receptor antagonist fezolinetant for vasomotor symptoms associated with menopause

Graeme L. Fraser, PhD, Samuel Lederman, MD, Arthur Waldbaum, MD, Robin Kroll, MD, Nanette Santoro, MD, Misun Lee, PhD, Laurence Skillern, MD, and Steven Ramael, MD

Fezolinetant is a well-tolerated, effective, nonhormone therapy that rapidly reduces moderate/severe menopausal vasomotor symptoms.

(continued)

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Obstetrician-gynecologists' screening and management of depression during perimenopause

Greta B. Raglan, PhD, Jay Schulkin, PhD, Laura M. Juliano, PhD, and Elizabeth A. Micks, MD, MPH

Higher quality education about depression, respondent sex, and personal experience with depression are associated with higher rates of obstetrician-gynecologist (OB-GYN) screening for depression during the perimenopausal transition. Increased education of OB-GYN physicians related to depression during perimenopause may increase the screening and treatment of women during this stage of increased risk.

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The role of physical activity in the link between menopausal status and mental well-being Dmitriy Bondarev, MSc, Sarianna Sipilä, PhD, Taija Finni, PhD, Urho M. Kujala, PhD, Pauliina Aukee, PhD, Eija K. Laakkonen, PhD, Vuokko Kovanen, PhD, and Katja Kokko, PhD This study showed that progressing from pre- to postmenopausal stage predisposes to an elevated level of depressive symptoms but does not compromise positive mental well-being. However, the relationship between menopausal status and mental well-being varies with the level of physical activity.

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Endometrial safety and bleeding profile of a 17β -estradiol/progesterone oral softgel capsule (TX-001HR)

Sebastian Mirkin, MD, Steven R. Goldstein, MD, David F. Archer, MD, James H. Pickar, MD, Shelli Graham, PhD, and Brian Bernick, MD

In the REPLENISH trial, all doses of estradiol/progesterone (E2/P4; TX-001HR) provided endometrial protection and were associated with a bleeding profile that improved over time in postmenopausal women with a uterus seeking treatment for moderate to severe vasomotor symptoms. Women who were older, further from last menstrual period, or had lower baseline E2 were more likely to experience amenorrhea with E2/P4.

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Effect of rescue fractional microablative CO_2 laser on symptoms and sexual dysfunction in women affected by vulvar lichen sclerosus resistant to long-term use of topic corticosteroid: a prospective longitudinal study

Tiziana Pagano, MD, PhD, Alessandro Conforti, MD, PhD, Cira Buonfantino, MD, Francesco Schettini, MD, Roberta Vallone, MD, Alessandra Gallo, MD, Luisa Avino, MD, PhD, Carlo Alviggi, MD, PhD, Giuseppe De Placido, MD, and Francesco Sopracordevole, MD This study suggests that fractional microablative CO_2 laser treatment could be a valid rescue strategy in patients affected by lichen sclerosus who do not respond to ultra-potent topical corticosteroids after long-term use.

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The European Vulvovaginal Epidemiological Survey (EVES): impact on sexual function of vulvovaginal atrophy of menopause

Martire Particco, MD, Stora Djumaeva, MD, Rossella E. Nappi, MD, PhD, Nick Panay, BSc, FRCOG, MFSRH, Santiago Palacios, MD, PhD, on behalf of the EVES Study investigators

For postmenopausal women with at least one vulvovaginal atrophy (VVA) symptom, presence of physician-confirmed VVA is associated with significant impaired sexual function, as shown by unadjusted analyses. Given the impact on quality of life and the prevalence of VVA, further research to improve and reduce VVA is warranted.

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Is it possible to investigate menopausal age? A comparative cross-sectional study of five cohorts between 1968 and 2017 from the Population Study of Women in Gothenburg, Sweden Kerstin Rödström, MD, PhD, Lilian Weman, BA, Linda Sandin, PhD,

Dominique Hange, MD, PhD, and Cecilia Björkelund, MD, PhD

This study has shown an increase in hormonal use, in both 38- and 50-year-old women, making it difficult to determine when actual menopause occurs. Thus, the previously found increasing secular trend in menopausal age will be more complicated to assess in female generations of today and tomorrow.

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Association of objectively measured sedentary behavior and physical activity levels with health-related quality of life in middle-aged women: The FLAMENCO project

Nuria Marín-Jiménez, BSc, Pedro Jesús Ruiz-Montero, PhD, Marta De la Flor-Alemany, BSc, Pilar Aranda, PhD, and Virginia A. Aparicio, PhD

Spending less time in sedentary behavior and greater physical activity levels, especially vigorous physical activity, are associated with better health-related quality of life in middle-aged women. Vigorous physical activity is associated with a better SF-36 physical component scale, which might mean a reduction in exercise time with similar improvements for women's quality of life.

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Quality over quantity: skeletal loading intensity plays a key role in understanding the relationship between physical activity and bone density in postmenopausal women Stefan I. Madansingh, PhD, Che G. Ngufor, PhD, and Emma Fortune, PhD

Despite having higher-than-expected physical activity (PA), the low stepping loads observed in this cohort, along with half of the participants having low bone mineral density measures, underscores the need for PA intensity to be considered in the management of postmenopausal bone health.



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Pelvic floor disorders in women with premature ovarian insufficiency: a cross-sectional study

Júlia Ferreira Fante, PT, MsC, Helymar da Costa Machado, BS, Cassia Raquel Teatin Juliato, MD, PhD, Cristina Laguna Benetti-Pinto, MD, PhD, and Luiz Gustavo Oliveira Brito, MD, PhD Women with premature ovarian insufficiency (POI) did not have significant differences when compared to the control group regarding the prevalence of pelvic floor disorders and pelvic floor muscle assessment. Having higher weight and gravidity rates were associated with self-reported urinary incontinence, while the presence of comorbidities and higher weight were risk factors for pelvic organ prolapse in the POI group.



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Relationship between *BRSK1* rs12611091 variant and age at natural menopause based on physical activity

Chun-Lang Su, MD, Yi-Ling Tsai, MS, Oswald Ndi Nfor, DVM, PhD, Wen-Hsiu Liu, MS, Chien Chang Ho, PhD, Chia-Chi Lung, PhD, Yi-Tien Lin, MS, Lee Wang, PhD, and Yung-Po Liaw, PhD

This study found that women with TC and TT genotypes who were physically inactive were significantly associated with earlier natural menopause compared to those with the CC genotype.



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Association between common mental disorders, sleep quality, and menopausal symptoms: a population-based study in Southern Brazil

Agnes L. Neutzling, MD, Heloísa M. Leite, MD, Vera Maria V. Paniz, PhD, Fernanda Souza de Bairros, PhD, Juvenal S. Dias da Costa, PhD, and Maria Teresa A. Olinto, PhD *Moderate/severe menopausal complaints were more prevalent in women with common mental disorders (CMD) and poor sleep quality; the presence of both CMD and poor sleep quality was associated with a threefold increase in likelihood of moderate/severe menopausal complaints.*

Clinical Corner

Invited Review



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Lights on MsFLASH: a review of contributions

Susan D. Reed, MD, MPH, Andrea Z. LaCroix, PhD, Garnet L. Anderson, PhD, Kristine E. Ensrud, MD, MPH, Bette Caan, PhD, Janet S. Carpenter, PhD, RN, FAAN, Lee Cohen, MD, Susan J. Diem, MD, MPH, Ellen W. Freeman, PhD, Hadine Joffe, MD, MSc, Joseph C. Larson, MS, Susan M. McCurry, PhD, Caroline M. Mitchell, MD, MPH, Katherine M. Newton, PhD, Barbara Sternfeld, PhD, and Katherine A. Guthrie, PhD *The MsFLASH trials contributed substantially to our understanding of bothersome menopausal symptom treatment. It is important that clinicians counseling women about available treatment options consider all therapies – both non-hormonal and hormonal.*

Review-Systematic



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Gabapentin for the treatment of hot flushes in menopause: a meta-analysis

Sang-Hee Yoon, MD, PhD, Ji Young Lee, MD, PhD, Chulmin Lee, MD, PhD, Hyojin Lee, MD, and Soo-Nyung Kim, MD, PhD

Gabapentin represents a potentially beneficial treatment for vasomotor symptoms in postmenopausal women who are contraindicated to hormone therapy or who prefer alternatives. Future studies should investigate the lowest effective dose of gabapentin to minimize adverse effects.

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