



# Menopause

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#### **Defining liquid biopsy parameters in postmenopausal women for disease diagnosis**

James K. Pru, PhD

### Original Study

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#### **Circulating cell-free DNA is elevated in postmenopausal compared with pre- and perimenopausal women**

Teagan Fisher, BSc (Hons), Elyse Powell, MNurs, Nicole L. Yuwono, PhD, Caroline E. Ford, PhD, and Kristina Warton, PhD

*Circulating cell-free DNA is higher in healthy postmenopausal women compared with healthy premenopausal women. This has implications for the sensitivity and specificity of cell-free DNA-based clinical tests.*

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#### **Age at natural or surgical menopause, all-cause mortality, and lifespan among postmenopausal women in the United States**

Zailing Xing, MPH and Russell S. Kirby, PhD, MS

*This study used a representative sample of the US population to investigate the association of age at natural menopause with or without undergoing hysterectomy and/or bilateral oophorectomy after menopause and age at surgical menopause with all-cause mortality and lifespan among postmenopausal women over 40.*

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#### **The association of depressive symptoms and female sexual functioning in the menopause transition: a cross-sectional study**

Emily B. Stevens, Wendy Wolfman, MD, FRCSC, FACOG, MSCP, Leticia Hernandez-Galan, PhD, and Alison K. Shea, MD, PhD, FRCSC, MSCP

*During perimenopause and postmenopause, women are vulnerable to symptoms of depression, which often exacerbate already low sexual functioning. In this study, antidepressant usage, low household income, being postmenopausal, and older age were found to be predictors of low sexual function.*

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**Propulsive forces and muscle activation during gait: comparisons between premenopausal and postmenopausal midlife women**

Giovanni Gondim Tomaz, BSc, Markus Vinicius Campos Souza, PhD,  
Marcelo Augusto da Silva Carneiro, MSc, Mariana Luíza de Lima, BSc,  
Claudio Oliveira Assumpção, PhD, and Fábio Lera Orsatti, PhD

*The study findings suggest that postmenopausal women may have a decreased ability to generate propulsive force quickly, particularly in the anteroposterior and vertical directions during the preparation phase of gait, in comparison with premenopausal women.*

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**Migraines, vasomotor symptoms, and cardiovascular disease in the Coronary Artery Risk Development in Young Adults study**

Catherine Kim, MD, MPH, Pamela J. Schreiner, PhD, Zhe Yin, MS, Rachael Whitney, PhD,  
Stephen Sidney, MD, MPH, Imo Ebong, MD, and Deborah A. Levine, MD, MPH

*Migraines and persistent vasomotor symptoms jointly associate with greater risk for cardiovascular disease and stroke although risk is attenuated with adjustment for traditional cardiovascular disease risk factors.*

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**Adipokines and adiposity among postmenopausal women of the Multi-Ethnic Study of Atherosclerosis**

Imo A. Ebong, MD, MS, Erin D. Michos, MD, MHS, Machel Wilson, PhD,  
Duke Appiah, PhD, Pamela J. Schreiner, PhD, Susan B. Racette, PhD, Matthew Allison, MD,  
Karol Watson, MD, PhD, and Alain Bertoni, MD, MPH

*Menopausal age category had no influence on the association of serum adiponectin with adiposity. The association of serum leptin and resistin differed according to menopausal age category for generalized adiposity but was inconsistent for measures of abdominal adiposity.*

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**Estradiol associations with brain functional connectivity in postmenopausal women**

Abigail A. Testo, Jenna Makarewicz, Elizabeth McGee, MD, and Julie A. Dumas, PhD

*The results of this study indicated that estradiol level continued to impact brain functioning after the final menstrual period.*

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**Prevalence and risk factors associated with diabetes mellitus among middle-aged women in southern Brazil: a population-based study**

Karen Oppermann, MD, PhD and Poli M. Spritzer, MD, PhD

*Age, physical inactivity, early age at menarche, and systolic blood pressure were the independent clinical characteristics associated with the likelihood of having diabetes mellitus. Of these risk factors, systolic blood pressure and physical activity are considered modifiable.*

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## Clinical Corner

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### Practice Pearl

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#### Fractional CO<sub>2</sub> laser for genitourinary syndrome of menopause: evaluating the evidence

Jen Gunter, MD, FRCS(C), FACOG, DABPM, ABPMR, MSCP

*Nonprescription vaginal lubricants and moisturizers are often offered as first-line therapy for the genitourinary syndrome of menopause (GSM). The fractional carbon dioxide, or CO<sub>2</sub>, laser has been promoted for the management of GSM. What is clear is that there is an unmet need for nonmedication options to treat GSM. Based on the evidence, vaginal CO<sub>2</sub> laser therapy use for GSM is a safe option, but more studies are needed to demonstrate efficacy.*

### Review

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#### Eligibility criteria for using menopausal hormone therapy in breast cancer survivors: a safety report based on a systematic review and meta-analysis

Pluvio J. Coronado, MD, PhD, Ana Gómez, MD, PhD, Eva Iglesias, MD, María Fasero, MD, PhD, Laura Baquedano, MD, PhD, Sonia Sánchez, MD, PhD, Isabel Ramírez-Polo, MD, Esther de la Viuda, MD, PhD, Borja Otero, MD, Plácido Llana, MD, PhD, Nicolás Mendoza, MD, PhD, Daniel M. Lubián, MD, PhD, on behalf of the HMT Eligibility Criteria Group

*The findings of this study suggest that menopausal hormone therapy could be a viable treatment alternative for breast cancer survivors experiencing menopausal symptoms, especially those with hormone receptor-negative tumors. Personalized management is recommended for each peri/postmenopausal woman facing a diminished quality of life because of menopause symptoms.*

### Letters to the Editor

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