

FOR IMMEDIATE RELEASE

Menopause management has been much debated in recent years, but what are the conclusions?

~ Canadian Experts provide updated information on the treatment of Women and Menopause, in the 2006 Menopause Consensus Report ~

OTTAWA, Ontario (February 7, 2006) – The Society of Obstetricians and Gynaecologists of Canada (SOGC) released today the 2006 Menopause Consensus Report ('The Report'), an updated resource which brings together all relevant clinical and scientific information about menopause management, including clinical studies from the past few years. The Report, a result of the work of a multi-disciplinary panel of experts, is designed to provide Canadian physicians with the most current information and expert opinion with which to counsel and treat their patients.

The Report provides practical guidelines for physicians on the management of menopause in healthy women not currently experiencing any symptoms, as well as in women presenting with vasomotor symptoms (e.g., hot flashes or night sweats), urogenital and sexual concerns (e.g., recurrent urinary tract infections or vaginal dryness), and mood and memory difficulties. The Report also addresses specific medical considerations, including cardiovascular disease, osteoporosis and cancer.

"The experience of menopause is unique to every woman, but there is a thread of symptoms and associated problems that is common to all. What we need is reliable information based on evidence, so that these menopause associated problems could be managed appropriately," said Dr. Michael Helewa, Professor of Obstetrics and Gynaecology at the Department of Obstetrics, Gynaecology and Reproductive Sciences, University of Manitoba, Head of Clinical Obstetrics at St. Boniface General Hospital in Winnipeg, Manitoba and President of the SOGC.

- more -

2006 SOGC MENOPAUSE CONSENSUS REPORT/2

“This Consensus Report offers treatment modalities based on the most current scientific evidence available, modalities that will help improve the health and quality of life of Canadian menopausal women. This document also provides physicians with the information they need to help women make safe and reasonable choices in the management of menopause symptoms and to improve the chances for women in achieving long-term health and wellness.”

The expert panel of endocrinologists, gynaecologists, public health and family physicians, a cardiologist and a psychiatrist, reviewed all pertinent evidence published in peer-reviewed journals. The SOGC published the first Menopause Consensus Report in 1994 and has published two updates since then, most recently in 2002.

THE REPORT RECOMMENDATIONS

The 2006 Menopause Consensus Report is a comprehensive document that will be published in the February issue of the *Journal of Obstetrics and Gynaecology of Canada* (JOGC). Key subjects in the Menopause Report fall within five major pillars: Lifestyle and Wellness, Symptomatic Treatment, Urogenital/Sexual Health, Cancer and Osteoporosis.

“The report has been updated at this time to incorporate new clinical evidence that has become available in the past few years” explained Dr. Helewa. “Our goal at the SOGC, is to ensure that physicians and women have access to complete information so that women need not suffer because of fears based on unreliable information”.

Key recommendations in the Menopause Report include:

- ~ Health and Wellness: Health care providers should discuss and encourage menopausal women to make healthy lifestyle choices, especially with respect to nutrition and exercise.
- ~ Symptomatic Treatment: SOGC recommends health care providers offer hormone therapy as the most effective option for the medical management of menopausal symptoms (e.g. hot flashes, night sweats, changes in mood). The primary indication for systemic hormone therapy is for the management of moderate to severe menopausal symptoms. The Report recommends hormone therapy is prescribed at the lowest effective dose.

- more -

2006 SOGC MENOPAUSE CONSENSUS REPORT/3

THE REPORT RECOMMENDATIONS (CONT'D)

- ~ Urogenital/Sexual Health: Local estrogen therapy (applied directly in a specific area) is recommended if hormone therapy is prescribed for vulvovaginal symptoms alone, such as vaginal dryness; vulvar soreness, discharge, urinary urgency and frequency; and/or recurrent lower urinary tract infection.

- ~ Cancer: Breast cancer risk continues to be a key consideration for physicians and their patients. The increased risk for breast cancer after five years of combined estrogen/progestin hormone therapy (systemic hormone therapy) is similar in magnitude to other lifestyle variables such as fewer pregnancies after 30 years old, reduced breast-feeding, postmenopausal obesity, excessive alcohol or cigarette use and lack of regular exercise.

- ~ Osteoporosis: Evaluation of osteoporosis in postmenopausal women should include the assessment of clinical risk factors for low bone mineral density (BMD) and BMD testing. Hormone therapy should be prescribed to symptomatic postmenopausal women as the most effective therapy for symptom relief and a reasonable choice for the prevention of bone loss and fracture. The risks should be weighted against the benefits if estrogen therapy is being used solely for fracture prevention.

ABOUT MENOPAUSE

The average age of menopause is 51. Menopause is the loss of ovarian function, and is confirmed when a woman has not had a menstrual period for a 12-month period. Perimenopause is the time leading up to menopause, when the body begins to produce smaller amounts of female hormones (estrogen and progesterone). And postmenopause begins when a woman has reached menopause, and is a time when she has some additional long-term age-related health considerations such as the development of osteoporosis and cardiovascular disease. As a woman approaches menopause, it is a good opportunity to assess overall health and lifestyle and address potential long-term health issues.

- more -

2006 SOGC MENOPAUSE CONSENSUS REPORT/4

ABOUT MENOPAUSE (CONT'D)

There are currently approximately four million Canadian women who are now, or have in the past, reached menopause. By 2026, it is estimated that women over the age of 50 will make up 22 per cent of the Canadian population.

ABOUT THE SOGC

Founded in 1944, the Society of Obstetricians and Gynaecologists of Canada is comprised of over 2,700 professional members, including gynaecologists, obstetricians, family physicians, nurses, midwives and allied health professionals. A leading authority on reproductive health care, the SOGC produces national guidelines for both public and medical education on important women's health issues. The Society's mission is to promote optimal women's health through leadership, collaboration, education, research and advocacy in the practice of obstetrics and gynaecology. For more information about the SOGC, please visit www.sogc.org.

- 30 -

For more information, a copy of the Report, or an interview with an SOGC representative, please contact:

Nancy Bickford
SOGC
Tel.: 1-800-561-2416
or 613-730-4192, ext. 330

Daphne Weatherby
Edelman
Tel.: 514-844-6665, ext. 225

* The Journalist's Menopause Handbook, a companion guide to the SOGC 2006 Menopause Consensus report, is available upon request.