Contents

Editorials

1099
Age at first childbirth as a predictor of health outcomes later in life among women
Aladdin H. Shadyab, PhD

1101
Bone health and beyond in women with primary ovarian insufficiency: time to narrow the knowledge-action gap in care
Xuezhi (Daniel) Jiang, MD, PhD, FACOG, NCMP

Original Studies

1104
Age at first childbirth in relation to oral health later in life
Seonah Lee, BS, and Sangshin Park, PhD
This study showed that age at first childbirth was associated with increased odds of chewing inconvenience and dental caries. Body mass index mediated the relationships of age at first childbirth and periodontitis and dental caries.

1110
Bone mass in women with premature ovarian insufficiency: a comparative study between hormone therapy and combined oral contraceptives
Lívia B. Carvalho Gazarra, pharmacist, Camila L. Bonacordi, MD, Daniela A. Yela, MD, PhD, and Cristina Laguna Benetti-Pinto, MD, PhD
Continuous use of a combined oral contraceptive can be considered as an option for hormone therapy in women with premature ovarian insufficiency, according to the preliminary results of this study.

(continued)
The association between weight-promoting medication use and weight gain in postmenopausal women: findings from the Women's Health Initiative

Fatima Cody Stanford, MD, MPH, MPA, Hellas Cena, MD, Ginevra Biino, PhD, Olivia Umoren, BS, Monik Jimenez, ScD, Marlene P. Freeman, MD, Aladdin H. Shadyab, PhD, Robert A. Wild, MD, MPH, PhD, Catherine R. Womack, MD, Hailey R. Banack, PhD, and JoAnn E. Manson, MD, DrPH

This study sought to quantify the magnitude of association between putative weight-promoting medications and 3-year weight change in a diverse cohort of postmenopausal women in the Women’s Health Initiative. This study demonstrates that several classes of medication are associated with weight gain in postmenopausal women.

Effects of pharmacologic and nonpharmacologic interventions on menopause-related quality of life: a pooled analysis of individual participant data from four MsFLASH trials

Susan J. Diem, MD, MPH, Andrea Z. LaCroix, PhD, Susan D. Reed, MD, MPH, Joseph C. Larson, MS, Katherine M. Newton, PhD, Kristine E. Ensrud, MD, MPH, Nancy F. Woods, PhD, and Katherine A. Guthrie, PhD

Results from this pooled analysis demonstrate that a variety of treatment approaches provide improvement in health-related quality of life among menopausal women with vasomotor symptoms. Using this information women can select an approach based on most bothersome symptoms and individual preferences.

Abaloparatide followed by alendronate in women \( \geq 80 \) years with osteoporosis: post hoc analysis of ACTIVExtend

Susan L. Greenspan, MD, Lorraine A. Fitzpatrick, MD, Bruce Mitlak, MD, Yamei Wang, PhD, Nicholas C. Harvey, MD, Chad Deal, MD, Felicia Cosman, MD, and Michael McClung, MD

Sequential treatment with abaloparatide followed by alendronate in this small subgroup of ACTIVExtend participants suggests abaloparatide is well-tolerated and effective in women aged \( \geq 80 \) years.

Sexual function after tension-free vaginal tape procedure in stress urinary incontinence patients

Ye Zhang, PhD, Xiaochen Song, MD, Jia Kang, PhD, Yidi Ma, PhD, Congcong Ma, PhD, and Lan Zhu, MD

Most women experienced an improvement in sexual function after the tension-free vaginal tape operation, due to less coital incontinence, less fear of incontinence, and fewer negative emotional reactions.

Vaginal pessary continuation in symptomatic pelvic organ prolapse patients with prior hysterectomy

Congcong Ma, PhD, Jia Kang, PhD, Tao Xu, PhD, Ye Zhang, PhD, Yidi Ma, PhD, Shuo Liang, MD, Yujie Hui, MM, Yuhong Wang, MM, and Lan Zhu, MD

A history of pelvic organ prolapse reconstructive surgery and a short total vaginal length were potential risk factors for unsuccessful pessary fitting, whereas age and prolapse score improvement at 3-month were potential predictors for continuation.
A proprotein convertase subtilisin/kexin type 9 inhibitor provides comparable efficacy with lower detriment than statins on mitochondria of oxidative muscle of obese estrogen-deprived rats
Chanisa Thonusin, MD, PhD, Patcharapong Pantiya, BSc, Thidarat Jaiwongkam, BSc, Sasiwan Kerdphoo, MSc, Busarin Arunsak, BSc, Patchareeya Amput, MSc, Siripong Palee, PhD, Wasana Pratchayasakul, PhD, Nipon Chattipakorn, MD, PhD, and Siriporn C. Chattipakorn, DDS, PhD
This study demonstrates that 17β-estradiol exhibits the greatest level of efficacy on the attenuation of obesity with the least harmful effect on skeletal muscle in a model of menopause with obesity, however its effect on the treatment of hyperlipidemia is inferior to those of standard lipid-lowering agents.

Brief Report

Peripheral vasodilation is reduced during exercise in perimenopausal women with elevated cardiovascular risk
Joaquin U. Gonzales, PhD, David J. Moore, PhD, Steriani Elavsky, PhD, and David N. Proctor, PhD
These preliminary results support the notion that an elevated cardiovascular disease risk may have an additional negative impact on vascular function beyond that reported to occur in healthy women transitioning through menopause.

Clinical Corner

Invited Review

Selective estrogen receptor modulators (SERMs): keys to understanding their function
James H. Liu, MD
This review provides a basic understanding of the current knowledge of selective estrogen receptor modulators (SERMs) pharmacodynamics and will highlight the clinical applications of FDA-approved SERMs.

Review Articles

Vaginal laser treatment of genitourinary syndrome of menopause: does the evidence support the FDA safety communication?
Julia Z. Guo, BS, Colby Soaders, MD, Lynn McClelland, BS, MPH, JD, Jennifer T. Anger, MD, MPH, Victoria C.S. Scott, MD, Karyn S. Eilber, MD, and A. Lenore Ackerman, MD, PhD
Evidence to justify the FDA warning cautioning against the use of vaginal laser devices for genitourinary syndrome of menopause (GSM) was not found either in the medical literature or by searching relevant databases for adverse events. The FDA warning requires revision, clarifying the risks of vaginal laser therapy specifically for GSM and allowing women to participate in decision making about treatment modalities.
Menopause and frailty: a scoping review
Haihui Ruan, BSN, Junping Hu, BSN, Jinzhu Zhao, BSN, Hongxia Tao, BSN, Junting Chi, BSN, Xiaodan Niu, BSN, Jing Zhang, BSN, and Yanhong Wang, PhD
This study found that early menopause, hysterectomy, low free testosterone levels, and high C-reactive protein levels may increase the likelihood of frailty among postmenopausal women and the relationship between estrogen and frailty are conflicting.

Letters to the Editor

1196