



Selección de Resúmenes de Menopausia

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Vitamin D deficiency is associated with functional decline and falls in frail elderly women despite supplementation.

Kotlarczyk MP, Perera S, Ferchak MA, Nace DA, Resnick NM, Greenspan SL.

We examined the impact of daily supplementation on vitamin D deficiency, function, and falls in female long-term care residents. Initial vitamin D deficiency was associated with greater functional decline and increased fall risk despite guideline-recommended supplementation, highlighting the importance of preventing vitamin D deficiency in frail elderly. **INTRODUCTION:** Institute of Medicine (IOM) guidelines recommend 800 IU vitamin D daily for older adults and maintaining serum 25-hydroxyvitamin D [25(OH) D] above 20 ng/ml for optimal skeletal health. The adequacy of IOM guidelines for sustaining function and reducing falls in frail elderly is unknown. **METHODS:** Female long-term care residents aged ≥ 65 enrolled in an osteoporosis clinical trial were included in this analysis ($n = 137$). Participants were classified based on baseline 25(OH) D levels as deficient (<20 ng/ml, $n = 26$), insufficient (20-30 ng/ml, $n = 40$), or sufficient (>30 ng/ml, $n = 71$). Deficient women were provided initial vitamin D repletion (50,000 IU D3 weekly for 8 weeks). All were supplemented with 800 IU vitamin D3 daily for 24 months. Annual functional assessments included Activities of Daily Living (ADLs), Instrumental ADL (IADL), physical performance test (PPT), gait speed, cognition (SPMSQ), and mental health (PHQ-9). We used linear mixed models for analysis of functional measures and logistic regression for falls. **RESULTS:** Daily supplementation maintained 25(OH) D levels above 20 ng/ml in 95% of participants. All groups demonstrated functional decline. Women initially deficient had a greater decline in physical function at 12 (IADL -2.0 ± 0.4 , PPT -3.1 ± 0.7 , both $p < 0.01$) and 24 months (IADL -2.5 ± 0.6 , ADL -2.5 ± 0.6 , both $p < 0.01$), a larger increase in cognitive deficits at 12 months (1.7 ± 0.4 ; $p = 0.01$) and more fallers (88.5%, $p = 0.04$) compared to those sufficient at baseline, despite supplementation to sufficient levels. **CONCLUSIONS:** IOM guidelines may not be adequate for frail elderly. Further study of optimal 25(OH) D levels for maintaining function and preventing falls is needed.

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Dietary patterns and risk of breast cancer in Chinese women: a population-based case-control study.

Lu S, Huang X, Yu H, Yang J, Han R, Su J, Du W, Zhou J, Yu X, Wu M.

BACKGROUND: The incidence rate of breast cancer has markedly increased in recent years in China, yet the association of breast cancer with dietary patterns such as a Chinese traditional diet has not been studied. We aimed to examine this association among women from the Jiangsu Province of China. **METHODS:** In this case-control study, we used the data from local population-based cancer registry agency to recruit newly diagnosed patients with primary breast cancer as cases. We selected the controls from the general population of the same residence as cases, whom we frequency matched by about 5 years. We used a validated food frequency questionnaire to assess dietary intake using face-to-face interviews. We identified dietary patterns doing a principal component analysis. We estimated multivariate odds ratios (ORs) and 95% CIs for quartiles of component scores (ie, factor scores ranging from low [first quartile] to high [fourth quartile]) for each dietary pattern using unconditional logistic regression. This research has been approved by the ethical committee of Jiangsu Provincial Center for Disease Control and Prevention. Participants were well informed of the whole procedure and all gave informed consent. **FINDINGS:** Between November, 2013, and January, 2015, we recruited 818 cases and 935 controls. Four dietary patterns were identified: salty (salt, oil, monosodium glutamate, soy sauce, sugar, soft drinks, and pickles), vegetarian (soy, nuts, fruits, vegetables, aquatics, and milk), sweet (soft drinks, sugar strengthened beverages, fried food, cakes, milk, coffee, and fresh juice) and Chinese-traditional (meat, eggs, rice or flour, aquatics, vegetables, and poultry). After adjusting for confounders, we found the Chinese-traditional pattern to be robustly associated with a decreased risk of breast cancer among both pre-menopausal and post-menopausal women (fourth vs first quartile: OR among premenopausal women was 0.47, 95% CI 0.29-0.76, $p_{trend}=0.004$; OR among postmenopausal women was 0.68, 0.48-0.97, $p_{trend}=0.006$). Women with a high intake of the sweet pattern showed a decreased risk of breast cancer

(fourth vs first quartile: OR for pre-menopausal women was 0.47, 0.28-0.79; OR for post-menopausal women was 0.68, 0.47-0.98). No significant association was observed between salty or vegetarian patterns and breast cancer. INTERPRETATION: These findings indicate that Chinese-traditional pattern and sweet pattern might favourably affect the risk of breast cancer in Chinese women.

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Lifestyle Risk Factors for Breast Cancer in BRCA1/2-Mutation Carriers Around Childbearing Age.

van Erkelens A, Derks L, Sie AS, Egbers L, Woldringh G, Prins JB, Manders P, Hoogerbrugge N.

BRCA1/2-mutation carriers are at high risk of breast cancer (BC) and ovarian cancer. Physical inactivity, overweight (body mass index ≥ 25 , BMI), smoking, and alcohol consumption are jointly responsible for about 1 in 4 postmenopausal BC cases in the general population. Limited evidence suggests physical activity also increases BC risk in BRCA1/2-mutation carriers. Women who have children often reduce physical activity and have weight gain, which increases BC risk. We assessed aforementioned lifestyle factors in a cohort of 268 BRCA1/2-mutation carriers around childbearing age (born between 1968 and 1983, median age 33 years, range 21-44). Furthermore, we evaluated the effect of having children on physical inactivity and overweight. Carriers were asked about lifestyle 4-6 weeks after genetic diagnosis at the Familial Cancer Clinic Nijmegen. Physical inactivity was defined as sports activity fewer than once a week. Carriers were categorized according to the age of their youngest child (no children, age 0-3 years and ≥ 4 years). In total, 48% of carriers were physically inactive, 41% were overweight, 27% smoked, and 70% consumed alcohol (3% ≥ 8 beverages/week). Physical inactivity was 4-5 times more likely in carriers with children. Overweight was not associated with having children. Carriers with children are a subgroup that may specifically benefit from lifestyle support to reduce BC risk.

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Framingham risk score after risk-reducing salpingo-oophorectomy in women at risk for hereditary breast ovarian cancer: A controlled observational study.

Michelsen TM, Tonstad S, Dahl AA, Pripp AH, Tropé CG, Dørum A.

Background: Risk-reducing salpingo-oophorectomy (RRSO) effectively prevents ovarian cancer in BRCA mutation carriers and in women at risk for hereditary breast-ovarian cancer. RRSO induces immediate menopause, which may increase the risk of coronary heart disease (CHD). Our aim was to determine CHD risk using Framingham risk score and examine factors associated with this risk in women who had undergone RRSO compared to population-based controls. METHODS: A sample of 326 (65% of invited) women who underwent RRSO after genetic counseling from 1980-2005 provided completed questionnaires, physical measures, and blood samples. Controls were 1,630 age-matched controls from the Norwegian Nord-Trøndelag Health Study (HUNT-2) (1995- 97). RESULTS: Mean age in both the RRSO and control groups at survey was 54.4 years. Mean follow-up after surgery was 6.5 years (SD 4.4). The RRSO group had a more favorable CHD risk profile (higher education, more physical activity, less smoking, lower total cholesterol, higher HDL cholesterol, lower systolic blood pressure and lower BMI) and lower Framingham total score compared to controls ($p < 0.05$). In multiple logistic regression analyses RRSO was inversely associated with Framingham 10-year risk $\geq 5\%$ (Odds Ratio 0.49, 95% CI [0.34, 0.71] $p < 0.001$). CONCLUSIONS: In contrast to expectation, women at increased risk of hereditary breast ovarian cancer had a favorable CHD risk profile after RRSO compared to age-matched controls from the general population, and RRSO was associated with lower Framingham risk score. Follow-up time, self-selection of women seeking genetic counseling, changes in lifestyle after surgery and survival bias are possible explanations of this finding. No significant financial relationships to disclose.

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Smoking Habits and Body Weight Over the Adult Lifespan in Postmenopausal Women.

Kabat GC, Heo M, Allison M, Johnson KC, Ho GY, Tindle HA, Asao K, LaMonte MJ, Giovino GA, Rohan TE.

INTRODUCTION: The inter-relationships between smoking habits and weight gain are complex. However, few studies have examined the association of smoking habits with weight gain over the life course. **METHODS:** Major smoking parameters and weight gain over time were examined in a large cohort of postmenopausal women aged 50-79 years at enrollment between 1993 and 1998 (N=161,808) and followed through 2014 (analyses conducted in 2016). Cross-sectional analyses were used to assess the association of smoking and body weight at baseline. Retrospective data were used to correlate smoking status with body weight over a 45-year period prior to enrollment. In addition, the association of smoking with weight gain over 6 years of follow-up was examined. **RESULTS:** At baseline, women who had quit smoking prior to enrollment weighed 4.7 kg more than current smokers and 2.6 kg more than never smokers. Former, never, and current smokers all gained weight over the 45-year period from age 18 years to time of enrollment (average age, 63 years): 16.8, 16.4, and 14.6 kg, respectively. In prospective analyses, women who were current smokers at baseline but who quit smoking during follow-up gained more than 5 kg by Year 6 compared with current smokers at baseline who continued to smoke. Among long-term quitters, greater intensity of smoking and more recent quitting were associated with greater weight gain. **CONCLUSIONS:** These results suggest that excess weight gain associated with smoking cessation occurs soon after quitting and is modest relative to weight gain in never smokers over the adult lifespan.

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Assessment of lower urinary tract symptoms in different stages of menopause.

Varella LR, Bezerra da Silva R, Eugênia de Oliveira MC, Melo PH, Maranhão TM, Micussi MT.

[Purpose] To assess lower urinary tract symptoms in different stages of menopause and the quality of life of females with incontinence. [Subjects and Methods] The sample consisted of 302 females, aged between 40 and 56 years, divided into three groups: PRE (n= 81), PERI (n= 108) and POST (n= 113). This was a cross-sectional, analytical, observational study. Data were collected by assessment chart and conducting the International Consultation on Incontinence Questionnaire-Short Form. [Results] Most of the women had less than 10 years of schooling and were married. In PERI and POST menopause, the most frequent lower urinary tract symptoms were urinary urgency and stress incontinence. The PRE group did not exhibit nocturia, urge incontinence or urinary urgency, and had the lowest symptoms frequency. In the three stages, stress incontinence was the most prevalent symptom. Of the three menopause stages, PERI had a greater impact on urinary incontinence according to the International Consultation on Incontinence Questionnaire. [Conclusion] The presence of lower urinary tract symptoms can vary across the different stages of menopause and the urinary incontinence was the most frequent complaint. Moreover, it was observed that quality of life was more affected in the perimenopause stage.