

## 早期閉経は複数の心疾患リスクを増大させる可能性がある(Poster Presentation MDP451)

早期閉経歴を有する女性に対し医師は推定される将来的な心疾患リスクを精査すべきである

History of premature menopause should prompt physicians to refine the patient's estimated future risks for heart disease

40歳前に閉経した女性は複数の心疾患リスクが高い、と American Heart Association's Scientific Sessions 2019のポスターセッションで発表された。平均7年間の追跡期間中、早期閉経を来した女性は、従来のリスクファクターを考慮しても、冠動脈疾患、心不全、大動脈弁肥厚および狭窄、心房細動、さらに深部静脈血栓症のリスクが有意に高かった。心疾患リスクは、自然閉経よりも手術により閉経した女性で高かった。このリスクの差の一部は、心血管疾患リスクファクターの違いで説明できる可能性がある。

### Full Text

Women who experience menopause before age 40 are at higher risk for several heart conditions, according to preliminary research presented at the American Heart Association's Scientific Sessions 2019 — November 16-18 in Philadelphia.

In the largest, single study to-date of diverse heart disease risks relative to age at menopause, researchers used the UK Biobank to examine data on more than 144,000 postmenopausal women (average age 60), including about 4,900 women who experienced menopause "naturally" (i.e., spontaneously) before age 40 and about 640 who entered menopause before age 40 after oophorectomy.

During an average of seven years of follow-up, researchers found:

- Women who had experienced premature menopause were significantly more likely to develop conventional heart disease risk factors, such as hypertension, high LDL-cholesterol, and Type 2 diabetes.
- Even after accounting for conventional risk factors, women with premature menopause still had a significantly increased risk of coronary artery disease, heart failure, thickening and narrowing of the aortic valve, atrial fibrillation, and deep vein thrombosis.
- The heart disease risks were higher for women who experienced menopause due to surgery compared to natural menopause. Some of this risk difference may be explained by differences in cardiovascular disease risk factors.
- Whether or not a woman took hormones for menopausal symptoms did not change the cardiovascular risks.
- Menopausal age prior to age 50 had a dose-dependent effect on cardiovascular disease risk, meaning risk continued to increase with younger menopausal ages.
- Increased cardiovascular risks lasted for decades after menopause.

"Our study reinforces the importance of menopause history in informing a woman's risk of future heart disease," said Michael Honigberg, M.D., M.P.P., lead author of the study and a cardiology fellow at Massachusetts General Hospital and Harvard Medical School in Boston. "Women should make sure their physician knows their menopause history, particularly if they experienced menopause before age 40. History of premature menopause should prompt physicians to refine the patient's estimated future risks for heart disease and to work toward lowering their heart disease risks."

He said early evaluations could lead to intervention and medication recommendations. "Whether or not medications are warranted, eating a heart-healthy diet and exercising regularly may be especially important for women with a history of premature menopause," Honigberg said.

Guidelines published in 2018 by the American College of Cardiology and the American Heart Association on management of cholesterol and in 2019 on the prevention of heart disease both recommend that physicians consider a history of premature menopause (defined as menopause before age 40) when making decisions about prescribing a statin medication for middle-aged women who have not yet developed heart disease or stroke.

The UK Biobank has the advantage of extensive and detailed information on a large number of people; however, because most participants are white, the results of this study may not be generalizable to other ethnic groups. In addition, UK Biobank participants as a group are healthier than the general public, therefore, it is possible that these results underestimate the true effects of premature menopause.

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## AHA 2019 特集

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