

Selección de Resúmenes de Menopausia

Semana del 30 de noviembre a 6 de diciembre, 2022
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Arch Gerontol Geriatr. 2022 Nov 25;106:104879. doi: 10.1016/j.archger.2022.104879. Online ahead of print.

Cognitive impairment and risks of osteoporosis: A systematic review and meta-analysis

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Objective: To systematically assess the association between osteoporosis and cognitive impairment, and to provide new light on the prevention of cognitive impairment in patients with osteoporosis. **Method:** A comprehensive research of Embase, Cochrane Library, PubMed, Web of Science, CNKI, Wangfang Data and VIP was performed from inception to January 2022, using the search term 'osteoporosis' and 'cognitive impairment'. Literature screening, data extraction and quality evaluation were conducted by two reviewers independently, and meta-analysis was performed by RevMan 5.4 software. **Results:** A total of 8 studies (136222 participants) were included. Meta-analysis showed that patients with osteoporosis had an increased risk of cognitive impairment [OR=2.01, 95% CI(1.63-2.48), P<0.01]. This initial meta-analysis had significant heterogeneity, and subgroup analysis suggested that potential heterogeneity in different study types, age and outcome indicators. **Conclusion:** Patients with osteoporosis are at increased risk of cognitive impairment, and osteoporosis intervention could prevent or delay the onset of cognitive impairment for those at risk.

Curr Urol Rep. 2022 Dec 1. doi: 10.1007/s11934-022-01132-7. Online ahead of print.

Vaginal Hormone Therapy for Conditions of the Lower Urinary Tract

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Purpose of review: Up to half of postmenopausal women experience genitourinary symptoms secondary to hormone deficiency, and there is little consensus on the use of vaginal hormone therapy (VHT) for lower urinary tract symptoms (LUTS) in these patients. This is a review of the scientific literature in the last decade evaluating the use of VHT for disorders of the lower urinary tract including overactive bladder (OAB), stress urinary incontinence (SUI), recurrent urinary tract infections (UTI), and interstitial cystitis/bladder pain syndrome (ICS/BPS). **Recent findings:** Vaginal estrogen therapy improves OAB symptoms in postmenopausal women, but results are mixed when VHT is used in combination with other treatments. There is inconclusive or limited data for the use of VHT to treat SUI and IC/BPS. Vaginal estrogen and prasterone (DHEA) therapies have demonstrated efficacy as treatment modalities for patients who experience recurrent UTIs. VHT preparations show efficacy for the treatment of certain LUTS and can be considered in carefully selected patients when clinically indicated.

Neuroimage Clin. 2022 Oct 26;36:103239. doi: 10.1016/j.nicl.2022.103239. Online ahead of print.

Associations between abdominal adipose tissue, reproductive span, and brain characteristics in post-menopausal women

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The menopause transition involves changes in oestrogens and adipose tissue distribution, which may influence female brain health post-menopause. Although increased central fat accumulation is linked to risk of cardiometabolic diseases, adipose tissue also serves as the primary biosynthesis site of oestrogens post-menopause. It is unclear whether different types of adipose tissue play diverging roles in female brain health post-menopause, and whether this depends on lifetime oestrogen exposure, which can have lasting effects on the brain and body even after menopause. Using the UK Biobank sample, we investigated associations between brain characteristics and visceral adipose tissue (VAT) and abdominal subcutaneous adipose tissue (ASAT) in 10,251 post-menopausal females, and assessed whether the relationships varied depending on length of reproductive span (age at menarche to age at menopause). To parse the effects of common genetic variation, we computed polygenic scores for reproductive span. The results showed that higher VAT and ASAT were both associated with higher grey and white matter brain age, and greater white matter hyperintensity load. The associations varied positively with reproductive span, indicating more prominent associations between adipose tissue and brain measures in females with a longer reproductive span. The effects were in general small, but could not be fully explained by genetic variation or relevant confounders. Our findings indicate that

associations between abdominal adipose tissue and brain health post-menopause may partly depend on individual differences in cumulative oestrogen exposure during reproductive years, emphasising the complexity of neural and endocrine ageing processes in females.

J Womens Health (Larchmt). 2022 Nov 25. doi: 10.1089/jwh.2021.0502. Online ahead of print.

Nocturnal Hot Flashes, but Not Serum Hormone Concentrations, as a Predictor of Insomnia in Menopausal Women: Results from the Midlife Women's Health Study

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Background: Sleep disruptions are among the most common symptoms experienced during menopause and can be associated with depression, hot flashes, and fluctuating hormones. However, few studies have examined how such risk factors influence sleep in midlife women in a network-based approach that will establish the complex relationship between variables. **Materials and Methods:** We used a Bayesian network (BN) to examine the relationship between multiple factors known to influence sleep and depression in midlife women, including hormone concentrations, hot flashes, and menopause status among participants of the longitudinal Midlife Women's Health Study. In year 1, 762 women (45-54 years of age) answered questions regarding the frequency of insomnia, hot flashes, and depression; 389 of the same women answered similar questions at year 4. We measured serum hormones and calculated free estradiol index, free testosterone index, and ratios of estradiol:progesterone, and estradiol:testosterone. For our model, we calculated the change in frequency of insomnia, depression, and covariates (body mass index, menopause status, hot flashes at night, and present quality of life) from year 1 to 4. **Results:** Using a BN, we found that self-reported hot flashes at night, and no other factors, were direct predictors of self-reported insomnia in year 1. Surprisingly, we did not identify an association between hormone concentrations and self-reported insomnia. Frequency of insomnia in year 4 was only predicted by frequency of insomnia in year 1, whereas frequency of depression in year 4 was predicted by year 4 insomnia and frequency of depression in year 1. No other factors were direct predictors of insomnia or depression in our model. **Conclusions:** Therefore, hot flashes at night, previous insomnia, and depression are stronger predictors of how women will self-report frequency of sleep disruptions and treatment may reduce menopausal sleep complaints.

Menopause. 2022 Dec 1;29(12):1375-1380. doi: 10.1097/GME.0000000000002088. Epub 2022 Oct 31.

The association between incidentally found breast arterial calcification on routine screening mammography and the development of coronary artery disease and stroke: results of a 10-year prospective study

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Objective: The objective of this study is to assess whether the presence of breast arterial calcifications (BACs) found on routine mammography is prospectively associated with the development of cardiovascular disease (CVD) events after 10 years of follow-up. **Methods:** Women presenting for screening mammography were enrolled in this prospective cohort. Baseline data were collected including history of CVD and CVD risk factors. Mammograms were assessed for the presence or absence of BAC. Participants completed questionnaires 10 years after baseline that assessed the development of CVD (coronary artery disease [CAD] and stroke) and CVD risk factors. **Results:** Of the 1,995 participants who enrolled at baseline, complete 10-year follow-up data were available for 1,039; of those, 114 (11.0%) were BAC-positive and 925 (89.0%) were BAC-negative at baseline. After controlling for age, BAC-positive women were more likely to develop CAD (odds ratio, 3.14; 95% confidence interval, 1.86-5.27; $P < 0.001$) compared with BAC-negative women after 10 years of follow-up. After controlling for age, BAC-positive women were more likely to have had a stroke (odds ratio, 5.10; 95% CI, 1.82-14.30) compared with BAC-negative women after 10 years. **Conclusions:** The presence of BAC on routine screening mammography was associated with a significantly increased risk of developing CAD and stroke after 10 years of follow-up. Additional large prospective, population-based studies are needed to confirm BAC as a predictor of future CVD events and its utility in stratifying a woman's risk of CVD.

Clin Endocrinol (Oxf). 2022 Nov 29. doi: 10.1111/cen.14856. Online ahead of print.

The Effect of Hormone Replacement Therapy on Cognition and Mood

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Objectives: To summarise the available data regarding the effect of HRT on cognition and mood in women. **Background:** Complaints of impaired cognition and mood are common in the peri-menopausal and menopausal period. There is debate as to whether hormone replacement therapy (HRT) can ameliorate this phenomenon. **Design:** A literature search of studies using electronic databases was conducted. Both randomised control trials and observational studies were included. **Patients:** Perimenopausal and menopausal women **RESULTS:** Due to the heterogenicity of results it is challenging to draw firm conclusions. The preparations used in many of the studies are older regimes no longer routinely used clinically. The notion of a 'critical window' for HRT is compelling, suggesting HRT has a positive impact on cognition when administered in the peri-menopausal or early postmenopausal period but may have negative effects on cognition in the older, postmenopausal woman. The evidence would seem to suggest importance of hormonal replacement in woman undergoing a surgical menopause, especially when young. It remains unclear for how long they ought to continue HRT though until at least the natural age of the menopause seems reasonable. Evidence for a positive effect of HRT on mood is more convincing, though possibly more efficacious in the younger age group. The effect of HRT on anxiety is less clear. **Conclusions:** Further study, particularly focusing on the more contemporaneous HRT preparations, is warranted before evidence-based conclusions can be drawn.

J Educ Health Promot. 2022 Sep 28;11:287. doi: 10.4103/jehp.jehp_1253_21. eCollection 2022.

Prevention of osteoporosis in menopausal women: A systematic review of nonpharmacological clinical trials

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Osteoporosis is a systemic skeletal disease that is associated with negative physical and psychosocial consequences, so understanding the effective strategies that can be used in the prevention of osteoporosis is especially important. The aim of this study was to integrative review the published interventional of nonpharmacological studies regarding the prevention and treatment of osteoporosis among menopausal women. In this systematic review, databases such as PubMed, PsycInfo, Web of Science (ISI), Scopus, ScienceDirect, EmBase, Cochrane library, Google scholar, and Iranian databases, such as Scientific Information Database and Magiran, were searched. The latest search was performed between "November 2020 and December 2020" separately by two researchers and then double-checked by them. The quality of the included studies was assessed using the Jadad score calculation tool. Twenty eight randomized controlled trials and quasi-experimental studies were included in this current study. The quality assessment indicated that 19 studies had acceptable (good) methodological quality and also 9 studies had weak methodological quality. The main results of this study were classified in three main categories such as exercise or physical activity training (n = 15), educational sessions (n = 11), and other interventions (n = 2). The results of most included studies showed that nonpharmacological strategies such as physical activity and educational interventions are considered as the appropriate actions to prevention of osteoporosis among menopausal women so implementing these strategies can be a good alternative for women with contraindication of hormone therapy or therapeutic treatment.