

Selección de Resúmenes de Menopausia

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Analyzing 10-year time trends for Hysterectomy and Oophorectomy: Focus on Endometrial sampling and risk factors for Endometrial Cancer

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Background: Hysterectomy is a versatile and commonly employed treatment option for various benign and malignant gynecological conditions. Our study aims to take a comprehensive perspective on hysterectomy over the years using accumulated data and provide clinicians with an accurate insight into the hysterectomy operation. **Material-method:** This retrospective observational study was conducted on women who underwent hysterectomy at our clinic between 2012 and 2021. Comprehensive medical histories of all patients were thoroughly reviewed as the primary data. Surgical procedures were categorized and compared by year. Operation indications, preoperative endometrial sampling, and the pathology results of the final hysterectomy specimens were also examined. Risk factors were evaluated in confirmed cases of endometrial cancer and atypical endometrial hyperplasia based on pathology results. The analyses were performed using IBM SPSS 20 statistical analysis software. **Results:** In our study, 752 patients (mean age: 52 ± 8.2) underwent various hysterectomy procedures, with total abdominal hysterectomy being the most frequent (73.3%). The primary indication was uterine leiomyomas-adenomyomas (33.5%). Endometrial sampling was performed in 57.2% of patients, showing no significant difference in reliability ($p=0.143$) and endometrial cancer diagnosis ($p=0.334$). Among 38 patients diagnosed with endometrial cancer, approximately 28.9% (11 patients) did not undergo preoperative endometrial sampling. Further examination revealed that these patients were obese, 63.6% presented with spotting-like bleeding, and most were in the postmenopausal period. Risk factors for these patients and those with atypical hyperplasia indicated statistically significant positive family history ($p=0.037$) and estrogen therapy history ($p=0.028$). Out of 536 oophorectomies, 236 were performed in women under 50. **Conclusion:** The study highlights the need to implement the current literature and promote minimally invasive approaches. Widespread adoption of non-hysterectomy options is essential for rate reduction. Physicians must integrate current literature, refine skills in minimally invasive methods, and advance surgical techniques to achieve an idealized approach for premalignant lesions and endometrial cancer. Presenting clinic data to personalize algorithms and treatments will strengthen the literature, enhancing the field and increasing the applicability of knowledge for personalized implementation of ideal algorithms and treatments.

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Dark Chocolate Elevates Resting Energy Expenditure in Postmenopausal Women

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Several recent reports have indicated positive health benefits of consuming (-)-epicatechin-rich cocoa products. Postmenopausal women are predisposed to reduced metabolism due to decreased levels and activity of the sex hormones estrogen, progesterone, and estradiol. The purpose of this study was to investigate the influence of dark chocolate consumption on resting and exercise metabolism in postmenopausal women. Using a randomized, double-blind design, 26 postmenopausal participants were assigned to a 30-day supplementation with 20-g per day of 72% dark chocolate (DC) or calorically matched white chocolate (WC). Before supplementation, participants underwent two control trials for assessments (PRE1, PRE2) of resting energy expenditure (REE) and exercise energy expenditure (EEE). Following the

PRE2 assessment, participants were randomized and supplemented for 30 days, after which they repeated the assessments for REE and EEE. PRE1 and PRE2 REE and EEE were not significantly different within or between groups (REE: PRE1 DC 1215 ± 170 , WC 1127 ± 174 , $p=0.662$; PRE2 DC 1211 ± 174 , WC 1145 ± 165 kcal/d, $p=0.720$; EEE: PRE1 DC 3.67 ± 0.72 , WC 3.40 ± 0.81 , $p=0.665$; PRE2 DC 3.41 ± 0.88 , WC 3.39 ± 0.73 kcal/min, $p=0.373$). Post-supplementation REE was significantly increased by 3.2% in the DC group (Pre-Post change: DC 38.6 ± 49 , WC -15 ± 31.2 kcal per day, $p=0.039$, Cohen's $d=0.724$ [95% CI: 0.078, 1.513]). These results indicate that DC supplementation in postmenopausal women was associated with a significant 3.2% increase in REE with no significant influence on EEE.

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Handgrip strength and menopause are associated with cardiovascular risk in women with obesity: a cross-sectional study

Jaqueline de Paula Chaves Freitas 1 2, Joyce Noelly Vitor Santos 1 3 2, Daniela Barreto de Moraes, et al. Background: While physical performance is closely linked to cardiovascular health, further research is essential to elucidate the association of physical tests in the early screening for cardiovascular risk (CVR), underscoring the potential for these assessments to enhance preventive healthcare strategies. Objectives: To investigate the association between the Handgrip Strength (HGS) test and CVR in women obesity, as well as to evaluate the predictive value of the HGS test as a CVR screening tool in this population. Methods: Fifty-five eligible women with obesity, aged 40 to 65 years, were studied. The Framingham Global Risk Score was used to classify participants into low-risk and moderate/high-risk groups. Dual X-ray Absorptiometry was used to assess body composition. Additionally, clinical and biochemical parameters, along with HGS, were evaluated. Data were analyzed using the logistic regression analysis, and the positive and negative predictive values were calculated; accuracy was defined through the ROC curve and the Youden index. Statistical significance was set at 5%. Results: The prevalence of the moderate/high CVR was 49%. The menopause [0.14 (0.03-0.52), $p=0.003$] and handgrip strength [0.90 (0.82-0.99), $p=0.046$] were associated with cardiovascular risk, independent of the clinical and biochemical parameters. The optimal cutoff points for screening CVR were ≤ 37.8 kg for HGS [AUC = 0.73 (0.59-0.84), $p=0.003$]. Conclusion: HGS and menopause are significantly associated with CVR in women with obesity, highlighting the importance of considering physical evaluation in early clinical screening for CVR. The simple measure of HGS emerged as a promising tool for cardiovascular prevention in this population.

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Vitamin D sufficiency and its relationship with muscle health across the menopausal transition and aging: Finnish cohorts of middle-aged women and older women and men

Satoshi Fujita 1, Hannamari Lankila 2, Kaisa Koivunen 2, Matti Hakamäki 3, Sarianna Sipilä 2, et al. Background: Finland's national vitamin D fortification policy has significantly improved the population's vitamin D sufficiency. This study investigates the association between serum vitamin D concentration and muscle health, considering the impact of menopause and aging in Finnish cohorts. Methods: The study comprised two cohorts: 237 middle-aged women (aged 47-55 years) from the Estrogenic Regulation of Muscle Apoptosis (ERMA) study and its follow-up, and 908 older adults (aged 75, 80, and 85 years) from the Active Aging (AGNES) study. Vitamin D concentration was assessed through serum 25-hydroxyvitamin D (25(OH)D) concentrations, alongside measurements of muscle mass and function. Results: High concentrations of 25(OH)D were observed across both cohorts, aligning with Finland's fortification efforts. Furthermore, no significant correlations were found between 25(OH)D concentrations and indicators of muscle mass or function in either age group. Notably, middle-aged women in menopausal transition exhibited a slight increase in 25(OH)D concentrations, yet this did not translate into improved muscle outcomes. Similarly, older adults demonstrated sufficient 25(OH)D concentrations without a corresponding

enhancement in muscle health. Conclusions: The findings indicate that, within the context of Finland's vitamin D fortification program, serum 25(OH)D sufficiency does not directly correlate with better muscle mass or function among middle-aged and older Finnish populations. These results suggest a need for a broader approach to sarcopenia prevention, incorporating factors beyond vitamin D sufficiency. Further research is warranted to explore the multifactorial nature of muscle health during aging and the menopausal transition, to develop targeted interventions for sarcopenia prevention.

Gynecol Endocrinol. 2025 Dec;41(1):2484213. doi: 10.1080/09513590.2025.2484213. Epub 2025 Apr
Changes in menopause-specific quality of life between women with transdermal estradiol versus oral estrogens: results of a randomized controlled trial

Ruiyi Tang 1 2, Yubo Fan, Xiangyan Ruan 3, Zhifen Zhang 4, Mulan Ren 5, Jie Wu, Kuanyong Shu, et al. Objective: To compare the efficacy of oral and transdermal estrogens in improving the quality of life in perimenopausal and recently postmenopausal women. Methods: 257 women aged 40-55 years, within three years after their final menstrual period were randomized to receive transdermal oestrogen (t-E2) (n = 128) or oral estradiol valerate (o- E2V) (n = 129; both with micronized progesterone 200 mg for 14 days each month). Menopausal symptoms were recorded at screening and at 4, 12, and 24 weeks post-randomization. Menopausal symptoms were evaluated using the Menopause-Specific Quality of Life (MENQOL) questionnaire. Results: Significant improvements of MENQOL scores were observed in both groups compared with baseline. The decrease of MENQOL scores after treatment showed almost no difference between the two groups ($p > 0.05$) except the VMS domain which indicated a better result in oral estrogen group after 24 weeks. Conclusions: This study showed that both transdermal and oral estrogens were highly effective in relieving the overall menopausal symptoms for recently-menopausal women, with little difference in treatment efficacy between the two routes.

J Occup Environ Med. 2025 Mar 28. doi: 10.1097/JOM.0000000000003403. Online ahead of print.
Cross-sectional study of the association of menopausal symptoms with presenteeism among female employees of a Japanese company

Tomoichiro Kuwazuru 1, Makoto Okawara, Naoaki Ohkubo, Tomohiro Ishimaru, Seiichiro Tateishi, et al. Objective: This study examined the impact of menopausal symptoms on presenteeism among middle-aged female workers. Methods: A cross-sectional study was conducted in 2023 among 553 female employees of a Japanese manufacturing company. Menopausal symptoms were assessed using the Menopause Rating Scale (MRS). Logistic regression analysis was performed to assess the association between menopausal symptoms and presenteeism. Results: Menopausal symptoms were significantly associated with presenteeism. The odds ratio (OR) for severe total MRS scores was 19.71 (95% CI: 5.23-74.35). Psychological symptoms had the highest OR, at 94.50 (95% CI: 12.22-730.67), followed by somatic (OR = 3.80, 95% CI: 1.04-13.88) and urogenital symptoms (OR = 4.48, 95% CI: 1.64-12.25). Conclusion: Menopausal symptoms are a significant workplace health issue that should be addressed through targeted policies and support to maintain employee performance.

Presentismo. Ocurre cuando un empleado acude al trabajo, cumple su horario, pero no aporta nada más allá de su presencia.