

Update on Menopause and Osteoporosis



Society of Obstetricians and Gynaecologists of Canada

Media Webinar

Thursday, October 16th, 2pm

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World Menopause Day – Oct 18
World Osteoporosis Day – Oct 20



- A perfect time to highlight this important transition in a woman's life and an opportunity to educate women, their families, and health care providers on the most up to date health information on menopause and osteoporosis.

New clinical guidelines:

Managing Menopause and Osteoporosis in Menopause



- The SOGC has undergone a rigorous scientific review of its guidelines in order to update recommendations for health care providers and ensure that women are receiving the highest standards of care.
- The new guidelines highlight lifestyle changes and available therapies for women dealing with menopause symptoms, issues of sexuality and menopause, and directions for assessing and preventing other health conditions that affect women of menopause age.

Menopause – a few interesting facts



- 95% of Canadian women will experience menopause after 45 years of age.
- Hot flashes can be linked to other causes, such as use of certain drugs; thyroid disease; or epilepsy.
- The female body undergoes significant changes with age, some of which may affect a woman's sexuality.

Menopause

What women need to know



- Evidence shows that a healthy lifestyle helps counter some of the health issues that arise with menopause and perimenopause, including undesirable symptoms such as hot flashes, night sweats, aches and pains.
- Lifestyle changes also help to maintain an active mind (preservation of memory and cognition); prevent osteoporosis; and reduce the risk of urinary incontinence.

Lifestyle changes - Diet



- A healthy diet can help offset the symptoms of menopause and prevent or reduce certain conditions.

Recommendation:

- ✓ Eat plenty of fruits, vegetables, and fibers.
- ✓ Reduce or avoid foods that are high in sodium and sugar.
- ✓ Replace foods with saturated or trans fats for those with unsaturated fats instead.
- ✓ Take vitamin D and calcium supplements daily.



Lifestyle changes - Exercise

- Science confirms that regular exercise delivers physical and emotional benefits to women dealing with the symptoms of menopause. It reduces stress, helps with weight management, helps prevent osteoporosis by building bone and muscle strength, and contributes to a general feeling of wellbeing.

Recommendation: 150 minutes of moderate to vigorous physical activity per week, in bouts of 10 minutes.

Lifestyle changes – Weight management



- During the menopause transition women gain an average of five to nine pounds.
- After menopause our metabolism slows, our bodies begin to burn fat at a reduced rate, and there are changes in how we handle fat- leading to an accumulation of abdominal fat- the “apple” shape, instead of the “pear”.

Recommendation: A healthy diet and moderate exercise can help prevent unwanted weight gain.

Lifestyle changes – Tobacco, Alcohol, Caffeine



- On average, women who smoke experience menopause two years before non-smokers.
- Research suggests that alcohol consumption can make certain menopause symptoms worse—such as hot flashes, sleep disruption and depression.
- Too much caffeine can provoke hot flashes and disrupt sleep.

Recommendation: Consider menopause a good time to quit smoking; limit consumption of alcohol and caffeine.

Menopause

Non-hormonal therapies



- For some women, hormone therapy is not an option. But other prescription medications can be effective treatments for hot flashes:
 - Venlafaxine (an antidepressant)
 - Paroxetine and fluoxetine (selective serotonin reuptake inhibitors)
 - Gabapentin (used to treat various neurological disorders)
 - Clonidine (antihypertensive drug)

Menopause Hormone therapy



- As women age their hormone levels naturally decrease. This can cause physical and emotional changes that can be troubling, such as hot flashes and mood swings.
- Hormone therapy (HT) is the most effective treatment option for moderate to severe menopausal symptoms such as hot flashes, night sweats, mood swings, insomnia, difficulty concentrating and vaginal dryness.

Menopause and Breast Cancer



- There is a known link between estrogen and breast cancer. The magnitude of this risk has not changed over 20 years, but our understanding has increased.
- The risk of breast cancer is higher with use of progestin therapy than with estrogen alone therapy.
- The majority of women only use hormone therapy for a short term and the risk of breast cancer drops back to baseline once the therapy has ended.

Menopause and Sexuality



- We don't stop being sexual when we hit menopause, sexual difficulties do increase- and most women are reluctant to initiate a discussion about problems.
- Doctors and HCP should start the conversation.
- Women and their partners should be encouraged to talk to their doctor and learn about the changes affecting sexuality that occur as women age.

Menopause and Sexuality



- About half of post-menopausal women report experiencing vaginal dryness, soreness and/or pain during intercourse.
- A variety of solutions including estrogen therapies, antibiotics and applied creams are available to help overcome these challenges.

Osteoporosis



- Osteoporosis is a skeletal disease that reduces bone mass, erodes bone tissue and compromises bone strength. As women age and approach menopause, estrogen production slows, putting them at increased risk of developing osteoporosis.
- Research has shown that women can lose as much as 30 percent of their bone mass in the 10 years following menopause, posing serious health concerns.

Osteoporosis



Prevention is key!

- ✓ Vitamin D supplements and weight-bearing exercises such as walking help maintain strength, balance and flexibility;
- ✓ Calcium supplements help preserve bone density;
- ✓ Women who smoke can reduce their risk of osteoporosis significantly by quitting.

Recommendations for health care providers



- The SOGC's new clinical guidelines emphasize the role of the health professional for ensuring health promotion and disease prevention.
- Menopause presents a good opportunity to check the woman's overall health to assess her risk of other conditions such as diabetes, cardiovascular disease, and hypertension.

SOGC's role



- The SOGC is committed to providing evidence-based health information to the public and ensuring that health professionals are providing the best standard of care to their patients.
 - Continuous medical education for health professionals
 - Test your Menopause IQ
 - Updated clinical practice guidelines
 - Public education website menopauseandu.ca
 - Patient brochures and fact sheets