



Menopause

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Sleep and hot flashes: COMMA endpoints applied to the MsFLASH studies Andrea Ries Thurman, MD

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Correlations among Core Outcomes in Menopause-recommended vasomotor symptom outcomes in MsFLASH trials

Janet S. Carpenter, PhD, RN, FAAN, Joseph C. Larson, MS, Myra S. Hunter, PhD, C Psychol FBPS, Sarah Lensen, PhD, Chen X. Chen, PhD, RN, and Katherine A. Guthrie, PhD

This pooled analysis advances understanding of vasomotor symptom outcomes measurement and has implications for selecting measures and creating future research.



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Cardiometabolic outcomes in Kronos Early Estrogen Prevention Study continuation: 14-year follow-up of a hormone therapy trial

Kejal Kantarci, MD, MS, Nirubol Tosakulwong, BS, Timothy G. Lesnick, MS, Firat Kara, PhD, June Kendall-Thomas, BS, Ekta Kapoor, MBBS, Julie A. Fields, PhD, Taryn T. James, PhD, Rogerio A. Lobo, MD, JoAnn E. Manson, MD, MPH, DrPH, Lubna Pal, MBBS, Dustin B. Hammers, PhD, Michael Malek-Ahmadi, PhD, Marcelle I. Cedars, MD, Frederick N. Naftolin, MD, Nanette Santoro, MD, Virginia M. Miller, PhD, Sherman M. Harman, MD, PhD, N. Maritza Dowling, PhD, MS, and Carey E. Gleason, PhD

This study investigated the cardiometabolic effects of hormone therapies initiated within 3 years of onset of menopause after a 14-year follow-up of participants of the Kronos Early Estrogen Prevention Study (KEEPS) clinical trial. There was no evidence of cardiovascular and/or metabolic benefits or adverse effects associated with 4 years use of oral or transdermal forms of hormone therapy by recently menopausal women with good cardiovascular health after 10 years.

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The association of urinary incontinence and disability among a diverse sample of midlife Study of Women's Health Across the Nation women

Sheila A. Dugan, MD, Sybil L. Crawford, PhD, Karla Wente, DPT, L. Elaine Waetjen, MD, Carrie Karvonen-Gutierrez, MPH, PhD, and Siobán D. Harlow, PhD Multivariable ordinal logistic regression analysis shows significant association between self-reported urinary incontinence and multiple domains of disability, including mobility and interacting with others, after two years.

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The association between reproductive period and handgrip strength in postmenopausal women: a nationwide cross-sectional study

Sae Rom Lee, MD, Young Hye Cho, MD, Eun Ju Park, MD, Youngin Lee, MD, Jung In Choi, MD, Ryuk-Jun Kwon, MD, PhD, Soo Min Son, MD, and Sang Yeoup Lee, MD, PhD

This study identified that menopausal age and reproductive period are associated with handgrip strength in postmenopausal women.

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Assessing the robustness of muscle strength and physical performance measures in women older than 40 years: a test-retest reliability study

Sebastião Henrique Assis Silva, BSc, Fábio L. Orsatti, PhD, Mariana L. de Lima, BSc, Augusto C. de Q. Freitas, BSc, Marcelo A.S. Carneiro, MSc, Cláudio de Oliveira Assumpção, PhD, and Markus Vinicius C. Souza, PhD *This study investigated the test-retest reliability and minimal detectable change of muscle strength and physical performance tests in women aged over 40 years*.

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Anaerobic and aerobic contributions to repeated supramaximal cycling exercises and their adaptation to high-intensity interval training in obese perimenopausal and postmenopausal women

Georges Jabbour, PhD and Horia D. Iancu, PhD

A 6-week high-intensity interval training increased the anaerobic contributions to energy in response to repeated supramaximal cycling exercises in obese perimenopausal and postmenopausal women. However, postmenopausal women had lower anaerobic contributions at the fourth and fifth repetitions mainly due to the effects of menopause.



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Bone mass, fracture risk, and associated factors in postmenopausal women living with HIV Paula R. Leite-Silva, PhD, Rebeca S. Pinheiro, MD, João M.B. Barbosa-Ferreira, PhD, Antonio Balieiro, PhD, Meritxell Sabidó, PhD, Marcus V.G. Lacerda, PhD, Yury O. Chaves, PhD, Paulo A. Nogueira, PhD, and Adele S. Benzaken, PhD The findings of this study show a high prevalence of low bone mass (osteopenia/osteoporosis) in Brazilian postmenopausal women from the Amazon region. Women living with HIV have higher FRAX scores than HIV-negative women and a lower T score in the femoral neck.







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The menopause-related gut microbiome: associations with metabolomics, inflammatory protein markers, and cardiometabolic health in women with HIV

Yi Wang, PhD, Anjali Sharma, MD, Kathleen M. Weber, RN, MS, Elizabeth Topper, PhD, Allison A. Appleton, PhD, Deborah Gustafson, PhD, Clary B. Clish, PhD, Robert C. Kaplan, PhD, Robert D. Burk, MD, Qibin Qi, PhD, and Brandilyn A. Peters, PhD Menopause was associated with a differential gut microbiome in women with HIV, related to metabolite and protein profiles that potentially contribute to elevated cardiometabolic risk.

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Primary ovarian insufficiency: a toolkit for the busy clinician Ekta Kapoor, MBBS, FACP, MSCP

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Systematic review and network meta-analysis comparing the efficacy of fezolinetant with hormone and nonhormone therapies for treatment of vasomotor symptoms due to menopause

Antonia Morga, PhD, Mayank Ajmera, PhD, Emily Gao, MPH, Oscar Patterson-Lomba, PhD, Angela Zhao, BS, Shayna Mancuso, DO, FACOG, Emad Siddiqui, MD, and Risa Kagan, MD, FACOG, MSCP

The only hormone therapy regimens that showed significantly greater efficacy than fezolinetant 45 mg on any of the outcomes analyzed are not available in the United States. Fezolinetant 45 mg once daily was statistically significantly more effective than other nonhormone therapies in reducing the frequency of moderate to severe vasomotor symptoms of menopause.



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The association of menopause with cardiometabolic disease risk factors in low- and middle-income countries: a systematic review and meta-analyses

Raylton P. Chikwati, PhD, Tinashe Chikowore, PhD, Nasrin Goolam Mahyoodeen, PhD, Nicole G. Jaff, PhD, MSCP, Jaya A. George, PhD, and Nigel J. Crowther, PhD This study confirmed that cardiometabolic disease (CMD) risk factors are present at higher levels in post-than premenopausal women. This demonstrates an urgent need for public health policies that focus on early monitoring and interventions targeted at reducing CMD risk and related adverse outcomes in midlife women in these nations.







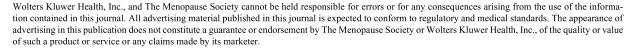
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