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MENOPAUSE AND DIABETES: EMAS CLINICAL GUIDE

Amsterdam, 13 September, 2018 – A new clinical guide by the [European Menopause and Andropause Society](#) (EMAS) published in the journal *Maturitas* summarises the evidence about menopause and its management and type 2 diabetes.

Diabetes is a public health problem affecting 1 in 10 women in Europe and the USA. The risk of developing type 2 diabetes increases with age and it is estimated that by 2050 over 1 billion women will be aged over 60 worldwide. At the menopause women gain weight and accumulate fat round the waist increasing the risk of type 2 diabetes especially in those with hot flushes. The management of menopause in women with type 2 diabetes is challenging, as the risks and benefits of HRT in affected women are still unclear. This clinical guide summarises the evidence of the effect of HRT on the risk of type 2 diabetes and the management of menopausal symptoms in affected women.

A large body of evidence indicates that HRT reduces the risk of type 2 diabetes. The US Women's Health Initiative and the Nurses' Health studies found a 20% reduction in risk. Most of the large studies have assessed women taking conjugated equine oestrogens combined with the progestogen, medroxyprogesterone acetate; there are limited data regarding other types of HRT. In the E3N French study oral HRT was associated with a lower risk than transdermal. In women with type 2 diabetes HRT has beneficial effects on glucose metabolism.

EMAS recommends that women with type 2 diabetes should not be denied HRT once their cardiovascular risk has been assessed. This will determine the type and route (tablets or patches) that should be recommended. In any case a progestogen with minimal effects on glucose metabolism should be advised. Lifestyle changes such as weight loss, increasing exercise and stopping smoking are integral to management. For those requiring anti-diabetic drug treatment, metformin should be used first line because of its beneficial effects on insulin resistance and possibly on bones, while thiazolidinediones should be used with caution, as they increase the risk of fractures.

The complete statement can be found in 'MENOPAUSE AND DIABETES: EMAS CLINICAL GUIDE' by Radoslaw Slopian and others DOI: <https://doi.org/10.1016/j.maturitas.2018.08.009>
It is published in [Maturitas](#), published by [Elsevier](#).

Notes for editors

Copies of this paper are available to credentialed journalists upon request; please contact Greyling Peoples at g.peoples@elsevier.com.

About the European Menopause and Andropause Society (EMAS)

EMAS promotes the study of midlife health through its journal, congresses, schools and website and encourages the exchange of research and professional experience between members.

Using a range of activities and through its affiliates, EMAS aims to guarantee and provide the same standard of education and information throughout Europe on midlife health in both genders.

Recognizing the issues arising from increased longevity the society also provides articles, patient information, web resources, and referrals for healthcare providers in the field and keeps its members up-to-date. www.emas-online.org

About *Maturitas*

Maturitas is an international multidisciplinary peer reviewed scientific journal of midlife health and beyond, publishing original research, reviews, consensus statements and guidelines. The scope encompasses all aspects of postreproductive health in both genders ranging from basic science to health and social care. www.maturitas.org

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