

Hormone Replacement Therapy and Osteoporosis: Systematic Evidence Review Number 12

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In this review, we systematically review the medical literature and evaluate data on the use of hormone replacement therapy (HRT) to prevent osteoporosis in healthy postmenopausal women. Specifically, we focus on the effects of estrogen, with and without progestins, on fracture and bone density outcomes. We also review studies of selective estrogen receptor modulators (SERMs) because of their emerging role in preventing osteoporosis. This report is part of a larger project on the risks and benefits of HRT prepared for the U.S. Preventive Services Task Force (USPSTF) to assist them in making recommendations. The term osteoporosis describes both a process of decreasing bone density as well as the clinical outcome of fracture. Bone density can be measured by a number of techniques and at a number of anatomical sites, although the measures most often used in studies are dual energy xray absorptiometry (DXA) of the hip, spine, heel, or wrist. A World Health Organization (WHO) working group proposed that osteoporosis should be diagnosed when bone mineral density (BMD) is 2.5 standard deviations below the mean for healthy young adult women at the spine, hip, or wrist, or when a history of an atraumatic fracture is present. The working group also proposed that low bone mass, or osteopenia, be diagnosed when bone density is between 1.0 to 2.5 standard deviations below the young healthy mean. The number of standard deviation units above or below the young healthy mean is called the T-score. This measure is often used in eligibility criteria for treatment trials and is used clinically to diagnose osteoporosis. Osteoporosis affects a large proportion of American women over the age of 50. An estimated 12 million (41%) white women over age 50 met WHO criterion for osteopenia and 5 million (15%) met WHO criterion for osteoporosis. The prevalence of osteoporosis in Hispanic

women is similar to white women, while rates in black women are approximately half that of the other groups (8%). By the WHO definition, up to 70% of women over age 80 have osteoporosis based on low measurements at the spine, hip or wrist. Age is an important factor in the relationship between bone density and the absolute risk of fracture. An increase in age of 13 years increases the risk of hip fracture by the same amount as a one standard deviation decrease in bone density. Older women have a much higher fracture rate than younger women with the same bone density because of increasing risk from other factors such as bone quality and tendency to fall. Women with osteoporosis are more likely to have fractures, and demographic trends for hip fracture parallel those for osteoporosis. Hip fracture incidence in white women rises from 50 per 100,000 women at age 50 to 237 per 100,000 women at age 65. White women are generally 2 to 3 times more likely than non-white women to suffer a hip fracture. Wrist fracture incidence tends to increase at earlier ages than hip fractures, with 268 per 100,000 women at age 45 to 54. Sixteen percent of postmenopausal women have osteoporosis of the lumbar spine, and, among white women, 5% of 50-year-olds and 25% of 80-year-olds have had at least one vertebral fracture. Key questions include: Does hormone replacement therapy improve or stabilize bone density? Does postmenopausal use of SERMs improve or stabilize bone density? Does hormone replacement therapy prevent osteoporotic fractures? Does postmenopausal use of SERMs prevent osteoporotic fractures?

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Wheat "Crop Circles" June, 2011 BUILD COMMUNITY: The Garden creates a gathering space for individuals to form a more intimate relationship with their community. The space is designed with visual features and seating areas to compel passers-by to pause, reflect, and have a multi-sensory interactive experience (sight, smell, touch, taste, smell) with the garden and the community. Read the rest of this entry Categories: Alchemical Garden, Articulture, Current Events, Projects. Tags: alchemy, art, bike, crucible, ecology, garden, green art, hedge, hyper-accumulating, industry, living structure, Newburyport, permaculture, rail, sculpture, soil remediation, trail, tree guilds.

Postmenopausal Hormone Replacement Therapy for the Primary Mar 31, 2011 This study was a systematic review of the published literature on the clinical efficacy of medical osteoporosis therapy in the reduction of fracture sexes, but the prevalence and progression of sexhormone deficiency differs. of at least 12 months duration (anti-resorptive treatment) or of at least 6 months **References - Drug Class Review: Hormone Therapy for - NCBI - NIH** Jan 11, 2014 Systemic estrogen containing menopausal hormone therapy (MHT) has and 2013.46 In this review, our intent is to provide evidence-based, of women during the menopausal transition,12 but have not been as including an increased risk of coronary heart disease, osteoporosis, .. (B) Number of . **Osteoporosis evidence review - NICE** Sep 16, 2011 The use of hormone therapy (HT) by menopausal women has declined since We did a systematic review to assess the attitudes and knowledge A large observational study, the Heart and Estrogen/progestin Replacement Study breast cancer and excess deaths directly attributed to breast cancer [12]. **Glucocorticoid-Induced Osteoporosis: Treatment Update and Review** To examine individual use of hormone replacement therapy (HRT) in a defined Many women suffer from postmenopausal symptoms, and osteoporosis is a major [28] and by biochemical evidence of favourable effects on serum lipids [9], bone We defined the one year period prevalence as the number of women who **U.S. Preventive Services Task Force Evidence Syntheses, formerly** Testosterone therapy and female hormone replacement therapy (HRT) have This number dropped to Prescribing menopausal hormone therapy: an evidence-based Aug 21, 2002 Hormone replacement therapy and cognition: systematic review and Conference on Osteoporosis Prevention, Diagnosis, and Therapy during 6.8 years of hormone therapy. JAMA.2002288:58-66. 12. . This article applies the current state of evidence for the benefits and harms of HRT to management Screening for Diseases: Prevention in Primary Care - Google Books Result Hormone Replacement Therapy and Osteoporosis, Systematic Evidence Review No. 12. Rockville, MD: Agency for Healthcare Research and Quality 2002. Hormone Replacement Therapy and Osteoporosis: Systematic Hormone Replacement Therapy and Osteoporosis: Systematic Evidence Review Number 12 (Paperback) Doc ~ XCNNETERB7. Hormone Replacement The Menopause Diet: The natural way to beat your symptoms and lose - Google Books Result Apr 15, 2003 The evidence to support the use of estrogen replacement therapy for the treatment of In this review, we examine the benefits and risks of HRT use, the Womens Estrogen for Stroke Trial, failed to show any benefit of HRT in lowering Osteoporosis has a significant effect on morbidity and mortality in the Osteoporosis in patients with subclinical hypothyroidism treated with papers, to calculate numbers of events prevented or .. Relative Risk According to Use of Hormone Replacement Therapy (95% CI)*. Current Osteoporosis. Systematic Evidence Review No. 12. (Prepared by the Oregon Health & Science. Knowledge, Perceptions and Information about Hormone Therapy Hormone replacement therapy and risk of breast cancer with a. Therapy and Osteoporosis: Systematic Evidence Review Number 12 Hormone replacement The Evidence for Efficacy of Osteoporosis Treatment in Men with Systematic Evidence Review. Number 12. Hormone Replacement Therapy and. Osteoporosis. Prepared for: Agency for Healthcare Research and Quality. Assessing Benefits and Harms of Hormone Replacement Therapy Number 14 Systematic Evidence Reviews (SERs) through its Evidence-based Practice increase in breast cancer with hormone replacement therapy. reviewed evaluating incidence, 12 of 19 showed no increased risk of breast cancer . symptoms of menopause and to prevent chronic conditions such as osteoporosis. exp Hormone Replacement Therapy/(18014) systematic . or meta-analysis.pt. or meta-analysis.ti. or systematic literature evidence based.ti. or exp Evidence-Based Medicine/or best practice\$.ti. or evidence synthesis.ti,ab. 12 or 15 or 19 (143395) .. Preventing osteoporosis among postmenopausal women. Establishing the risk related to hormone replacement therapy and These Evidence Syntheses, formerly Systematic Evidence Reviews, serve as the scientific . Menopausal Hormone Therapy for the Primary Prevention of Chronic Screening for Osteoporosis: Systematic Review to Update the 2002 U.S. Postmenopausal Hormone Replacement Therapy and Cardiovascular Disease 9. Parathyroid hormone for the treatment of osteoporosis: a systematic Osteoporosis is a disease where increased bone weakness increases the risk of a broken bone Osteoporosis may also occur due to a number of diseases or treatments .. A 2013 review by the USPSTF found insufficient evidence to determine if Hormone replacement therapy, while effective for osteoporosis, is only Hormone Replacement Therapy and Osteoporosis - AHRQ [Pub.93bPY] Free Download : Hormone Replacement Therapy and

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