

# **Women's Health**

## Role play case:

S.W. a 35 years old female who sees you regularly for her chronic hypertension, on an ACE inhibitor.

She is here today because she's getting married after 6 months and would like to start a family. She has never been pregnant before.

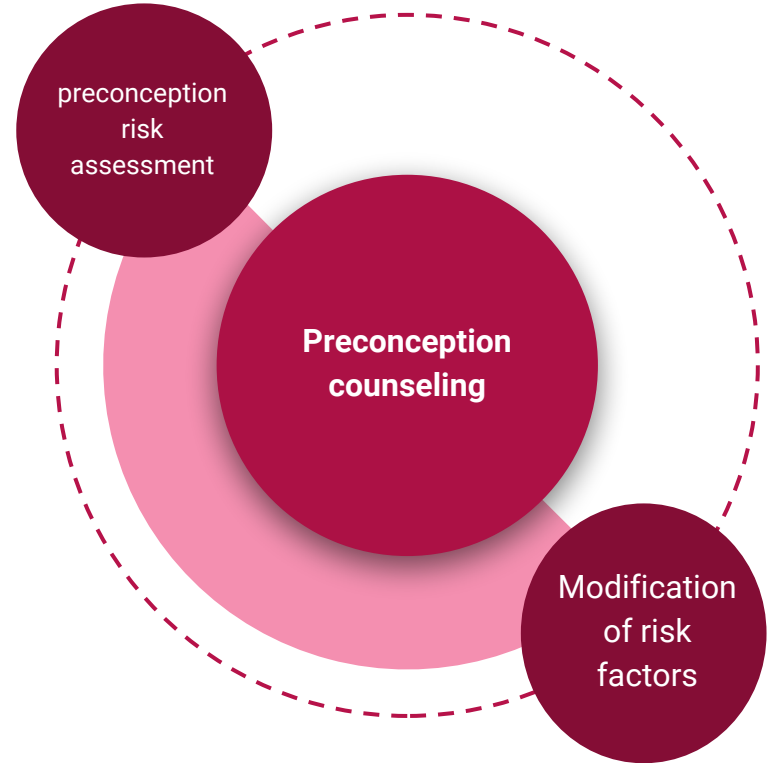
She smokes 10 times a day for the past 5 years.

On physical exam,  
her BP=138/84,  
BMI: 32.1 Otherwise, her exam is unremarkable



# What is preconception counseling?

A meeting with a health-care professional by a woman *before* attempting to become pregnant.



# Goal of preconception counseling?

Is to optimize, whenever possible, a woman's health and knowledge before planning and conceiving a pregnancy in order to eliminate, or at least reduce, the risk associated with pregnancy for the woman and her future baby



## What are the major topics that should be discussed or addressed with any woman prior to conception?

- Identify undiagnosed, untreated or poorly controlled medical conditions.
- Review immunization history and recommend appropriate immunizations.
- Family history and genetic history including racial/ethnic background and specific genetic risks.
- Risks of medication and radiation exposure in early pregnancy.



## What are the major topics that should be discussed or addressed with any woman prior to conception?

- **Tobacco, alcohol, and substance abuse and other high-risk behaviors (such as sexual activity and risk for STDs).**
- **Social issues, mental health issues.**
- **Occupational and environmental exposures.**
- **Screening for intimate partner violence issues.**



<https://www.youtube.com/watch?v=k9GJEvPnmlQ>

# Are women at a higher risk to develop some types of cancer ?

- Most common forms of cancer suffered by women are cancer of the **breast**, **cervix** and **colon**.



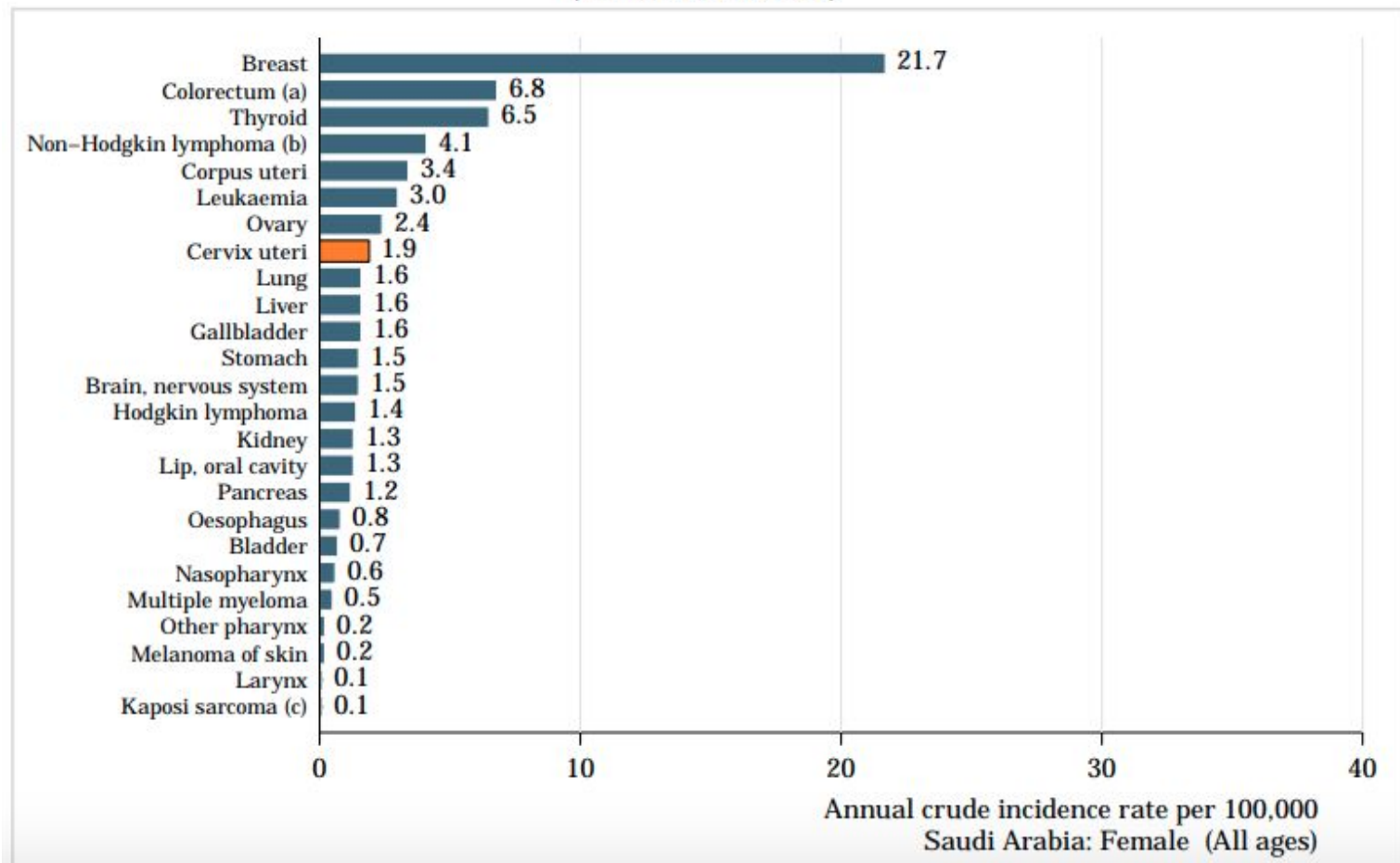


# Cervical Cancer

- Cervical cancer is globally the second most common type of cancer among women
- Cervical cancer ranks the **8th** leading cause of female cancer in Saudi Arabia.
- Virtually all cases are linked to genital infection with Human papillomavirus (HPV)

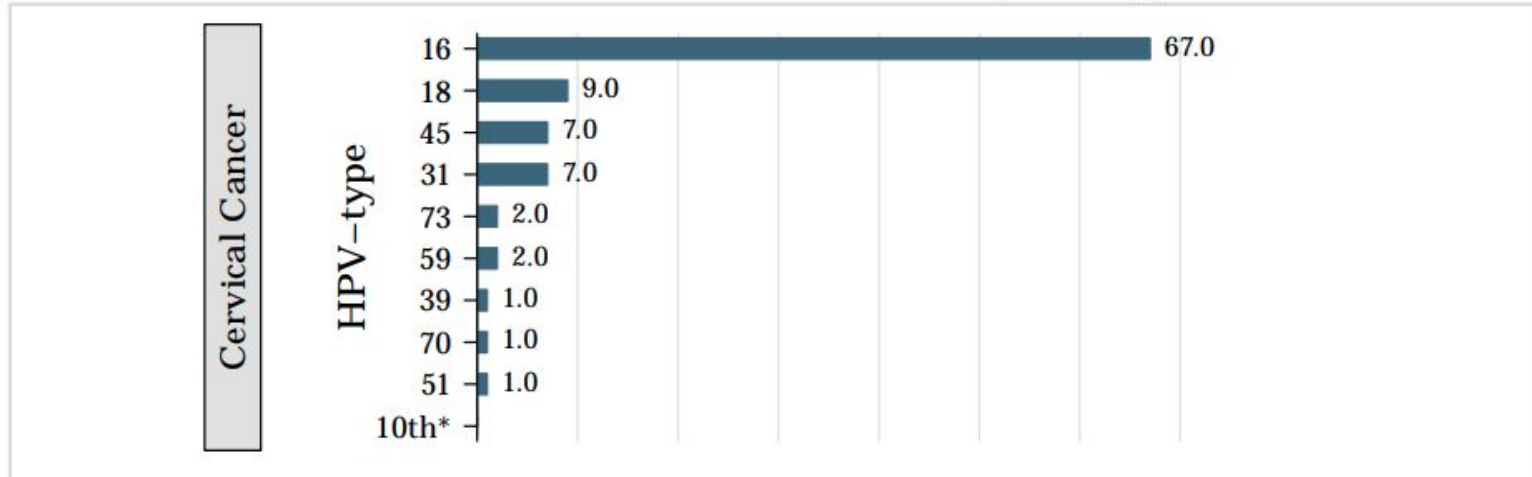


Figure 5: Comparison of cervical cancer incidence to other cancers in women of all ages in Saudi Arabia (estimates for 2012)



# HPV type associated with cervical cancer in Saudi Arabia

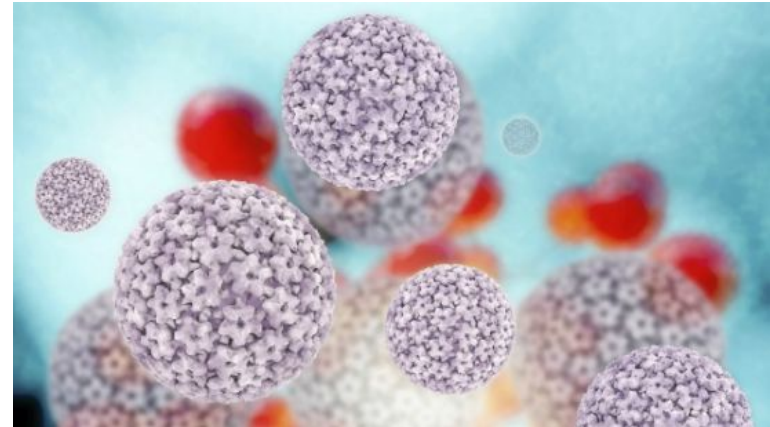
Figure 36: Comparison of the ten most frequent HPV oncogenic types in Saudi Arabia among women with invasive cervical cancer by histology



# HPV

- Human papillomavirus **DNA virus** from the **papillomavirus family**,
- There are more than 170 types of HPV. Most of them aren't harmful and go away on their own.
- Types 16 and 18 lead to the majority of cervical cancer cases.
- HPV infection has also been implicated in other cancers such as 90% of anal cancers and a smaller subset (<50%) of oropharyngeal, penile, vaginal, and vulvar cancers.
- **In total, HPV may account for 5.2% of the worldwide cancer burden**

Tota JE, Chevarie-Davis M, Richardson LA, Devries M, Franco EL. Epidemiology and burden of HPV infection and related diseases: implications for prevention strategies. *Prev Med* (2011) 53(Suppl 1):S12–21.



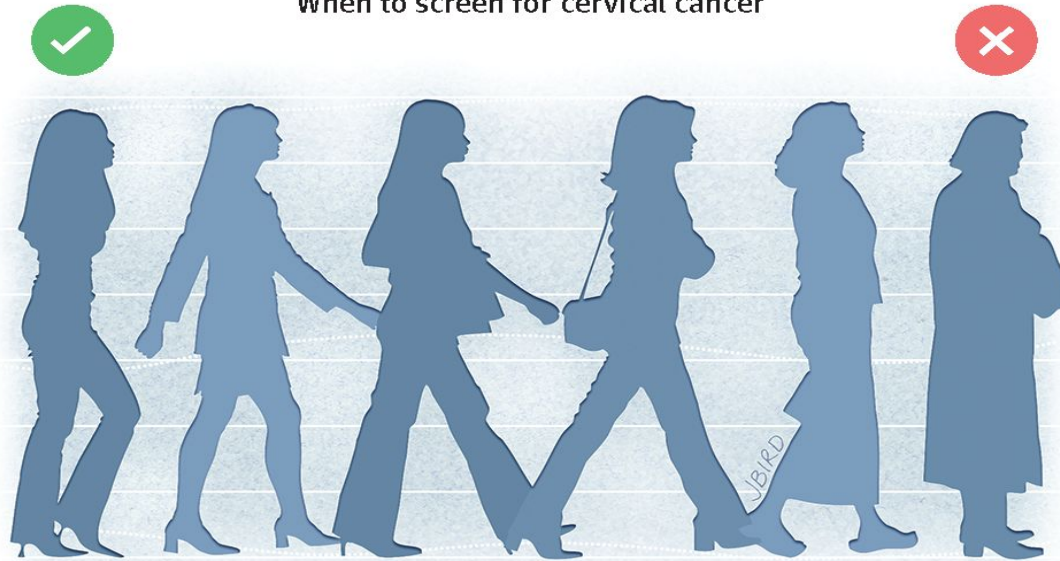
## Would Screening help ?



**80% or more of these deaths are likely to be prevented by screening**

# What are cervical cancer screening guidelines?

When to screen for cervical cancer



**Age 21 y**

Begin screening for cervical cancer

**Age 21-30 y**

Pap test every 3 years if results normal

**Age 31-64 y**

Pap test every 3 years or  
Pap test + HPV test every 5 years

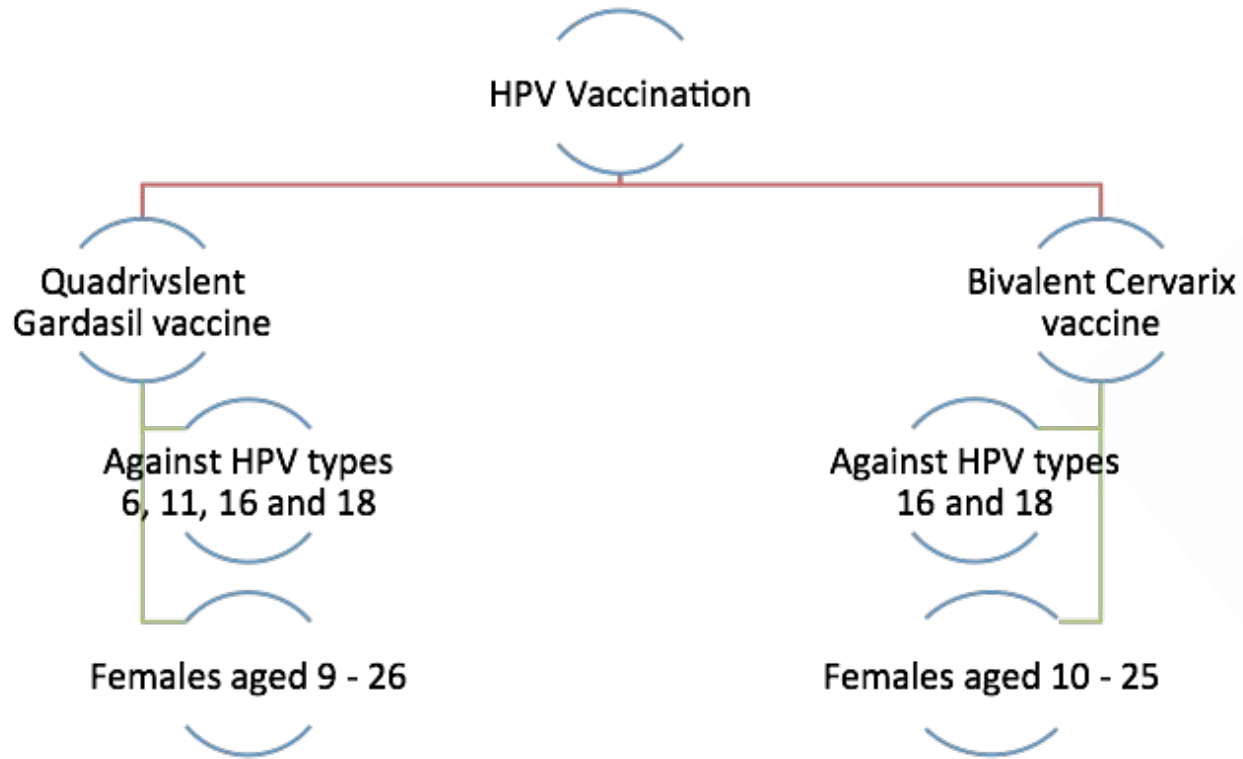
**Age 65 y and older**

Stop routine screening if results normal for the previous 10 years

## Is it possible to prevent cervical cancer?

- Cervical cancer can often be prevented with vaccination and modern screening techniques that detect precancerous changes in the cervix.
- The vaccine can prevent over 70% of cervical cancers.





**HPV vaccination is most effective if performed before the onset of sexual activity.**



	Cost per-vaccinated individual <sup>c</sup>			
	Reduction in lifetime cancer risk <sup>b</sup> %	\$25 (\$5 per dose)	\$50 (\$12 per dose)	\$100 (\$27 per dose)
<i>25% coverage</i>				
Girls only	14	Cost-saving <sup>d</sup>	70	610
Girls and boys	21	110	810	2190
<i>50% coverage</i>				
Girls only	29	Cost-saving <sup>d</sup>	30	540
Girls and boys	40	660	1740	3900
<i>75% coverage</i>				
Girls only	45	Cost-saving <sup>d</sup>	130	740
Girls and boys	57	2440	2180	4860
<i>90% coverage</i>				
Girls only	63	Cost-saving <sup>d</sup>	170	810
Girls and boys	67	9110	18 650	37 720

**Reductions in lifetime cancer risk and the cost-effectiveness ratios associated with vaccinating both boys and girls vs girls alone at different costs per-vaccinated individual (\$25–400)**

طالبت بإقرار التطعيم ضده.. واعتبرته الأكثر شيوعاً في المملكة

## وفاة 55 سيدة بسرطان عنق الرحم سنوياً في المملكة



وأشارت د. المري إلى أن نحو 152 دولة في العالم تطبق الزامية أخذ اللقاح على الإناث، في حين هناك 52 تطبق الزامية التطعيم على الذكور والإناث للحد من ارتفاع حالات السرطان، مشددة أن الدراسات أثبتت أن التطعيم يمكن أن يخفض عدد الحالات المرضية بنسبة 70% (7 من كل 10 حالات).

وانتقدت خلال لقاء اعلامي أول أمس في الرياض تباطؤ وزارة الصحة في اقرار الزامية التطعيم ضد الفيروسات المسببة وتلكؤها وعدم اعترافها بانتشار المرض، مشيرة إلى أن معدل انتشار سرطان عنق الرحم في المملكة 3.2 لكل ألف حالة، حيث تعتبر النسب ضئيلة في ظل عدم وجود سجل وطني للحالات، لافتة الى أن دراسة أجريت في ثلاث مستشفيات حكومية عام 2011م أكدت أن المملكة تشهد سنوياً وفاة 55 سيدة بسبب هذا المرض، وتسجل أكثر من 150 حالة مرضية، مشددة على أن هذه النسبة مرشحة للارتفاع إذا لم تسارع الجهات المختصة بإقرار التطعيمات اللازمة والحث على الفحص الدوري على هذا المرض.

***NOW THE BIG QUESTION ... IS HPV VACCINATION  
IMPORTANT AND SHOULD BE IMPLEMENTED ?***





**Twenty years  
later...**



S.W presents to your office for evaluation of hot flashes.

For the last year she has been experiencing 6-7 hot flashes per day and often wakes up at night drenched in sweat.

She feels fatigued and irritable most of the time.

She has not had her menses for the last year, and reports significant vaginal dryness.

S.W thinks that she might be going through “the change” and wonders how long she will feel this way.



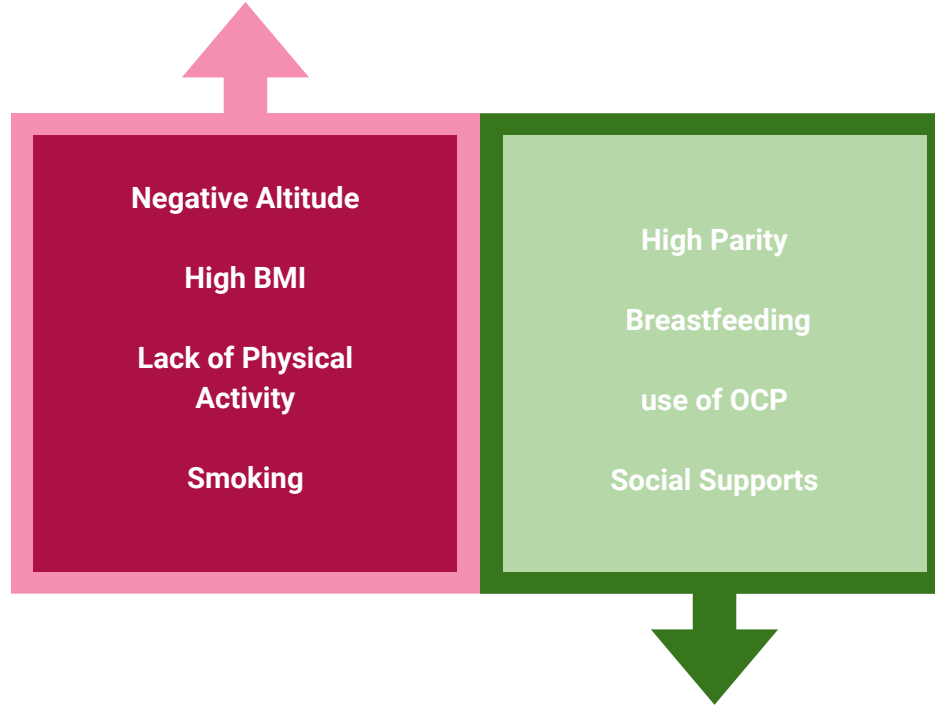
# Menopause

Menopause is a normal physiological process, defined as the permanent cessation of menses for 12 months or more due to cessation of ovarian hormone production.

- ★ The age at natural menopause is between 45 years and 50 years.
- ★ Early menopause is defined as menopause occurring before the age of 45 years
- ★ while premature menopause occur before the age of 40

- ★ Premenopausal women: who have experienced regular menstrual bleeding within 12 months.
- ★ Perimenopausal women: defined as those women who have experienced irregular menses within the last 12 months or the absence of menstrual bleeding for more than 3 months but less than 12 months.
- ★ Postmenopausal women: those who have not experienced menstrual bleeding for 12 months or more

# Menopausal Symptoms occurrence





# Symptoms of Menopause

## Physical

Flatulence  
Bloating  
Pain  
Tiredness  
Sleeping habits  
energy  
Weight gain

## Vasomotor

Hot Flashes  
Night Sweat  
Sweating

## Psychosocial

Anxiety  
Memory  
Feeling "blue"

## Sexual

change in sexual drive  
vaginal dryness  
intimacy

## menopause-specific quality of life questionnaire (MENQOL)

Valid and reliable questionnaire, specific to assess the frequency and bothersomeness (severity) of postmenopausal symptoms in the past month.

7-points for each domain  
1= No symptoms  
8= Maximum level of symptoms

# Factors associated with different symptom domains among postmenopausal Saudi women in Riyadh, Saudi Arabia

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## Abstract

**Objective:** To determine factors associated with different symptom domains among postmenopausal Saudi women in Riyadh, Saudi Arabia.

**Methods:** In a cross-sectional study, interviews were conducted with 542 postmenopausal Saudi women, comprising sociodemographic history, social support, and the Menopause-specific Quality of Life questionnaire.

**Results:** The mean age of participants was 58 ( $\pm 7.0$ ) years, and the mean age at menopause was 49 ( $\pm 4.7$ ) years. We found that 41% (n = 224), 14.4% (n = 78), 57% (n = 307), and 12.7% (n = 69) of women reported severe/moderate impact of vasomotor, psychosocial, physical, and sexual symptoms, respectively. Multivariate logistic regression revealed that lacking emotional support was associated with severe/moderate vasomotor (adjusted odds ratio [aOR] 1.5, 95% confidence interval [CI] 1.1, 2.3), psychosocial (aOR 2.0, 95% CI 1.2, 3.4), and physical (aOR 1.7, 95% CI 1.2, 2.6) symptoms. Lack of tangible social support was associated with severe/moderate sexual symptoms (aOR 1.9, 95% CI 1.0, 3.4). In addition, women who worked (aOR 1.8, 95% CI 1.1, 3.2), were obese (aOR 2.0, 95% CI 1.0, 4.1), lived in rented accommodations (aOR 3.9, 95% CI 1.2, 13.1), or had a retired spouse (aOR 1.6, 95% CI 1.0, 2.4) had higher odds for moderate/severe menopausal symptoms.

**Conclusions:** Establishing educational and counseling programs for postmenopausal women, their spouses, and other family members could improve social support and hence quality of life of postmenopausal women. Effective preventive strategies to deal with modifiable risk factors, such as obesity and work stress, should also be implemented.

**Key Words:** Obesity – Postmenopause – Retired spouse – Social support – Symptoms – Women.

# Menopause in Saudi Arabia



- Mean age at menopause was 49 ( $\pm 4.7$ ) years
- Symptoms:
  - Aching muscle and joints 82%
  - Decrease physical strength and lack of energy 77%
  - decrease sexual desire 55%
  - Hot flushes 50%
  - Night sweat 45%

# How to manage menopause?



DEAR MENOPAUSE:  
LEAVE ME  
ALONE

# Do all women need treatment for menopausal symptoms?

Many women do NOT need treatment for their menopause symptoms.





# Non-estrogen treatments

None work as well as estrogen, but they are better than placebo (sugar pills).

**Antidepressants** — Antidepressant medications are recommended as a **first-line treatment** for hot flashes in women **who cannot take estrogen**. **Paroxetine** is the only drug approved in the United States for hot flashes in this class, but each of these agents has been used for hot flashes.

**Gabapentin** — Gabapentin (sample brand name: Neurontin) is a drug that is primarily used to treat seizures. It also relieves hot flashes in some women, preferably given as a single bedtime dose or during the daytime as well.

# Hormone therapy

Women's Health Initiative (WHI) - Benefit and Risk (Mean Age of 63 Years)

	Estrogen and Progestin	Estrogen Only
Vaginal dryness	Benefit	Benefit
Hot flashes	Benefit	Benefit
Vasomotor symptoms	Benefit	Benefit
Osteoporosis	Benefit	Benefit
Breast cancer	Risk	No change
Heart disease	Risk	No change
Stroke	Risk	Risk



# Hormone Therapy Contraindications

- Personal history of an estrogen-sensitive cancer (breast or endometrium)
- Active liver disease
- Active thrombosis
- Unexplained vaginal bleeding



# References:

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