

## Menopause - A signal for the future



“The ovaries, after long years of service, have not the ability of retiring in graceful old age, but come irritated, transmit their irritation to the abdominal ganglia which in turn

transmit the irritation to the brain, producing disturbances in the cerebral tissue exhibiting themselves in extreme nervousness or in an outburst of actual insanity”.

This quotation written in 1887 was the stereotypical inaccurate thinking promulgated over the years regarding the menopause. Through out recorded history, multiple physical and mental conditions have been attributed to it. On the contrary, the menopause should and can mark the beginning of a positive and promising period of life, one relatively free from previous obligations and ready for new career choices, more education and new ventures.

In 1960, the world population of those over the age of 60 did not exceed 250 million people; in 2020, over one billion individuals will be over the age of 60, and two thirds of these will be living in affluent countries. The average life expectancy of a woman close to the age of 50, that is to say - close to the age of menopause - is 25 years.

Menopause, therefore, is becoming a major public health issue. In spite of the numerous acknowledged benefits

of Hormone Replacement Therapy (HRT), the percentage of women undergoing treatment is still nevertheless relatively low. The role of preventive health care in successful aging is yet to be defined. An appropriate goal is to have healthy and independent elders who maintain physical and cognitive functions as long as possible. Said in a different way, our goal is to maximise “active life expectancy”, the duration of functional wellbeing and the maintainance of independence in the activities of daily living.

Menopause should serve to remind patients and clinicians that this is the time for education. Certainly, preventive health care education is important throughout life, but at the time of menopause, a review of the major health issues can be especially rewarding. Excellent data from epidemiologic studies and clinical trials demonstrate a decline in morbidity and mortality from smoking cessation, blood pressure reduction and lowering cholesterol.

We can now recognise that there is a strong scientific basis for preventive medicine and health promotion efforts in clinical practice. Post-menopausal HRT deserves consideration as a legitimate component of preventive health care for elder women. One can argue convincingly that protection against Cardio Vascular Disease (CVD) is the major benefit of post-menopausal estrogen treatment and the magnitude of the benefit is considerable. After the age of 50 years, more women die of Cardiovascular disease (CVD) than men. There is a 46% chance of the occurrence of CVD and a 31% chance of dying from it. Risk factor modification by HRT leads to a 43% decline in Cardiovascular Death Rates in women. We owe women the right to realize the benefits of these scientific advances.

Estrogen therapy will stabilise the process of

osteoporosis or prevent it from occurring. With estrogen therapy, there is a 50% to 60% reduction in fracture of the arm and hip. When estrogen is supplemented with calcium, a 80% reduction in vertebral compression fractures can be observed. This reduction is seen primarily in patients who have taken estrogen for more than 5 years. If bone loss can be delayed for 8 years, fracture incidence can be reduced by 75%.

As regards Cancer & HRT, metaanalysis of different studies leads to the conclusion that there is an incremental increase of roughly 2% per year in breast cancer risk due to ERT. Allele specific PCR assays and oligonucleotide assays help us to identify the mutations in BR CaI & II in patients with family history of Cancer Breast, thereby providing us with better guidance and monitoring of the patient. According to some latest sophisticated calculations using the best available epidemiological data, approximately six deaths from heart disease are likely to be prevented for each incident case of breast cancer induced by such therapy.

Proper counselling at menopause involves total evaluation of the patient and the individual needs of the woman herself should be the driving force behind the choice of the prescription. A total awareness regarding risks and benefits should be imparted. Fear of cancer of breast and uterus and bleeding, against the real life long benefits of HRT with marked improved quality of life should be stressed.

### **Designer Estrogens**

Dramatic research findings have recently focused new

attention on so-called "Designer Estrogens". These compounds, known more technically as selective estrogen receptor modulators (SERMs) have evolved from mere laboratory curiosities into drugs that hold promise for preventing several major disorders in women. These agents behave like estrogens in some tissues but block its action in others.

Tamoxifen, the first known SERM, has extended millions of lives by acting as an antiestrogen in breast cancer cells. After it was introduced as an antiestrogen, recognition of its estrogenic aspects led to the study of other SERMs that are antiestrogenic in some tissues but estrogenic in others. Evaluations of those agents, and especially of raloxifene, then led to the prediction that certain SERMs might spare many women from osteoporosis, heart disease, breast cancer and endometrial cancer. Today that prediction shows strong signs of coming true.

New SERMs are in the pipeline. One day women and their doctors may be able to select substitutes for estrogen replacement therapy and cancer preventives on the basis of each patient's unique set of risks and worries. If SERMs fulfil their promise, they should greatly improve women's health in the 21st century.

Contrary to popular opinion, Menopause is not the signal for impending decline, but rather a wonderful phenomenon that can signal the state of something positive, a good health programme. Rather than being a lightning rod for social and personal problems, the menopause can be a signal for the future.

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