



CLINICAL COMPENDIUM:
REAL WORLD CLINICAL CASE STUDIES ON THE TREATMENT OF
MENOPAUSAL SYMPTOMS: AN INTERACTIVE EDUCATIONAL ACTIVITY

Dear Colleague:

Thank you for your recent participation in the CE activity “Real World Clinical Case Studies on the Treatment of Menopausal Symptoms: An Interactive Educational Activity,” with Genevieve Neal-Perry, MD, PhD, and Anita L. Nelson, MD, developed by the Annenberg Center for Health Sciences. As you continue to advance the care you provide to these patients, we’d like to summarize the key concepts from this activity:

- Vasomotor symptoms such as hot flashes are burdensome, with 46% of women complaining of moderate-to-severe vasomotor symptoms in the first 2 years following menopause.
- Race and ethnicity are factors that contribute to the length of vasomotor symptoms, with African American women reporting the longest symptom time and Japanese women reporting the shortest.
- Citalopram, escitalopram, paroxetine, duloxetine, venlafaxine, gabapentin, oxybutynin and fezolinetant have a level 1 recommendation from the North American Menopause Society as nonhormonal medications to treat vasomotor symptoms.
- The therapeutic efficacy and safety, as well as patient-specific factors such as age, time since menopause, concurrent disease states, and cardiovascular risk, should be assessed when considering systemic estrogen-based therapy for the treatment of vasomotor symptoms.
- Fezolinetant is a neurokinin-3-receptor antagonist that was recently approved by the US Food and Drug Administration for the treatment of patients with moderate-to-severe vasomotor symptoms.

We hope you will be able to participate in other accredited activities we offer (www.Annenberg.net). Thank you.

Regards,
The Annenberg Center Team