

Abstracts.

## **Characteristics of Chinese women during menopausal transition**

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In one investigation, a total of 1850 women were interviewed. The average ages of natural menopause, entering menopause transition and on setting of menopausal symptoms were 49.60, 46.22 and 46.28 years old, respectively. The five most frequent symptoms were insomnia (60%), hot flash or sweating (51 %), paraesthesia (45 %), aching in muscles and joints (18 %), worn out (16%).  $\chi^2$  test revealed the association of aging, menopausal staging, occupation and stress with climacteric syndrome, and hormone treatment could improve climacteric syndrome.

The second study was a cross-sectional investigation, which was conducted with a composed questionnaire on general conditions, social support scoring, SF-36 scoring, self-evaluating depression and anxiety scoring. All of the parameters were input into a database and analysed with t-test,  $\chi^2$  and logistic regression using SPSS.

A total of 1280 women aged 45-59 in Beijing city who interviewed with the above mentioned questionnaire. The prevalence of depression symptoms and anxiety in these women was 306(23.9%) and 131(10.2%) respectively. Risk factors associated with depression included poor satisfaction for family, strait financial status, divorce or separation, poor social support, vaginal dryness or dyspareunia and hot flashes. Risk factors associated with anxiety included history of premenstrual tension syndrome, hot flashes, vaginal dryness or dyspareunia and some negative social and family events.

The investigation of the characteristics of women during menopause transition is helpful to improve the study on defining menopause transition. The average duration of menopausal transition is about 3.4 years. The age of on setting menopausal symptoms is parallel with the age of entering menopausal transition. Climacteric symptoms were common but mild in Chinese women during menopausal transition. Aging, menopausal staging, occupation and stress were related with climacteric syndrome, and hormone treatment could improve climacteric syndrome.

Depression and anxiety were common symptoms in Chinese women during menopausal transition and postmenopause. Some psycho-social factors may play a role in the prevalence of them.

The characteristic of breast cancer in Asian-Pacific region

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Breast cancer is the commonest cancer among women worldwide, with the lowest incidence being reported from far eastern and south eastern Asian countries. Over the last two decades, breast cancer incidence and mortality have steadily increased throughout the Asia-Pacific region, especially in Singapore, Japan, China.

The increasing incidence rate was due to the change of risk rather than the change of population structure and size. The estimated breast cancer mortality rates increased between 1991 and 2005. The increase was sharper in the younger age group than in the older age group.

Given the huge population in the developing Asian nations, and the fact that up to 25% of all breast cancer patients here are young, there are a large number of young breast cancer patients in Asia.

There is accumulating evidence that breast cancer in younger women is biologically more aggressive than that in their older counterparts, and age itself is an independent prognostic factor for premenopausal breast cancer. Various investigators have reported the association of young age with poorer overall survival or cause-specific survival, and age as a significant independent prognostic factor for relapse.

There are probably many factors that explain this difference. Different genetics are probably a large reason for the differences in breast cancer risk among different populations. But other factors, such as diet and exercise, also can affect breast cancer risk in different groups.

## Menopause Management 2009

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From studies Asian women are believed to have a different menopause symptom profile compared to Caucasian women. A recent study of women from Sarawak showed the main symptoms were aching in muscles and joints (82.6%), lack of energy (77.5%) and low backache (77.2%). Hot flushes (42.4%), night sweats (34.8%) and sweating (29.7%) were not the major symptoms as they are quoted in Caucasian women. About 50% complained of vaginal dryness. Symptoms impaired the women's quality of life maximally in the perimenopause.

A series of studies of women living in Australia from different ethnic backgrounds experiencing menopausal symptoms showed that their symptoms were similar to women living in their country of origin with vasomotor symptoms being less likely to be significant.

The Melbourne Women's Midlife Health project study showed that the main symptoms in a group of Australian born women were aches and stiff joints, hot flushes, insomnia and vaginal dryness.

These studies have shown that there are similar symptoms across different countries but with the main difference of lesser vasomotor symptoms in Asian women.

The management of women with menopausal symptoms impacting on their quality of life incorporates education and self empowerment, lifestyle advice and the prescription of therapies either non-prescriptive or prescriptive depending on availability and economics.

Studies have shown that women in Asian countries vary in their awareness and usage of hormone replacement therapy. (HRT) In Thailand and Taiwan the awareness was high but low in China however the ever usage of HRT was low varying from 9%-33% across the different countries.

Effective HRT dosages have been developed in lower doses so that symptoms are relieved by low and ultra-low doses.

Women with menopausal symptoms especially those on HRT should be regularly reviewed. They need more communication, information, knowledge and advice.