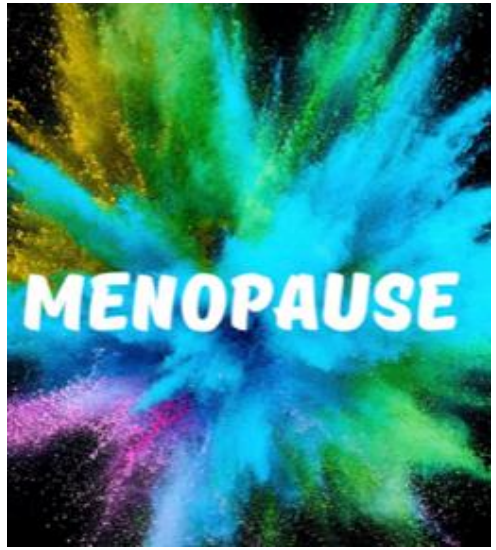
Slido Word Map
Menopause and Diabetes

and



- Please write 1 or 2 words that come to mind when you think of diabetes and menopause

Clinical Management Workshop Menopause and Diabetes

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BMS Medical Advisory Council

SfE Public Engagement Committee

Steering Group Chair SfE Women's Health Real World Data Registry

Active roles;

Society for Endocrinology

BMS British Menopause Society

Coventry University

Spire Manchester Hospital

OrthTeamCentre
Orthopaedics · Spine · Neuro · Sports Med

Retired;

Salford Royal NHS
NHS Foundation Trust

Disclosures

- Honoraria
  - Astellas Pharma
  - Novartis

Overview

- Overview of menopause in women with diabetes
- Management options
- Case
- Take home tips
- Q&A

Menopause & Diabetes in today's context

- Women with diabetes today are more likely than any previous generation to;
  - ▲ Be employed
  - ▲ Have multiple care roles
  - ▲ Carry excess weight
  - ▲ Do less physical activity
  - ▲ Feel stressed & time limited

And then menopause arrives

- Menopause symptoms can destabilize wellbeing & diabetes control
- Mid-life pressures -> impact diabetes self-management focus

What do we know about menopause health risks in women with diabetes?

Menopause and Diabetes Associated Health Risks

- Diabetes epidemic: prevalence of postmenopausal women with diabetes increasing
- Improved life expectancies[1]; longer-life post-menopause
- Increased risk of dementia with diabetes[1] & women over 60 twice as likely to be diagnosed than men
- 2-3 x higher all- cause and CVD- specific mortality in women with diabetes vs women without diabetes mellitus independently of ethnicity[2]
- Increased risk of postmenopausal breast cancer [3]
- Increased endometrial cancer risk[4]
- Increase fracture risk[5]

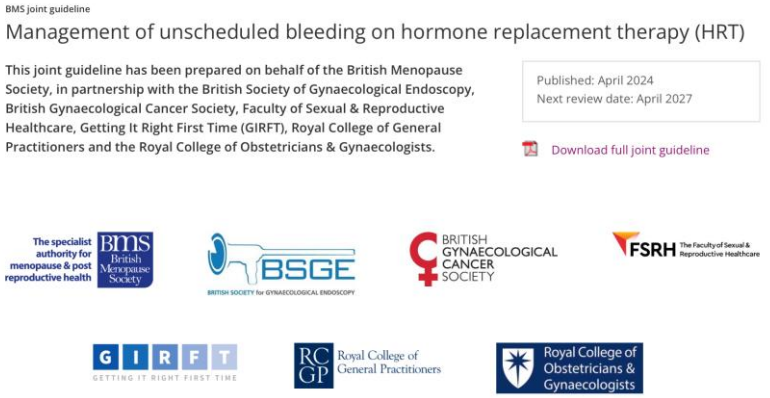
So how should we manage menopause in women with diabetes?

1. Tomic D et.al. The burden and risks of emerging complications of diabetes mellitus. **Nat Rev Endocrinol**. 2022;18(9):525-539.
2. Lambrinoudaki I et.al. The interplay between diabetes mellitus and menopause: clinical implications. ***Nat Rev Endocrinol***. 2022;18(10):608-622.
3. Hardefeldt PJ, Edirimanne S, Eslick GD. Diabetes increases the risk of breast cancer: a meta-analysis. **Endocr Relat Cancer**. 2012 Nov 19;19(6):793-803.
4. Wang Y et.al. Diabetes mellitus and endometrial carcinoma: Risk factors and etiological links. **Medicine (Baltimore)**. 2022 Aug 26;101(34)
5. Tomasiuk JM, Nowakowska-Płaza A, Wisłowska M, Głuszko P. Osteoporosis and diabetes - possible links and diagnostic difficulties. **Reumatologia**. 2023;61(4):294-304.

Management options and support for menopause

- **Lifestyle optimisation suitable for all** ✅
- Workplace Guidance
- HRT
- Medications including SSRIs SNRIs, Oxybutynin, Clonidine & new NK3*; & NK1/3; receptor antagonists
- CBT/CBTi; risk free
- Complimentary techniques/Natural and herbal remedies; evidence poor
- Vaginal treatments for GSM
  - Underutilised
  - Generally safe and effective, including vaginal oestrogen therapy

HRT
Benefits & Risks



- #Benefits
  - Vasomotor & other symptoms specific to menopause
  - Improved wellbeing can facilitate engagement in lifestyle improvement
  - Reduced fracture risk
  - Vascular risk/protection? Timing hypothesis; POI & early menopause

- Risks
  - ##Postmenopausal breast cancer
    - Estrogen only HRT is neutral to breast cancer risk
    - Micronised progesterone/dydrogesterone are lowest risk progestogens re breast cancer risk
  - VTE & stroke risk (some regimens*)
  - Dementia risk - pooled data suggest a **null effect**
  - Endometrial hyperplasia (some regimens**)

**Transdermal estrogen & oral micronized progesterone are neutral to VTE risk

Oral micronized progesterone may not protect the endometrium adequately in high-risk women

CGHFBC; Type and timing of menopausal hormone therapy and breast cancer risk: individual participant meta-analysis of the worldwide epidemiological evidence. **Lancet** 2019 Vol. 394 Issue 10204 Pages 1159-1168

*PY Scarabin. Hormone therapy and venous thromboembolism among postmenopausal women. **Front Horm Res** 2014 Vol. 43 Pages 21-32

A Fournier et.al. Risks of endometrial cancer associated with different hormone replacement therapies in the E3N cohort, 1992-2008. **Am J Epidemiol 2014 Sep 1;180(5):508-17

What do we know about HRT outcomes in women with diabetes?

What we know about HRT outcomes in women with diabetes?

Society for Endocrinology

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Home / Clinical practice / Data registries / Register of patient-reported outcomes for menopause management intervention

Register of patient-reported outcomes for menopause management intervention

Name of project

Register of patient-reported outcomes for menopause management intervention

Project background

Suggested Steering Group members

Annice Mukherjee, Consultant Endocrinologist, Coventry University – Chair Area 1,2,3

Clinical vignette

Donna; 50 year old Chef

- C/O weight gain, low mood, anxiety, general MS pain, poor sleep, mild VMS. Alcohol ++. Smoker 20cpd. Menses irregular & heavy
- Works shifts, little downtime, no exercises, 3 teen kids, relationship breaking down, also caring for elderly mother
- H/O T2DM (Diet), hypertension, hyperlipidaemia, low mood
- Tx ACEi, statin, SSRI
- BP 168/96 BMI 44. Ix FSH 20 & Ferritin 9 ug/L, mild hypochromic anaemia, HBA1c 56 mmol/L

Donna is perimenopausal but **many of her symptoms may not be perimenopause related**

Consider progestin IUD

Control BP/DM, encourage lifestyle modification/weight management support

Lifestyle & behavior focus for menopause symptoms & to prevent, treat & reverse chronic disease

Daily movement & physical activity

Healthy eating & weight management

Managing stress/ mental wellbeing

Solving sleep issues

Addressing addictive behaviors / limiting alcohol/not smoking

Healthy relationships & social connections

***Vodovotz Y, et.al. Prioritized Research for the Prevention, Treatment, and Reversal of Chronic Disease: Recommendations From the Lifestyle Medicine Research Summit. Front Med (Lausanne).** 2020 Dec 22;7:585744.

Symptoms occurring in midlife women …

*Tightly linked with menopause hormone changes with high sensitivity & specificity;

- Menstrual irregularity/cessation
- Vasomotor symptoms
  - Hot flushes/night sweats
- Vaginal symptoms

HRT will help

*Stuenkel CA, Davis SR, Gompel A, et al. Treatment of Symptoms of the Menopause: An Endocrine Society Clinical Practice Guideline. **J Clin Endocrinol Metab** 2015;100(11):3975-4011 doi: 10.1210/jc.2015-2236 [published Online First: 20151007].

Overlap with other causes
Symptoms, low specificity for menopause;

Sleep disturbance
Fatigue/cognitive fog
Weight gain
Mood changes/irritability
Anxiety/palpitations/overwhelm
Joint aches

HRT may not help

Midlife symptoms may relate to menopause, diabetes, medications, comorbidities, stress and lifestyle factors

Take Home Tips..

Tips for communication with midlife women in the diabetes clinic

- "Think Menopause"
- *Acknowledge & validate symptoms
- Empathise & emphasise the importance of lifestyle for menopause symptoms & health
- Signpost to menopause resources; BMS/Women's health concerns
- *Consider discussing HRT*

Tips about HRT in women with diabetes

- HRT may be an option; no one size fits all
- Tailored HRT is likely to be safe short term
- In high-risk women address endometrial protection & ensure vascular risks are addressed
- Side effects are common with HRT
- Neither efficacy nor long-term safety data are available for modern formulations of HRT in women with diabetes

Making Every Contact Count

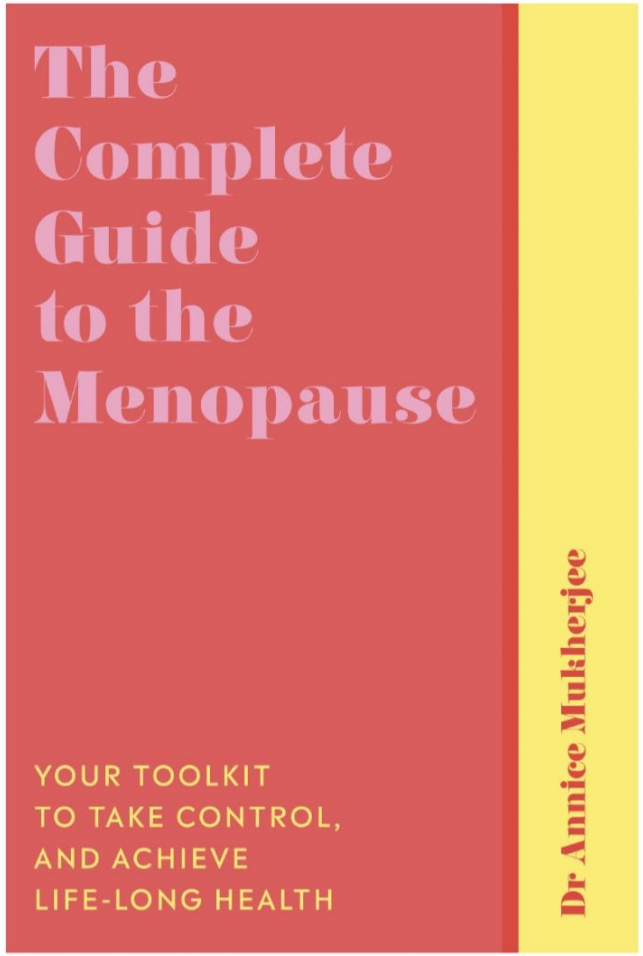
MAKING EVERY CONTACT COUNT

*Decety J. Empathy in Medicine: What It Is, and How Much We Really Need It. **Am J Med.** 2020 May;133(5):561-566. PMID: 31954114.

NHS
Health Education England

Gender politics

FT Magazine. Your women of 2022 – FT readers respond



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