EPIDEMIOLOGY OF MENOPAUSE

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Introduction:
The menopausal transition can significantly affect women’s quality of life. Women may benefit from treatment with hormone therapy (HT) to alleviate menopausal symptoms, such as hot flashes and night sweats. The age at natural menopause (ANM) is of clinical relevance since an earlier menopause is associated with increased morbidity and mortality. It is therefore important to identify means to ensure a healthy menopause. Previous studies have assessed socio-demographic features, lifestyle habits and environmental exposures related to ANM. More than a decade ago HT use rates plummeted, however the current situation on its use is unclear. Factors associated with ANM and HT use vary across populations; little is known on such factors in Canada.

Objectives:
1) To examine the prevalence and characteristics of HT use, 2) To elucidate factors associated with ANM in Canada.

Methods:
Secondary data analysis was conducted on a sample of 10835 women aged 45-85, using baseline data from the Canadian Longitudinal Study on Aging, a national study of 50,000 participants randomly selected from each province. Statistical techniques including multinomial logistic, and Cox regressions were used.

Results: Current HT use was 9.5%. Older age (>80 y), non-white ethnic background, current employment, regular smoking, obesity, and breast cancer were negatively associated with current HT use. Alcohol consumption and presence of allergies or mood disorders were positively associated with current HRT use. Median ANM was 51 years. Having no partner, low household income and education levels, current and former smoking, and cardiovascular disease (CVD) were all associated with an earlier ANM, while current employment, alcohol consumption, and obesity were associated with later ANM.

Conclusion: These findings may be used to inform opportunities for improved physician – patient communication regarding menopause management, and help in risk assessment, prevention and early management of chronic disease risk during the menopausal transition.

References: