Red Hat, Purple Shoes and Everything in Between

Geriatric Women’s Health
Gerri Mournian, MD
When I am an old woman I shall wear purple
With a red hat which doesn't go and doesn't suit me.
And I shall spend my pension on brandy and summer gloves
And satin sandals, and say we've no money for butter.
I shall sit down on the pavement when I'm tired
And gobble up samples in shops and press alarm bells.
And run my stick along the public railings
And make up for the sorrows of my youth.
I shall go out in my slippers in the rain
And pick flowers in other people's gardens
And learn to spit.

You can wear terrible shirts
And grow more fat
And eat three pounds of sausages
At a go.
Or only bread & pickle for a week
And hoard pens & pencils & beermats & things in boxes.

But now we must have clothes that keep us dry
And pay our rent and not swear in the street
And set a good example
For the children.

We must have friends to dinner & read the papers

But maybe I ought to practice a little now?
So people who know me
Are not too shocked
And surprised
When suddenly I am old,
And start to wear purple.

Poem by Jenny Joseph
Menopause Defined

- < age 40, Primary Ovarian Insufficiency, 1%
  - abnormal
- < age 40 Premature Menopause, procedural
- 40-45 years, Early Menopause, affecting 5%
- 45-58 years, Menopause
- Average age is 52
- Diagnosis confirmed after 12 months of amenorrhea
### The Stages of Reproductive Aging Workshop +10 staging system for reproductive aging in women

<table>
<thead>
<tr>
<th>Terminology</th>
<th>Reproductive</th>
<th>Menopausal Transition</th>
<th>Postmenopause</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage</td>
<td>-5</td>
<td>-4</td>
<td>-3b</td>
</tr>
<tr>
<td>Duration</td>
<td>Variable</td>
<td>Variable</td>
<td>1-3 years</td>
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</tbody>
</table>

#### PRINCIPAL CRITERIA

<table>
<thead>
<tr>
<th>Menstrual cycle</th>
<th>Variable to regular</th>
<th>Regular</th>
<th>Subtle changes in flow/length</th>
<th>Variable length: persistent 27-day difference in length of consecutive cycles</th>
<th>Interval of amenorrhea of ≤60 days</th>
</tr>
</thead>
</table>

#### SUPPORTIVE CRITERIA

<table>
<thead>
<tr>
<th>Endocrine</th>
<th>FSH Low</th>
<th>AMH Low</th>
<th>Inhibin B Low</th>
<th>Variable* Low</th>
<th>Variable* Low</th>
<th>&gt;25 international units/L Low</th>
<th>Variable Low</th>
<th>Stabilizes Low to Very low</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antral follicle count</td>
<td>Low</td>
<td>Low</td>
<td>Low</td>
<td>Low</td>
<td>Very low</td>
<td>Very low</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### DESCRIPTIVE CHARACTERISTICS

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Vasomotor symptoms likely</th>
<th>Vasomotor symptoms most likely</th>
<th>Increasing symptoms of urogenital atrophy</th>
</tr>
</thead>
</table>

FMP: final menstrual period; FSH: follicle-stimulating hormone; AMH: anti-müllerian hormone; Arrow: elevated.
* Blood draw on cycle days 2 to 5.
† Approximate expected level based on assays using current international pituitary standard.


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Recommendations for Clinical Care

- Evaluation of POI is indicated for <40 years old who misses three or more consecutive menstrual cycles.
  - hCG, FSH, estradiol, prolactin, TSH
  - Diagnosis confirmed with 2 elevated FSH levels at least 1 month apart
- Hormone therapy or estrogen containing hormonal contraception advised in POI or premature menopause for VMS and bone density
- Lab testing for ovarian reserve in age >40 to try and predict FMP is NOT recommended.
- Low dose oral contraceptives for heavy or irregular bleeding during menopause transition → healthy nonsmokers
Adjusting to Menopause

- Utian Quality of Life Tool (UQOL)
- Developed based on perceptions of well being distinct from menopausal symptoms

- Factors that influence female QOL during menopause:
  - Previous emotional health
  - Previous physical health
  - Past experience of stressful life events
  - Cultural beliefs about menopause
## Scoring Summary

<table>
<thead>
<tr>
<th></th>
<th>Lower QoL</th>
<th>-1SD</th>
<th>Mean</th>
<th>+1SD</th>
<th>Higher QoL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>-2SD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupational QoL</td>
<td>13</td>
<td>19</td>
<td>25</td>
<td>31</td>
<td>35</td>
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<tr>
<td>Health QoL</td>
<td>11</td>
<td>16</td>
<td>21</td>
<td>26</td>
<td>31</td>
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<tr>
<td>Emotional QoL</td>
<td>12</td>
<td>16</td>
<td>20</td>
<td>24</td>
<td>28</td>
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<tr>
<td>Sexual QoL</td>
<td>0</td>
<td>4</td>
<td>8</td>
<td>12</td>
<td>15</td>
</tr>
<tr>
<td>Total QoL</td>
<td>48</td>
<td>61</td>
<td>74</td>
<td>87</td>
<td>100</td>
</tr>
</tbody>
</table>

**Instructions:** Means for each factor, along with standard deviations above and below the mean, are shown above. After summing each factor, mark with an “X” roughly where the patient’s score falls along each continuum. These marks will provide a graphic summary of the patient’s QOL score on each factor and for the scale as a whole.
Menopausal Symptoms

- Moodiness
- Unpredictable Periods
- Uncomfortable Menstrual Periods
- Brain “Fog”
- Dryness
- Irritation
- Loss of Libido
- Vasomotor Symptoms
- Loss of Bone Mineral Density
Non-Prescription Symptom Control

- **Behavioral or Lifestyle Modification**
  - Avoidance of Heat—food, drink, attire, situation/place
  - Regular Exercise
  - Limit Alcohol, Caffeine, Tobacco
  - Stress Reduction Practices
  - Cool Sleep Environment
  - Healthy Weight
Prescription Drug Therapy

- Non-Hormonal
- SNRI/SSRI
- Paroxetine 7.5mg dose is only one with FDA approval
- Gabapentin
- Sleep Meds
FDA Approved Indications for HT

- Vasomotor symptoms for which no other options have helped alleviate severity or improved QOL
- Prevention of Bone Mineral Density loss, especially in POI or premature menopause
- Treatment of Hypoestrogenism
- Treatment of Genitourinary Syndrome in Menopause (GSM) and Vulvo-Vaginal Atrophy (VVA)
Hormone Replacement

- FDA approved Hormone Therapy (HT)
  - Estrogens
  - Progestins
  - SERMs-Dosing: CE 0.45 mg and Bazedoxifene 20 mg daily.
- DHEA—prasterone FDA approved for Dyspareunia from VVA

Benefits of Hormone Therapy

Definitely Helpful
- Hot Flash Outcomes
  - frequency, severity, night sweats, waking after sleep onset
- Vaginal Dryness

Probably Helpful
- Poor Sleep
- Mood

Data is conflicting for sexual function, incontinence, joint pains, “brain fog,” skin changes, body fat composition
Risks of Hormone Therapy

- Uterine Cancer—primary indication for progesterone in HT is to prevent endometrial overgrowth
- Progesterone NOT indicated after hysterectomy OR with vaginal estrogen
- Heart Disease/Stroke- no increase risk if Combined HT begun age <60 OR <10 years from menopause onset
- Breast Cancer- age, type and duration dependent risks
- North American Menopause Society recommends treating with Combination HT for no longer than 5 years
- Breast cancer risk might be lower with micronized progesterone as opposed to synthetic progestogens
- Highest risk is age >70 OR 20+ years from menopause onset
MenoPro app
developed by the North American Menopause Society

- Risk Assessment Tool
- Patient Education
- Doses and Treatment Durations
- Evidence Basis
So...Symptoms Controlled...
Aging is NOT lost youth but a new stage of opportunity and strength.

--Betty Friedan

(author of The Feminine Mystique, 1963)
Developmental Stages of Aging

Stages of Psychosocial Development

- Trust vs Mistrust
- Autonomy vs Shame & Doubt
- Initiative vs Guilt
- Industry vs Inferiority
- Identity vs Role Confusion
- Intimacy vs Isolation
- Generativity vs Stagnation
- Integrity vs Despair

Increases in Complexity

Proposed by Erik Erikson
Generativity vs. Stagnation

- Age: 40-65
- Basic Virtue: Care
- Career and work are the most important along with family.
- Work to establish stability
- Attempt to produce something that makes a difference to society.
- Inactivity and meaninglessness are common fears
- Struggle with finding purpose.
- Significant relationships: family, workplace, local church and other communities.

Integrity vs. Despair

➢ Age: 65 +
➢ Basic Virtue: Wisdom
➢ Reflection over life lived
➢ Meaningful life?
➢ What contributions to society?

➢ Feelings of integrity, contentment and fulfillment
➢ Sense of despair, reflection upon experiences and failures.
➢ Fear of death, asking “What was the point of life? Was it worth it?”

BioPsychoSocial Determinants of Aging

- Home
- Finances
- Activity
- Nutrition
- Sex and Intimacy
- Socialization
- Mental Health
- Physical Health
Elderly Women Living in US

- In the US, nearly 29% of the 46 million community-dwelling elderly live alone.
- 50% of the community-dwelling oldest old (≥ 85 yr) live alone.
- 70% of elderly people living alone are women.
- 46% of all women age ≥ 75 yr live alone.
- More likely to be poor, especially with advancing age.
- 60% > age 75 report feelings of loneliness and social isolation.
Financial Considerations

The median income of women 75 or older is $13K less than that of older men: $19,043 vs $32,572

Women of color, age 65+ highest risk for poverty
Black women 21%
Hispanic women 20%
Native American Women 19%

Double the poverty rate of White women 65+ (10%)
Frailty is Thy Name Woman?

- American Geriatric Society
  - Frailty- “a state of increased vulnerability to stressors due to age-related declines in physiologic reserve across neuromuscular, metabolic, and immune systems.”
Frailty Assessment

- Edmonton Frail Scale
  - Cognition, General Health Status, Functional Independence, Social Support, Medication Use, Nutrition, Mood, Continence, and Functional Performance
  - Even when administered by non-geriatricians, compared favorably with that of a more comprehensive evaluation done by a specialist (Rolfson DB, 2006)
Frailty

- Edmonton Frail Scale—https://www.cgakit.com
  - docs.wixstatic.com

- Frailty Tool (Essential Frailty Toolset) and Expanded Toolset
  - iMedicalApps.com, MedpageToday, Douglas Maurer, Jan 18, 2018
Strength and Mobility

- Baylor College of Medicine randomly assigned 160 obese and sedentary adults, age 65 or older, to one of four groups x 6 months:
  - weight loss and aerobic training
  - weight loss and resistance training
  - weight loss + aerobic + resistance
  - control
- Weight loss plus resistance training OR aerobic training improved physical function (+14%)
- Weight loss plus combined aerobic and resistance training provided greater improvement in physical function (+21%)

Exercise

- Duration of **aerobic activity** for elderly
  - similar to that for younger adults, but less intense.
    - comfortably converse
    - intensity should be perceived as $\leq 6/10$
    - Can gradually increase their target heart rate
    - need to improve their functional strength before able to do aerobic exercise.

- **Strength Training**→ Lighter loads/resistance initially (eg, using bands or weights as light as 1 kg or arising from a chair)
- **Flexibility, major muscle groups should be stretched once daily**
- Flexibility and strength training prevent falls > than balance training
Weight and Nutrition

- Senior hunger and nutrition are significant issues in the U.S.
- >10 million older Americans at risk of hunger
- Many who live alone do not prepare full, balanced meals
- 1 out of 2 older Americans are at risk for malnutrition.
- About 10% of adults experience malnutrition.
- 60% of older adults in hospitals and 35-85% of older residents in long-term care facilities are malnourished.

National Council on Aging
Fruits & Vegetables
Whole fruits and vegetables are rich in important nutrients and fiber. Choose fruits and vegetables with deeply colored flesh. Choose canned varieties that are packed in their own juices or low-sodium.

Healthy Oils
Liquid vegetable oils and soft margarines provide important fatty acids and some fat-soluble vitamins.

Herbs & Spices
Use a variety of herbs and spices to enhance flavor of foods and reduce the need to add salt.

Fluids
Drink plenty of fluids. Fluids can come from water, tea, coffee, soups, and fruits and vegetables.

Grains
Whole grain and fortified foods are good sources of fiber and B vitamins.

Dairy
Fat-free and low-fat milk, cheeses and yogurts provide protein, calcium and other important nutrients.

Protein
Protein rich foods provide many important nutrients. Choose a variety including nuts, beans, fish, lean meat and poultry.
Sex and Intimacy

Intimacy may be lost because of the following:
• Loss of a partner
• Vascular disorders and diabetes
• Social Isolation, “in or out”
• Arthritis
• Moderate to severe cognitive impairment
• Prescription drugs→ unwanted side effects
• Age-related changes→ sex hormone levels decrease, body image
• Discrepancy in expectations of partners
• Lack of privacy
• Shift to other forms of intimacy
Socialization

- Social Media
  - LinkedIn, MeetUp, Sociable Sisters, Ellevate Network
  - Red Hat Society, U3A (University of the 3rd Age)
- Volunteerism
- Church
- Senior Centers
Mental Health

- Delirium
- Dementia
- Depression
  - lifetime risk for major depression 7-12% in men
  - 20-25% in women
  - Geriatric Depression Scale (GDS)
Cardiovascular Health

- CHD is the leading cause of death
- 1 in 4 deaths, more than all of the cancers combined
- 54% of women don’t recognize this
- 64% of women who die suddenly had no previous symptoms.

- Highest risk of CHD—menopause <50 years old, early oophorectomy, and POI.
- Risk increases as estrogen levels decrease
- Lipid profiles after menopause worsen compared to men.

https://www.cdc.gov/dhdsp/data_statistics/fact_sheets/fs_women_heart.htm

Wegener, Nanette. Transforming Cardiovascular Disease Prevention in Women: Time for The Pygmalion Construct to End. Cardiology 2015;130:62-68
### Cancers

#### Leading Sites of New Cancer Cases

#### 2018 Estimates

<table>
<thead>
<tr>
<th>Cancer</th>
<th>Male</th>
<th>Female</th>
</tr>
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<tbody>
<tr>
<td>Breast</td>
<td>266,120</td>
<td>30%</td>
</tr>
<tr>
<td>Lung &amp; bronchus</td>
<td>112,350</td>
<td>13%</td>
</tr>
<tr>
<td>Colon &amp; rectum</td>
<td>64,640</td>
<td>7%</td>
</tr>
<tr>
<td>Uterine corpus</td>
<td>63,230</td>
<td>7%</td>
</tr>
<tr>
<td>Thyroid</td>
<td>40,900</td>
<td>5%</td>
</tr>
<tr>
<td>Melanoma of the skin</td>
<td>36,120</td>
<td>4%</td>
</tr>
<tr>
<td>Non-Hodgkin lymphoma</td>
<td>32,950</td>
<td>4%</td>
</tr>
<tr>
<td>Pancreas</td>
<td>26,240</td>
<td>3%</td>
</tr>
<tr>
<td>Leukemia</td>
<td>25,270</td>
<td>3%</td>
</tr>
<tr>
<td>Kidney &amp; renal pelvis</td>
<td>22,660</td>
<td>3%</td>
</tr>
<tr>
<td>All sites</td>
<td>878,980</td>
<td>100%</td>
</tr>
</tbody>
</table>

©2018, American Cancer Society, Inc., Surveillance ResearchLung
# Leading Sites of Cancer Deaths, 2018 Estimates

<table>
<thead>
<tr>
<th>Site</th>
<th>Female</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lung &amp; bronchus</td>
<td>70,500</td>
<td>25%</td>
</tr>
<tr>
<td>Breast</td>
<td>40,920</td>
<td>14%</td>
</tr>
<tr>
<td>Colon &amp; rectum</td>
<td>23,240</td>
<td>8%</td>
</tr>
<tr>
<td>Pancreas</td>
<td>21,310</td>
<td>7%</td>
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<tr>
<td>Ovary</td>
<td>14,070</td>
<td>5%</td>
</tr>
<tr>
<td>Uterine corpus</td>
<td>11,350</td>
<td>4%</td>
</tr>
<tr>
<td>Leukemia</td>
<td>10,100</td>
<td>4%</td>
</tr>
<tr>
<td>Liver &amp; intrahepatic bile duct</td>
<td>9,660</td>
<td>3%</td>
</tr>
<tr>
<td>Non-Hodgkin lymphoma</td>
<td>8,400</td>
<td>3%</td>
</tr>
<tr>
<td>Brain &amp; other nervous system</td>
<td>7,340</td>
<td>3%</td>
</tr>
<tr>
<td>All sites</td>
<td>286,010</td>
<td>100%</td>
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</tbody>
</table>
Wait! There’s an APP for that....

- Frailty Tool—Rapidly evaluate frailty and individualize care for your patient

- Alzheimer’s Disease Pocketcard, developed by Alzheimer’s Association, Alz.org

- Safe Drive, a Clinician’s Guide to Assessing and Counseling Older Drivers, developed by American Geriatric Society

- GDS app, Geriatric Depression Scale
  - --has large font and narration of the questions, to help with vision impairment.
  - --translated into 10 different languages
In memory of Isabel Aceves Mournian
Feb 13, 1917 – Sept 5, 2013
References

- http://www.menopause.org
- nextavenue.org/financial-challenges-facing-older-women/April 12, 2018
- https://www.cdc.gov/dhdsp/data_statistics/fact_sheets/fs_women_heart.htm
- http://www.hormone.org/menopausemap
- www.Merckmanuals.com
- American Geriatric Society (AGS), americangeriatrics.org