

Mater CPD Women's Health Conference 2010



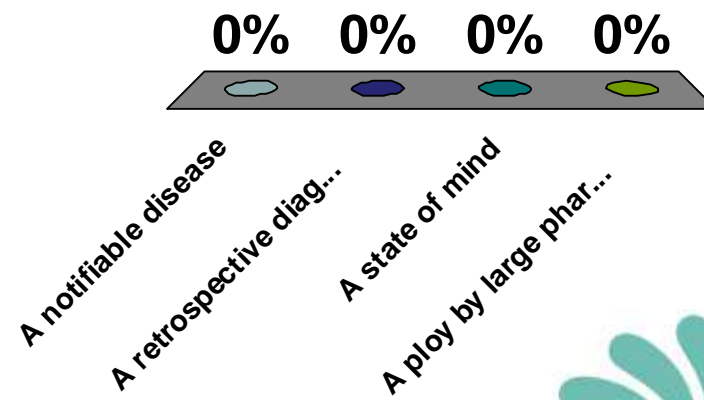
Dr Gillian van Iddekinge Obstetrician and Gynaecologist

Management of Menopause



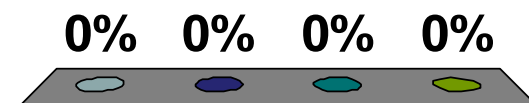
Menopause is:

1. A notifiable disease
2. A retrospective diagnosis
3. A state of mind
4. A ploy by large pharmaceutical companies



Management of the Menopause should include:

1. 6 monthly physical, pelvic and breast examinations
2. Annual blood lipid and bone density estimations
3. Annual pap smears
4. Advice on life style factors



6 monthly physical, pe...

Annual blood lipid a..

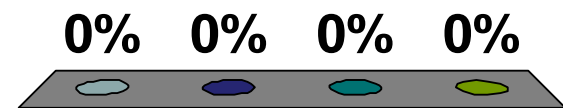
Annual pap smears

Advice on life style fa...



Hormone Replacement Therapy (HRT):

1. Has been clearly shown to alleviate menopausal symptoms compared to placebo
2. May increase bone density and reduce fracture risk
3. Can be prescribed for the primary prevention of long term disease
4. Increases stroke risk



Has been clearly sho..

May increase bone d...

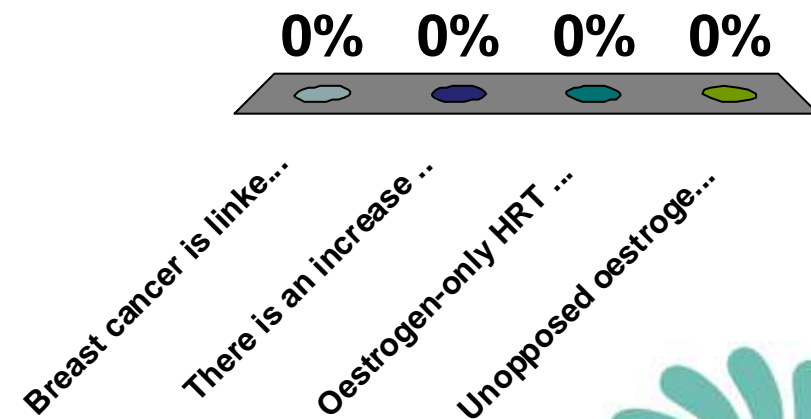
Can be prescribed for ...

Increases stroke risk



HRT and Cancer

1. Breast cancer is linked to continuous combined HRT
2. There is an increase in ovarian cancer with HRT
3. Oestrogen-only HRT increases the risk of breast cancer
4. Unopposed oestrogen does not increase the risk of endometrial cancer



Hormone therapy advice

1. Should be initiated for the prevention of coronary artery disease
2. The use of HRT doubles the risk of Venous Thromboembolic Events
3. HRT offers a degree of prevention against dementia
4. For otherwise healthy women with moderate to severe symptoms, the benefits of short term HRT are likely to outweigh the risks

0 of 60

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Should be initiated for ...

The use of HRT doubl..

HRT offers a degree o...

For otherwise health...



Special considerations

1. All women should be reviewed at least two yearly
2. The lowest effective dose of HRT should be prescribed
3. HRT should be ceased after 5 years in women who undergo an early menopause
4. Complementary therapies are safe

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All women should be ...

The lowest effective ...

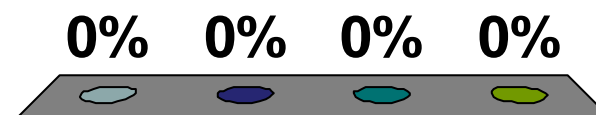
HRT should be cease...

Complementary thera...



Management of the Menopause after Breast Cancer

1. Counselling should include discussion of the certain risks/benefits of HRT after Breast Cancer
2. Evidence-based non-hormonal options should first be considered
3. Local vaginal oestrogen in limited quantities may improve urogenital symptoms
4. Oestrogen only therapy or oestrogen therapy with local progestogen (eg MIRENA) has no benefit over combined HRT



Counselling should i...

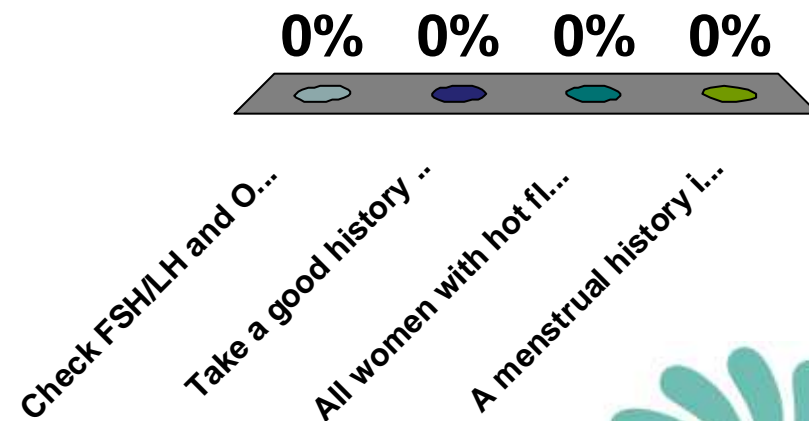
Evidence-based non...

Local vaginal oestrog..

Oestrogen only ther...

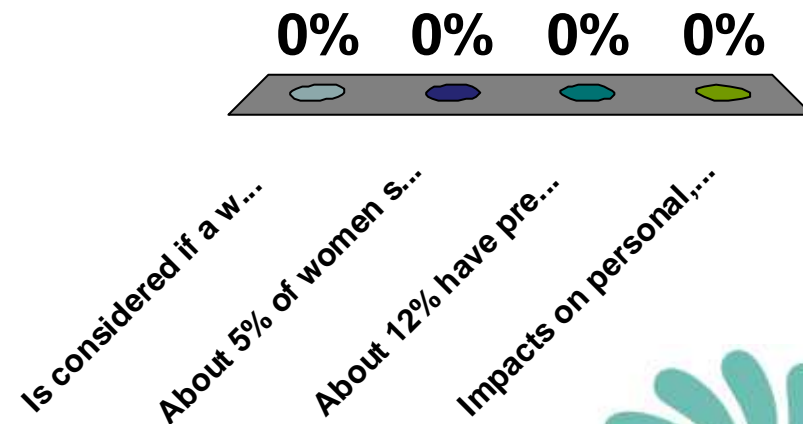
Diagnosing menopause

1. Check FSH/LH and Oestradiol levels
2. Take a good history of menopausal symptoms
3. All women with hot flushes will require HRT initially
4. A menstrual history is non-contributory



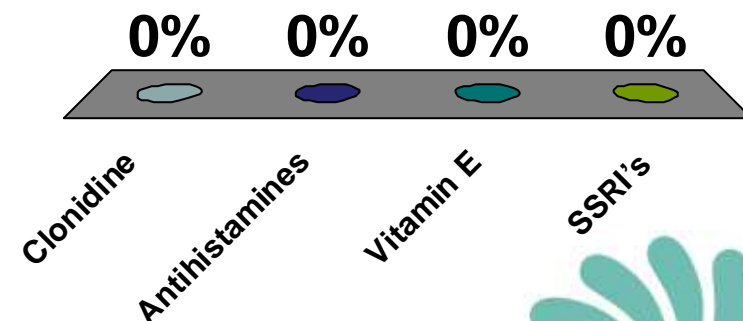
Premature Menopause

1. Is considered if a women younger than 45 when she becomes menopausal
2. About 5% of women suffer from premature menopause
3. About 12% have premature menopause due to surgery, chemotherapy or radiation
4. Impacts on personal, sexual, social and psychological issues for women



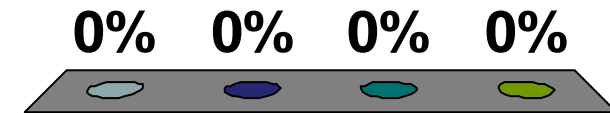
Non Hormonal Treatment for Menopausal Symptoms do not include:

1. Clonidine
2. Antihistamines
3. Vitamin E
4. SSRI's



Contraception when you're approaching Menopause:

1. Pregnancy without contraception at the age of 50 is impossible
2. If over 50 continue to use contraception for 24 months after their last period
3. If under 50 continue use of contraception until a women has had no period for 24 months
4. The MIRENA should only be used for cycle control and not contraception after 45 years of age



Pregnancy without c...

If over 50 continue t...

If under 50 continue u...

The MIRENA should ...