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SOGC Welcomes WHI Study Findings on Breast Cancer and Hormone Replacement Therapy

Ottawa - The Society of Obstetricians and Gynaecologists of Canada (SOGC) welcomes recent findings from the Women's Health Initiative (WHI) study that estrogen-only therapy does not increase the risks of breast cancer for postmenopausal women who have had hysterectomies. This latest U.S. study echoes the findings of the SOGC released earlier this year.

"SOGC released a new clinical guideline for the treatment of menopause symptoms a few months ago in an effort to clarify the risks and benefits of hormone therapy (HT) for women and their doctors," said Dr. André B. Lalonde, Executive Vice-President of the SOGC. "This U.S. study comes to the same conclusions as we did. The release of the new WHI study will help to increase awareness by women of options that are available to them, and to dispel some of the confusion about HT," said Dr. Lalonde.

The recent WHI study confirms the recommendations of the SOGC's [2006 Menopause Consensus Report](#), released February 7, 2006. The SOGC report is a comprehensive guideline for healthcare professionals on the management of symptoms of menopause. It recommends that hormone therapy be considered for treatment of women with moderate to severely disruptive menopausal symptoms. The recommendations also state that hormone therapy should be prescribed in the lowest dose and shortest duration necessary to achieve treatment goals.

"Like any medication there are risks and benefits that need to be considered when prescribing hormone therapy, and clearly it is not for everyone," said Dr. Vyta Senikas, Associate Executive Vice-President of the SOGC. "But the risks need be considered in perspective, and weighed against benefits such as improvements to a woman's quality of life - in some cases, these benefits are very substantial."

The SOGC recommends that women with disruptive menopausal symptoms consult their healthcare professionals regarding the risks, benefits and alternatives to hormone therapy.

Other key recommendations of the SOGC's 2006 Menopause Consensus 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.

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.

The SOGC is one of Canada's oldest national specialty organizations. Established in 1944, the Society's mission is to promote excellence in the practice of obstetrics and gynaecology and to advance the health of women through leadership, advocacy, collaboration, outreach and education. The SOGC represents obstetricians/gynaecologists, family physicians, nurses, midwives and allied health professionals in the field of sexual reproductive health.

The SOGC has been active on the international scene since 1998, when it integrated into its mission the importance of pursuing excellence in international women's health and promoting safe motherhood and newborn health throughout the world. It is the Society's goal to ensure that every woman has the right to survive pregnancy and childbirth and has access to the care she needs to deliver a healthy baby through a safe pregnancy and childbirth

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