

The Women's Health Research Program

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Moderate-severe vasomotor and sexual symptoms remain problematic for 60-65 year old women

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* joint first authors.

A new study by Pragya Gartoulla and Roisin Worsley, undertaking their PhDs in the Women's Health Research Program, and published online by the journal *Menopause* in December, gives a snap shot of the menopause experience of Australian women.

The study involves 2020 women, aged 40 to 65 years, recruited from across Australia between October 2013 and March 2014. The women completed a comprehensive questionnaire that included questions about menopausal symptoms.

Key findings include:

- ¾ postmenopausal women aged less than 55 years old have hot flushes/night sweats, with over ¼ of women of this age having moderate-severe symptoms
- 42% of women aged 60-64 have hot flushes/ night sweats and 6.5% of women of this age have moderate-severe symptoms.

Factors associated with having with moderate—severe flushes and sweats include smoking and being overweight, whereas education beyond high school was associated with a lower likelihood of severe symptoms.



Despite symptoms being common, few Australian women are using HRT—only 6% are using menopausal hormone therapy and less than 1% are using non-hormonal medications that have been shown to reduce hot flushes and sweats.

Over 2/3rd of all postmenopausal women are experiencing sexual symptoms. But the prevalence of the use of vaginal oestrogen to treat vaginal dryness is remarkably low considering the safety and effectiveness of this therapy.

This paper highlights that:

1. moderate—severe menopausal symptoms are common;
2. few Australian women are receiving effective therapy (either hormonal or non-hormonal) to manage their menopausal symptoms; and
3. although vaginal oestrogen therapy is safe and effective for the treatment of vaginal and urinary tract oestrogen deficiency symptoms, very few women are being prescribed this therapy. ▶



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So the question is *why are women not being treated?*

The International Consensus is that for most symptomatic women under the age of 60 years / less than 10 years post menopause, the benefits of menopausal hormone therapy outweigh the risks¹. The benefits include alleviation of symptoms, improved sleep, bone loss and fracture prevention, cardiovascular

protection and improved quality of life. Risks of therapy vary between women and can be minimized by the choice of hormone preparation(s)². For women with contraindications to hormone therapy there is a range of effective options.

If hot flushes, night sweats and other menopausal symptoms are bothering you, speak to your doctor about treatments that will help.

1. de Villiers TJ, Gass ML, Haines CJ, Hall JE, Lobo RA, Pierroz DD, Rees M (2013) *Global Consensus Statement on menopausal hormone therapy. Maturitas 74:391-392*
2. Jane FM, Davis SR (2014) *A Practitioner's Toolkit for Managing the Menopause. Climacteric 1-16*

Get involved in Research

A study on the absorption of testosterone cream (ANDROFEME®) in healthy postmenopausal women

Testosterone is a sex steroid hormone found in women and men. In women, testosterone is changed into other hormones including oestrogen. Testosterone levels decrease with age.

Testosterone therapy in women has been shown to improve libido and the feeling of wellbeing. ANDROFEME® cream is currently the only available testosterone product prescribed by doctors in Australia and although it is in widespread clinical use, the appropriate application area for the best effect has not been studied. In this study we will assess the absorption of testosterone

using two different sized application areas of ANDROFEME® cream.

Your participation will involve 6 visits to the Alfred Centre in Prahran [Melbourne]. You will be allocated to be treated with two different sized application areas of Androfeme over 2 months.

You may be able to participate in this study if you:

- are a post-menopause woman aged between 45-65 years; and
- are in a general good health.

You will be reimbursed \$200 for your time.

If you would like more information regarding this study please contact Jenny Adams on 03 9903 0333 or Corallee Morrow on 03 9903 0336 at the Women's Health Research Program womens.health@monash.edu

A New Study for Women Taking Tamoxifen to Treat Breast Cancer

Women taking tamoxifen as part of their breast cancer treatment program are invited to participate in this study

Tamoxifen is a highly effective medication used to treat women with hormone sensitive breast cancer—it prevents recurrence and prolongs survival. However it promotes uterine cell growth, and when used for many years, has been associated with an increased rate of uterine cancer.

We have been funded by the NHMRC to conduct a study to assess whether the medication metformin will prevent uterine cancer in women taking tamoxifen.

We are seeking women who are taking tamoxifen therapy, are postmenopausal and under the age of 75 to participate in our study.

Each woman joining the study will have an ultrasound to look at her uterus and ovaries performed by an expert gynaecologist. Any woman found to have an abnormally thickened uterine lining will be investigated further. Women will then be randomised to take metformin or placebo tablets twice a day for 12 months, after which they will again have an ultrasound, and if necessary, a biopsy—at no cost to them.

Women who participate in the study will benefit by having monitoring of their uterine lining while on tamoxifen, which is not part of standard care, and insulin/glucose testing.

Participants will be seen at the Women's Health Research Program at the Alfred Centre (Alfred Hospital) Melbourne, but will stay under the care of their own breast cancer

doctors through the study, and continue on their own treatment plan. We have streamlined the study to minimise demands on participants.

If you wish to take part in the study you can contact us by email: med-pecam@monash.edu or phone 03 9903 0833 or 03 9903 0836.

Women's Health Research Program

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