ANSWERS TO NOVEMBER CLINICAL CHALLENGE

Case 1 – Barbara Brown

1. Answer D

Hormone therapy is a highly effective treatment for menopausal symptoms and is appropriate for short term use. It is important to discuss the efficacy and possible adverse effects of options including diet, exercise, non-drug treatments, HT, other drug treatments and complementary and alternative medicines.

2. Answer A

Although observational data had suggested that HT was cardioprotective and oestrogen has a number of beneficial effects on the cardiovascular system, the net effect of HT has not proved to be cardioprotective in RCTs. WHI showed a small increased risk of CVD and stroke with combined HT. Oestrogen alone did not increase CVD but did increase stroke.

3. Answer C

Although HT decreases the rate of bone loss, bone loss resumes it normal rate once HT is stopped, so short term use will have little impact on later fracture risk. Hormone therapy is of higher risk and is less well tolerated in older women.

4. Answer E

WHI showed that the increased risk attributable to taking combined HT for 5 years per 10 000 women was seven for CVD, eight for stroke, eight for breast cancer and 18 for VTE. The risk of colon cancer was reduced by six and all fractures by 44.

Case 2 – Irene Irwin

1. Answer A

WHI study showed an increased risk of breast cancer in the E+P arm of eight per 10 000 women. The women primarily affected were those on HT before the trial began (mean use >5.2 years). The E arm showed no increased risk. The MWS indicated an increased relative risk for breast cancer with both E+P and E, but this was an observational study and had methodological weaknesses. The HABITs trial investigators concluded that even short term HT in women with previous breast cancer poses unacceptable risks, although this conclusion remains controversial.

2. Answer E

In restricted circumstances where a patient’s quality of life is severely compromised and other measures have been unsuccessful, HT may be a short term option (with specialist monitoring) in a woman with a past history of breast cancer.

3. Answer B

Thirty minutes per day of moderate intensity exercise on most days improves cardiovascular health, decreases anxiety and depression symptoms. Weight bearing exercise is important in osteoporosis prevention. There is no strong evidence that exercise reduces flushes, and soy products in the diet probably only have a slight benefit over placebo. RCTs on black cohosh have demonstrated mixed results on menopausal symptoms.

4. Answer B

Both SSRIs and SNRIs have been shown in RCTs to be effective treatments for vasomotor menopausal symptoms. Results for clonidine have been inconsistent, but it has been demonstrated to reduce flushes. Clonidine’s side effect profile includes hypotension, dry mouth and insomnia. Venlafaxine side effects are dose dependent and include dry mouth, anorexia, nausea, and elevated blood pressure.

Case 3 – Nancy Nguyen

1. Answer B

Although Nancy may just want a preventive health consultation, it is important to establish whether she has any specific concerns and her reason for presentation now. Past medical and family history may reveal significant issues for her future health. Important psychosocial aspects of her life impacting on her wellbeing may only be revealed with sensitive prompting.

2. Answer D

Psychosocial influences impact on symptoms that women experience during menopause. The true needs of each patient are more likely to be met when both the physical and psychosocial aspects are explored and a management plan is formulated.

3. Answer E

Symptoms experienced in midlife are influenced by factors including biological changes of menopause, physical health, medications, mood, relationship issues, body image, self esteem, past experiences and cultural factors.

4. Answer B

Options for HT in the menopausal transition include low dose combined OCP (if low cardiovascular risk), continuous oestrogen and cyclical progesterone (plus contraception if required) or continuous oestrogen and Mirena IUD.

Case 4 – Maria Matricardi

1. Answer B

A levonorgesterol IUD is a good alternative for women who have systemic progestogenic side effects.

2. Answer B

The hormones of ‘bio-identicals’ are absorbed through the buccal mucosa and usually contain the same hormones as conventional HT. They may also contain testosterone or DHEA.

3. Answer E

Tibolone – a synthetic steroid with both oestrogenic and progestogenic activity – is an effective treatment of vasomotor symptoms in postmenopausal women which may have a positive effect on libido.

4. Answer C

Transdermal oestrogen has equal efficacy with oral oestrogens. It may be a helpful option in women with liver disease, gallstones, migraine, androgen deficiency or mastalgia.