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2020-2021 NAMS President

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Fezolinetant findings can fuel future instrumentation inquiries
Janet S. Carpenter, PhD, RN, FAAN

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Parity, education, and postmenopausal cognitive function
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Original Studies

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Effect of the neurokinin 3 receptor antagonist fezolinetant on patient-reported outcomes in postmenopausal women with vasomotor symptoms: results of a randomized, placebo-controlled, double-blind, dose-ranging study (VESTA)
Nanette Santoro, MD, Arthur Waldbaum, MD, Samuel Lederman, MD, Robin Kroll, MD, Graeme L. Fraser, PhD, Christopher Lademacher, MD, PhD, Laurence Skillern, MD, James Young, MS, and Steven Ramael, MD
Oral fezolinetant was associated with higher responder rates than placebo and larger improvements in quality of life and other patient-reported outcome measures, including a reduction in vasomotor symptom-related interference with daily life.
Female reproductive health and cognitive function
Chia-Kuang Tsai, MD, PhD, Yuan-Yuei Chen, MD, Chung-Hsing Chou, MD, PhD,
Tung-Wei Kao, MD, Chih-Sung Liang, MD, Fu-Chi Yang, MD, PhD, Chung-Ching Wang, MD,
Jiunn-Tay Lee, MD, and Wei-Liang Chen, MD, PhD
The current study highlights the correlation between number of pregnancies and cognitive
malfunction in postmenopausal women. Women with more pregnancies had poorer cognitive
performance, especially those who had their last pregnancy after 28 years of age and less than
12 years of education.

Impact of nulliparity, hypertensive disorders of pregnancy, and gestational diabetes on
vasomotor symptoms in midlife women
Yamnia I. Cortés, PhD, MPH, FNP-BC, Rhoda Conant, MD, Janet M. Catov, PhD,
Karen A. Matthews, PhD, Sybil L. Crawford, PhD, Monique M. Hedderson, PhD, and
Rebecca C. Thurston, PhD
The purpose of this analysis is to determine whether women with a history of nulliparity,
hypertensive disorders of pregnancy (HDP), or gestational diabetes mellitus (GDM) have
a higher odds of reporting vasomotor symptoms (VMS) at midlife. History of HDP/GDM
may be associated with more VMS and nulliparity with fewer VMS, but not independently of
socio-demographic factors.

Protocol for development of a core outcome set for menopausal symptoms (COMMA)
Bobae V. Kim, MCAud, Stamatina Iliodromiti, MD, PhD, Monica Christmas, MD,
Robin Bell, MD, Sarah Lensen, PhD, Martha Hickey, MBChB, MD, on behalf of the
International COMMA (Core Outcomes in Menopause) Consortium
The aim of this project is to produce, disseminate and implement a Core Outcome Set for
Menopausal Symptoms (COMMA). This Core Outcome Set will better enable women and
clinicians to select effective treatments, improve the quality of trial reporting, reduce research
wastage and improve care for women with troublesome menopausal symptoms.

Effect of sex hormones on coronavirus disease 2019: an analysis of 5,061 laboratory-
confirmed cases in South Korea
Jae Hoon Lee, MD, Yong Chan Kim, MD, Si Hyun Cho, MD, PhD, Jinae Lee, PhD,
Seng Chan You, MD, Young Goo Song, MD, PhD, Young Bin Won, MD,
Young Sik Choi, MD, PhD, and Yun Soo Park, MD, PhD
Female sex hormones were not associated with the morbidity and mortality of COVID-19 in
South Korea. Furthermore, use of hormone therapy was not associated with clinical outcomes in peri- and post-menopausal women.

17β-estradiol/progesterone in a single, oral, softgel capsule (TX-001HR) significantly
increased the number of vasomotor symptom-free days in the REPLENISH trial
Andrew M. Kaunitz, MD, Diana Bitner, MD, Ginger D. Constantine, MD, Brian Bernick, MD,
Shelli Graham, PhD, and Sebastian Mirkin, MD
In the REPLENISH trial, postmenopausal women with moderate to severe vasomotor symptoms
(VMS) treated with oral estradiol/progesterone capsules had greater responses to treatment with
more VMS symptom-free days than with placebo.
Breast effects of oral, combined 17β-estradiol, and progesterone capsules in menopausal women: a randomized controlled trial

James H. Liu, MD, Denise R. Black, MD, Lisa Larkin, MD, Shelli Graham, PhD, Brian Bernick, MD, and Sebastian Mirkin, MD

In the REPLENISH trial of a combined 17β-estradiol/progesterone formulation (E2/P4), the overall incidence of abnormal mammograms or breast cancer was low and consistent with the background rate in postmenopausal women, and E2/P4 caused little breast discomfort. The single-capsule, bioidentical E2/P4 hormone therapy is safe with no significant adverse impact on the breast after 1 year of use in this study.

Factors associated with use of hormone therapy after preventive oophorectomy in BRCA mutation carriers

Javier Mejia-Gomez, MD, Jacek Gronwald, MD, Leigha Senter, MS, Beth Y. Karlan, MD, Nadine Tung, MD, Wendy Wolfman, MD, Rochelle Demsky, MS, Ping Sun, PhD, Steven A. Narod, MD, Joanne Kotsopoulos, PhD, and the Hereditary Breast Cancer Clinical Study Group

The uptake of hormone replacement therapy (HRT) following oophorectomy in women with a BRCA1 or BRCA2 mutation varies by age, education and surgical history. Clinician and patient awareness may lead to better utilization of HRT in women who undergo oophorectomy at an early age to help mitigate the adverse effects associated with surgical menopause.

Reproductive risk factors for angiographic obstructive coronary artery disease among postmenopausal women

Jingyi Wen, MD, PhD, Wei Shuai, MD, PhD, Ting Ding, MD, PhD, Yanzhi Feng, MD, Jinjin Zhang, MD, PhD, and Shixuan Wang, MD, PhD

Multigravidity (three or more pregnancies), early menopause, and a shorter reproductive lifespan were independent risk factors of angiographic obstructive coronary artery disease (CAD) among postmenopausal women, which suggested that pregnancy and ovarian function may be important for the early identification and prevention of increased risk of female angiographic obstructive CAD.

Medroxyprogesterone opposes estradiol-induced renal damage in midlife ovariectomized Long Evans rats

Margaret A. Zimmerman, PhD, Benard O. Ogola, PhD, Mary M. Wilkinson, BS, Bruna Visniauskas, PhD, Carmen De Miguel, PhD, Jill M. Daniel, PhD, and Sarah H. Lindsey, PhD

Medroxyprogesterone was protective against E2-induced renal damage and dysfunction in middle-aged female Long Evans rats. Assessing the impact of hormone therapy on renal outcomes may be an important clinical factor when considering treatment options for postmenopausal women.

Vaginal elasticity is significantly decreased in vaginal atrophy: a strain elastography study

Krisztina Pákozdy, MD, Attila G. Sipos, MD, Mariann Bombicz, PharmD, PhD, Rudolf Lampé, MD, PhD, Róbert Póka, MD, PhD, Peter Takacs, MD, PhD, MBA, and Bence Kozma, MD, PhD

Vaginal elasticity is significantly decreased in women with vaginal atrophy, measured by elastography index. The results of this study suggest that strain elastography might be useful in the diagnosis of vaginal atrophy.
Review Articles

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Effect of soy protein containing isoflavones on endothelial and vascular function in postmenopausal women: a systematic review and meta-analysis of randomized controlled trials
Maryam Abshirini, PhD, Mahsa Omidian, PhD, and Hamed Kord-Varkaneh, PhD
These findings suggest that soy protein supplementation does not lead to meaningful improvement on flow-mediated dilation in postmenopausal women. However, this finding is based on a limited number of studies. Additional high-quality large-scale randomized controlled trials are warranted.

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Menopausal transition experiences and management strategies of Chinese immigrant women: a scoping review
Ping Zou, RN, PhD, Jing Shao, RN, PhD, Yan Luo, RN, PhD, Yanjin Huang, RN, PhD, Hui Zhang, RN, PhD(c), and Souraya Sidani, RN, PhD
Chinese immigrant women were resistant to Western Medicine management such as hormone therapy but were willing to incorporate traditional medicine into their health care, while they believed that a healthy mentality was important and used various psycho-cognitive strategies to maintain a good quality of life.

Letters to the Editor

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Acknowledgment of Reviewers

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