Editorial



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Signs of recovery . . . appropriate menopause care being made a priority?

Paul Simpson, Heather Currie, Hannah Short and Eddie Morris Editors, Post Reproductive Health

The importance of post reproductive healthcare and appropriate management of the menopause do not seem to have been considered a priority over the last 10–15 years. The results of the MWS and WHI studies in 2002 caused huge anxiety, which resulted in a misinformed message reaching both the medical profession and the wider public. The good news is that there are signs of recovery with the publication and collation of up to date and accurate research data, and a renewed willingness by women to consider hormone replacement therapy (HRT) when it is indicated.

In July, we enjoyed another excellent British Menopause Society annual conference with a record number of attendees. Amongst the speakers, we had Dr R. Langer who gave an enlightening lecture about the design, delivery and publication of the WHI study. His views have been the subject of much excitement and have been published and commented on by menopause specialists. 1-3 Many of us working in the field of post reproductive health have had strong reservations about this study and the damage it has done so it was interesting to hear first-hand, how the study team reached their final conclusions. It is clear that the study was never designed to explore the question of risks associated with HRT rather the perceived cardiovascular and other health benefits of hormone replacement in later life.

Although the majority of the patients we care for reach a natural menopause, we must not forget those in whom it occurs much earlier. A particularly enlightening talk by Dr Sheila Lane highlighted the difficulties that young cancer survivors have with subfertility and menopausal symptom management, with one in four experiencing severe difficulties. The importance of pre-treatment counselling, modification of that treatment and ovarian tissue cryopreservation techniques were all highlighted. In addition, we had three very informative talks on key areas of post reproductive healthcare: skeletal health, the true breast cancer risks after the menopause and the importance of not dismissing the cardiovascular benefits of HRT in the younger

menopausal patient. The annual conference is always an excellent educational update that leaves us feeling motivated and enthused about post reproductive healthcare, and this year did not disappoint.

So, where is menopause care heading? Over the last couple of years, we have seen a definite change in public perception, driven we suspect by the publication of the NICE guidelines.⁴ We were hopeful that such an important document, pulling all the available research data together, would promote a balanced view of the risks and benefits of HRT – it has done that but there is still more to do, as illustrated by the results of the BMS Ipsos Mori survey in 2016.

The British Menopause Society and Women's Concern recommendations on hormone replacement therapy in menopausal women,⁵ published in December 2016, and the British Menopause Society and Women's Health Concern recommendations on the management of women with premature ovarian insufficiency,⁶ published in March 2017 are extremely informative guides for healthcare professionals that we hope you have found useful. More recently, the society have produced the British Menopause Society Vision for Menopause Care in the UK, published in this edition, which has been endorsed by the Royal College of Obstetricians and Gynaecologists, the Faculty of Sexual and Reproductive Health, the Royal College of Physicians and the Royal College of Nursing. This Vision is to promote menopause care at a time of uncertainty when demands on NHS budget are ever increasing. The main aim is to promote care that 'encompasses education, lifestyle advice and evidencebased information regarding interventions to optimise post-reproductive health'.

The Tales from the Menopause Clinic in this edition shows how symptoms of menopause can affect many systems and so can present in many different ways. We also know that chronic medical conditions can be influenced by the menopause; so it is important that we don't manage menopausal symptoms in isolation and that we actively consider co-morbidities and the

influence other medical conditions can have on the care we offer. To help with this, we are very much looking forward to bringing you a special edition on the management of chronic disease during post reproductive life. This edition should be published early in 2018 and will cover important topics such as the management of migraine, HIV and hypertension.

The work of promoting the post reproductive health agenda continues to evolve and expand within the society. The increasing membership of the BMS and engagement with the *Menopause Specialist* training programme is testament to the importance healthcare professionals are now placing on menopause care. We hope this edition of the Journal will continue to promote the delivery of appropriate advice and management for those struggling with the symptoms of menopause.

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