

Poster - Thursday - Saturday**P 01****Hormone Replacement Therapy Alters Auditory Brainstem Responses in Postmenopausal Women****M. Sator*, P. Franz*, E. Joura*, H. Zeisler*, A. Nessmann*, C. Kurz*, J.C. Huber***

The peak wave V latency of the auditory brainstem response (ABR) has been observed to vary through the course of the menstrual cycle. Two ovarian steroids, estradiol and progesterone, have been proposed to be responsible for the changes in ABR latency that occur in regularly menstruating women. The purpose of this study was to evaluate ABR latency in postmenopausal women receiving either hormone replacement therapy (tibolone 2.5 mg, Livial®; n = 10). All patients included were postmenopausal as documented by the absence of menstrual bleeding for more than 1 year (FSH >30 mU/ml; estradiol < 30 pg/ml). Auditory brainstem responses were measured at baseline and after three months of treatment. When ABR latency data of the tibolone-treated women were compared to those of the control group, we found that both wave V peak latencies and wave I-V interpeak intervals decreased during tibolone treatment. These data support the hypothesis that neural conduction time in the auditory pathway is modified by changes in the circulating levels of steroid hormones.

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Poster - Thursday - Saturday**P 02****The Influence of Hormone Replacement Therapy on the Thickness of Carotid Artery Wall in 67 Postmenopausal Women****M.O. Sator*, D.M. Gruber*, S. Jirecek*, A. Nessmann*, J.C. Huber***

The aim of this study was to measure, with the help of a high-frequency ultrasonography unit (Minhorst, Osteoson D III, 25 MHz), the extent to which the layers of the carotid artery wall (tunica intima, media, adventitia) were influenced by hormone therapy. In 67 postmenopausal women (mean age, 55 years), the three layers of the left carotid artery were measured at the side of maximum pulsation. Three measurements were performed for each layer and the mean of the three measurements was obtained. Thirty-three women had not undergone hormone replacement therapy. At two controls performed in this group of women, the serum levels of FSH were > 40 mU/ml while estradiols level were < 30 pg/ml. Thirty-four women were under transcutaneous hormone replacement therapy (Estraderm TTS 50). The serum estradiol levels in the HRT group were > 50 pg/ml. The patients received hormone replacement therapy for 3-6 years. Only for the intimal layer did ultrasonography reveal a significant difference in the thickness of the vascular wall ($p < 0.05$). No significant differences were registered in the medial and adventitial layers. The serum estradiol levels of the patients correlated well with the thickness of the vascular wall.

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Poster - Thursday - Saturday**P 03****Non-Reproductive Actions of Sex Steroids: Treatment of Menopausal Keratoconjunctivitis Sicca with Topical Estradiol****M.O. Sator*, E.A. Joura*, D. Gruber*, A. Nessmann*, C. Kurz*, M. Metka*, J.C. Huber***

Objective: To investigate the effect of 17- β -estradiol ophthalmic drops in comparison to a traditional tear substitute in postmenopausal women with keratoconjunctivitis sicca.

Design: Prospective, randomised, double-blind study.

Setting: Outpatients clinic for problems related with menopause.

Population: Eighty-four postmenopausal women suffering from keratoconjunctivitis sicca were given a standardised systemic estrogen-gestagen replacement therapy in response to their climacteric syndrome.

Methods: Patients were divided into two groups by means of randomization and were given 17- β -estradiol eye drops ($n = 42$, treatment group) or a tear substitute ($n = 42$, control group).

Main outcome measures: Immediately before the beginning of therapy and after one, two and four months, data on the symptoms were collected by means of a Schirmer's test and a self rating score. In addition, the subjects were asked to assess the degree of their eye complaints using a visual analogue scale (VAS 0/100 mm).

Results: An improvement or a complete absence of symptoms was observed in 34 ($n = 42/81\%$) women in the estradiol group, while therapy was successful in only 19 ($n = 42/45\%$) women of the control group ($p < 0.001$).

Conclusions: Our results show that keratoconjunctivitis sicca can be more successfully treated with a topical estrogen product despite systemic hormone replacement therapy than with a tear substitute alone.

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Poster - Thursday - Saturday**P 04****Gender-Specific Differences in Drug Consumption in Menopausal Women in Austria****M.O. Sator*, D. Gruber*, E.A. Joura*, H. Zeisler*, A. Nessmann*, C. Kurz*, J.C. Huber***

Objectives: Our Group established a retrospective study in 1991 with the aim of evaluating the prescription pattern of seven drug groups in Austria. We wanted to show important gender-specific differences as well as differences within the female population in drug consumption.

Methods: We analysed retrospectively for each gender the prescription rates of seven drug groups up from year 35 until 60 and beyond. First we documented the absolute prescription figures, then we corrected these results in accordance with Austrian demographically statistics and converted them into a per-capita consumption.

Results: We found no gender-related difference up to 35 years of age. Between 35 and 39 and beyond 50, female drug consumption in general doubles and triples, respectively, compared to that of men. The great difference especially in the demand for psychotropics between men and women was most obvious.

Conclusion: We suspect that the stress burden on working women who most often also care for their families is one reason. Another important finding was that women who are on hormone replacement therapy need less further medication than those who do not substitute the menopausal hormone deficit. We especially focused this issue by stressing the clinical and economic importance of hormone replacement therapy.

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Poster - Thursday - Saturday**P 05****The Influence of Hormone Replacement Therapy on Skin Aging****P.-G. Sator*, J.B. Schmidt*, M.O. Sator**, J.C. Huber**, H. Hönigsmann***

Aim: In this study the effects of hormone replacement therapy (HRT) on various parameters of skin aging were investigated.

Methods: In 19 postmenopausal women with a mean age of 54.8 years (45-65), who were without hormonal treatment for at least six months the following skin properties were measured monthly: skin surface lipids (by Sebumeter® SM 410), skin hydration (by Corneometer® CM 820), skin elasticity (by Dermaflex A®) and skin thickness by echography (Osteoson® D III). In addition, clinical controls and photographs were performed monthly.

The therapy groups included: 1. Estrogen alone (Estraderm TTS 50®) (n=4), 2. Estrogen and progesterone [(Estraderm TTS 50® and progesterone vaginal suppository 0.4 mg) (n=4) or (Progynova® 2 mg and progesterone vaginal suppository 0.4 mg) (n=5)], 3. Agnukliman drops® (n=1) and 4. no therapy (n=2). Treatment was performed for 6 months. Three patients interrupted the therapy prematurely.

Results: All patients with HRT showed an increase in skin hydration, elasticity and thickness, as well as subjective and clinical improvement.

Conclusion: The finding of increasing skin surface lipids during combined HRT may reflect stimulatory effects of the gestagen component on sebaceous gland activity while mere estrogen acts sebum-suppressively. Increased sebum production is of relevance in acne-prone skin, and may be the reason for rare cases of acne flares in females with HRT. In these cases a combination with an antiandrogen may serve as treatment option. HRT was shown to significantly improve parameters involved in skin aging. Positive therapeutic effects on skin aging thus expand the profile of positive effects of HRT in postmenopausal women.

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Poster - Thursday - Saturday**P 06****Hormone Replacement Therapy for High Risk Patients****F. SZÁNTÓ***

The aim of the study was to determine if high risk patients can get hormone replacement therapy/HRT/. Among the anamnestic data of these patients were thromboembolism, diabetes mellitus hypertension, epilepsy. Continuous, sequential HRT was given with 17 beta-estradiol patches, supplemented with 10 mg medroxyprogesteron pills in the last 12 days of every cycle. The results showed a great reduction of the climacteric symptoms after a 3 month treatment period, which was maintained continuously during the whole 12-month treatment. The annual laboratory and instrumental check-ups showed no abnormalities, the risk factors among the anamnestic data of the patients did not recur in the course of the treatment. The most common side effects were skin irritation and breast tenderness. In conclusion, the continuous, sequential HRT seems to be safe and effective even in the case of those women, suffering from climacteric complaints and have a medical anamnesis with high risk. In addition, it is the above mentioned anamnesis with high risk, that allows for HRT as a preventive tool even in the case of symptom free conditions.

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Poster - Thursday - Saturday**P 07****The Effect of Hormone Replacement Therapy on Biochemical Markers of Bone Turnover in Postmenopausal Women****H.H. Lee*, S.M. Lee*, S.H. Lee***

The purposes of this study were to evaluate the effect of hormone replacement therapy on the bone mineral density and bone metabolism. Thirty-four postmenopausal women were assessed. After baseline study, conjugated equine estrogen (CEE, 0.625 mg, day 1-30) plus medroxyprogesterone acetate (MPA, 5 mg, day 1-12) were given for 12 months. The levels of serum osteocalcin, serum total alkaline phosphatase and urine deoxypyridinoline decreased significantly ($p < 0.05$) after 12 months of hormone replacement therapy. Bone mineral density of Ward's triangle of femur increased significantly ($p < 0.05$) compared to basal level and 12 months of hormone replacement therapy. These data suggest that hormone replacement therapy has effect of inhibiting bone turnover rate and increasing bone mineral density of Ward's triangle of femur in postmenopausal women.

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Poster - Thursday - Saturday**P 08****The Changes of the Lipid Profiles After Hormone Replacement Therapy in Postmenopausal Women****S.M. Lee*, S.D. Choi*, H.H. Lee*, K.H. Lee***

The purpose of this study was to evaluate the effect of hormone replacement therapy on the lipid profiles to include total cholesterol (TC), high density lipoprotein (HDL) cholesterol, low density lipoprotein (LDL) cholesterol, and triglycerides. We measured lipid profiles in 31 postmenopausal women and gave each conjugated equine estrogen (CEE, 0.625 mg, day 1-30) plus medroxyprogesterone acetate (MPA, 5 mg, day 1-12) for 12 months. The levels of serum TC, LDL-cholesterol, and triglycerides were decreased significantly ($p < 0.05$) and the level of serum HDL-cholesterol was increased significantly ($p < 0.05$) after 12 months of hormone replacement therapy. This data suggest that hormone replacement therapy changes the effect of lipid profiles, so hormone replacement therapy appears to protect against the development of cardiovascular disease.

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Poster - Thursday - Saturday**P 09****Treatment of Osteoporosis with Estradiol Valerate and Levonorgestrel in Perimenopausal Women After Surgical Castration****J. Jeníček*, J. Zivny*, J. Kocian**, H. Vinglerová***

Osteoporosis is the most frequent metabolic bone disease. In Czech republik 7-8% of the population are suffering from this disease, mainly women in postmenopause and in senium.

The bone density (Lunar Achilles), some biochemical markers of bone turnover (serum calcium, phosphorus, total alkaline phosphatase, osteocalcine, excretion of calcium, phosphorus, hydroxyproline in urine) and serum concentration of estradiol and estrone were determined in 3 groups of women. Group A - non-ovarectomized premenopausal women, Group B - women 3-5 years after ovarectomy in the same age as women in the group A and group C - women of the group B treated with estradiol valerate and levonorgestel (Klimonorm) for one year. Bone density in women of the group B was significantly lower compared to those in the group A. In women of the group C the bone density and some biochemical markers of bone turnover were significantly improved compared to women of the group B.

HRT (Klimonorm) had to impact on BMD. Klimonorm is a suitable HRT for the treatment of climacteric postcastration osteoporosis.

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Poster - Thursday - Saturday**P 10****Atheroprotective Effect of Estriol on Human Vascular Smooth Muscle Cells****N. Kikuchi*, M. Urabe*, K. Iwasa*, T. Okubo*, H. Tsuchiya*, T. Yamamoto*, H. Honjo***

Estriol (E3) is recognized as a 'weak hormone', while estrone (E1) and estradiol (E2) are recognized as 'strong hormone'. However, E3 is broadly used in clinic, because it is useful in the treatment of osteoporosis and of patients with lack of endometrial proliferation. There is no report about the atheroprotective effect of E3. In this study, we hypothesized that E3 had atheroprotective effects like E1 or E2. We examined the changes in the expression of mRNAs of growth regulatory molecules, PDGF- α , IL-1, IL-6 and TGF- β , in vascular smooth muscle cells (SMC). First, the activity of sulfatase in vascular smooth muscle cells, where estrone sulfate changes to active estrone, was demonstrated by *in situ* hybridization. Then we examined the expression of growth factor mRNAs after the addition of E3 (10^{-10} , 10^{-8} M.). The level of PDGF- α , IL-1 and IL-6 mRNAs decreased, but TGF- β gene expression was not regulated by E3. The results indicated that E3 inhibited the stimulator of the migration and proliferation of SMC (PDGF- α , IL-1, IL-6), but had no effect on the bifunctional regulator (TGF- β) the same as E1 and E2. The mechanism of E3 function was not totally clarified, but these results showed that E3 might act as an atheroprotective agent by directly controlling of the expression of growth factor genes on SMC.

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Poster - Thursday - Saturday**P 11****HMG-CoA Reductase Inhibitor in Combination with HRT****M. Urabe*, N. Kikuchi*, K. Tanaka*, H. Honjyo***

It is well known, HRT makes a good effect on lipid metabolism and HMG-CoA reductase also make same effect. But there is few report about the effect of combination therapy of these drugs on lipid metabolism. In this study, we examined the effect of HMG-CoA reductase inhibitor in combination with HRT on lipid levels. 55 hyperlipidemic women, postmenopausal or ovariectomized, were administrated with conjugated estrogen (Premarin, 0.625 mg/day, HRT group, n = 10), or HMG CoA reductase inhibitor (simvastatin, 5 mg/day, S group, n = 26), or both (C group, n = 19). Before and every 4 weeks after administration, serum lipids and apolipoproteins were measured until the 12th week. Total Cholesterol (TC) and LDL-C were significantly lowered in all the three groups. HDL-C increased in the HRT and the C group. Triglyceride (TG) increased in the HRT group (N.S.), and decreased in the S group (significant), which in the C group were also decreased (N.S.). Apo A-1 increased only in the HRT group. Apo B decreased in the S and C group. Apo E decreased in all the three groups. These results indicate that simvastatin in combination with HRT exert complementary effect on lipid levels especially on total cholesterol, through suppressing the increment of TG by HRT.

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Poster - Thursday - Saturday**P 12****Monitoring and Treatment of Osteoporosis: Team Approach, Early Detection, Information System****Danilo Mauric*, Martin Bigec**, Robert Miglar***, Danica Bigec****, Peter Kokol*******

The article presents the team approach to the treatment of the women with the problems caused by osteoporosis. We have come to the conclusion that osteoporosis requires a complex and systematic approach and early prevention and detection of risk group of women. With intensive preventive work and health promotion we are trying to stimulate and encourage women to self detect the illness that should initiate their visit of specialised centers. Women are sent to preventive programs or therapy considering risk factors or symptoms that were declared by women themselves. The diagnostic procedure is carried out considering in advance made protocol. Women are sent to therapeutical centers which have license for the complex therapeutical treatment. The prevention of osteopenia and osteoporosis is carried out on three levels: the primary, the secondary and the tertiary level. Physiotherapeutical treatment is included in all levels of prevention and therapy and is carried out individually or in groups. To carry out the unique approach to treatment and verification of the efficiency of the treatment the information system on the base of telemedicine is being developed. Public INTERNET web is used to inform women and to direct them into diagnostic-therapeutic centers. Simultaneously the web is being used for exchanging of the patient's health data and following of the treatment process. For that purpose electronic health record has been developed obeying the law about the protection of medical data. The electronic health record is used for evaluation of the quality of our work. Transfer of information by electronic media enables us to create a unique virtual health center, although our surgeries are in different locations.

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Poster - Thursday - Saturday**P 13****Treatment of Osteoporosis of Elderly Women****K. Tanaka*, M. Urabe*, N. Kikuchi*, H. Honjo***

About 4 to 5 million people are estimated to suffer from osteoporosis in our country today, and the number of patients will double by the year of 2000 AD. Postmenopausal osteoporosis is usually treated with conjugated estrogen or patched estradiol. However, elderly women frequently dislike these hormones because these kind of drugs often cause uterine bleeding. Moreover, in elderly women, the clearance of estrogen is decreased, and the serum estrogen level are apt to be too high by conventional HRT. On the other hand, estriol has weaker effect on the endometrium, and rarely cause bleeding, therefore good compliance is expected.

Of other drugs, calcium, which recover the loss, and vitamin D, which activate osteoblasts, are widely used. Calcium chewable tablet was developed for the higher absorption rate. We studied estriol, calcium chewable tablet (calcium carbonate) and vitamin D in the treatment of osteoporosis of elderly women. Bone mineral density of lumbar vertebrae was measured by DXA analysis, and the efficacy and safety were studied using subjective symptoms and serial blood exams.

We propose estriol in combination with calcium and vitamin D in the treatment of osteoporosis of elderly women (over 60).

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Poster - Thursday - Saturday**P 14****The Traditional Analysis of Constitution in Menopause Women Using Traditional Chinese Medicine Methods****Chao-Chin Hsu*, Ko-En Huang*, Ching-Chuan Tasi**, Hsien-An Pan***

Purpose: To evaluate the general health and body status in menopausal women by traditional analysis of body constitution using Chinese medicine diagnosis method.

Materials and Methods: This study investigate 125 menopausal women who attended the menopausal special clinic in this medical center. They were in the age range of 49-55 and their duration of menopause were 6 months to 4 years. The status of menopause was confirmed by the serum levels of FSH and estrogen. The body status and general health condition was first examined by a specialist of Chinese medical doctor and then followed by the investigation using ARDK apparatus. The results were analyzed.

Results: (1) The body status of menopausal women analyzed by the Chinese traditional diagnostic method distributed as following: vacuity of "Kidney Yin" in 33 cases, vacuity of "Kidney Yang" in 26 cases, vacuity of "Kidney Yin and Yang" in 12 cases, vacuity of "Spleen" and "Qi" submergy in 14 cases, stagnation of "Liver" in 30 cases, and vacuity of "Blood of Heart" in 33 cases. (2) The constitution of body status evaluated by the ARDK showed that depressed body function in 51% of menopausal women, aberration of "Yin and Yang" in 36% of menopausal women, subcontrol of autonomic nervous system in 68% of menopausal women, imbalanced right and left side body in 59% of menopausal women, and imbalanced upper and lower visceral organs function in 72% of menopausal women.

Discussions: According to this study, menopausal women had much higher percentage of abnormal body constitution evaluated using traditional Chinese diagnostic method. Further studies on those women who are taking hormone replacement therapy or traditional Chinese herb drugs should be carried out to consolidate this investigation.

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Poster - Thursday - Saturday**P 15****The Perception of Menopause and Climacteric Among Women in Taiwan****Ko-En Huang*, Hsien-An Pan*, Chao-Chin Hsu*, Bor-Lin Yao*, Meng-Hsing Wu***

Purpose: To evaluate the perception of menopause and climacteric among women in Taiwan and their attitude of receiving hormone replacement therapy.

Materials and Methods: This is a prospective study using structured questionnaire to be answered by women who are attending our educational speech about menopause and HRT. The audiences were asked to fill out the questionnaire before the speech began. A total of 386 women completed all items of the questionnaire. The results were analyzed.

Results: 1) Among them, 375/386 (97%) have previously heard the term of menopause or climacteric but only 207/386 (53%) knew the definition of menopause and climacteric. 2) The most common source of knowledge about the menopause 283/386 (43%) was the reading materials like newspaper and magazine; the other common sources of information were friends 141/386 (22%), medical personnel 114/386 (18%) and the family member 49/386 (8%). 3) Among these women, 276 (71%) thought they should receive therapy after menopause and 65 (17%) thought they don't need postmenopausal therapy. 4) 47% of these women knew HRT can have favorable effects to osteoporosis and 30% knew HRT can reduce cardiovascular disease. However, 10% of cases did not know the effects of HRT.

Discussions: According to this epidemiologic study, Taiwanese women had much higher percentage of awareness of menopause than other Asian women that had been reported previously, and higher willingness to have treatment. Also we found that most of knowledge about menopause came from reading sources (43%) and friends (22%).

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P 16

The Epidemiology of Acute Menopausal Symptoms in Taiwan

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Purpose: To evaluate the percentage of various acute menopausal symptoms occurred in Taiwan.

Materials and Methods: A prospective study using structured questionnaire to be answered by women who are attending our educational speech about menopause. The audiences were asked to complete the questionnaire before the speech. Among them, 161 women were postmenopausal and their answers to acute menopausal symptoms, multiple choices, were included for statistical analysis.

Results:

1) The 161 subjects were subdivided by different menopause age range, the data was shown below, the largest percentage of menopause age in these women was 48-53 years (48%).

Subgroup A	<= 40	41-45	46-55	51-55	56-60	=>61	Not filled
No (%)	17 (11%)	17 (11%)	59 (36%)	46 (28%)	3 (2%)	0 (0%)	19 (12%)
Subgroup B	<=40	41-47	48-53	54-60	=>61		Not filled
No (%)	17 (11%)	35 (22%)	78 (48%)	12 (7%)	0 (0%)		19 (12%)

2) The most common acute menopausal symptoms, in order, are insomnia 68/161 (42%), hot flush 61/161 (38%), palpitation 55/161 (34%), bad temper 54/161 (34%), dyspareunia 52/161 (32%), headache or dizziness 45/161 (28%), weakness 42/161 (26%), depression 32/161 (20%), night sweating 29/161 (18%), and urine leakage 26/161 (16%).

Discussion: The most age of menopause of these Taiwanese women is between 48-53 years. The percentage of recognition of menopausal symptoms is similar to that of western women and higher than that of Hong Kong and southern China women specially vasomotor symptoms.

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Poster - Thursday - Saturday**P 17****Three Years in Practice of Our Menopausal Ambulance****S. Bagdány*, M.D., Ph.D., I. Petróczi*, Z. Kollár*, G. Szathmáry*, F. Tamási***

Introduction: The menopausal ambulance began his work three years ago in the south region of Budapest. This policlinic part was organised on the basis of the data that there are living 200 thousand people and about 40 thousand women with age 45-75 years.

Materials and methods: There were analysed the data of 486 women who were registered in last 3 years. The authors made the next investigations: complex-laboratorial analysis, densitometry ultrasound, mamography, cytological and gynaecological examinations. The HRT therapy was: Kliogest, Estrafem, Trisequens, Ovestin, Estraderm, Klimonorm, Livial, Divina.

Results: The hormonal replacement therapy was successfull in 78,6% at the first preparation and at 21.4% of the patients was changed the therapy. The laboratorial and clinical investigations showed pathological changes before the treatment at 24 women / 2,42% / and they were sent for further investigations.

Conclusions:

- The basic investigations before HRT can clarify many diseases at these women.
- The HRT is good at the 75% of women.
- The Ca therapy is necessary about 50% of the women for the women for the prophylaxis of osteoporosis.

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Poster - Thursday - Saturday**P 18****Genital Human Papillomavirus Infection During Postmenopause****M. Manavi*, A. Berger*, E. Kucera*, R. Ferris**, F. K. Czerwenka****

Human Papillomaviruses (HPV) 16/18 and 6/11 are considered to be high risk and low risk cancer-associated HPVs, respectively. Further, HPV types 31/33/35 have been demonstrated to be of intermediate association with cervical squamous intraepithelial lesions (SILs). These seven types account for about 70% of cervical lesions. HPV-types 39/42/43/44/45/51/52/56/58/59 and 68 have also been identified as the fundamental HPVs detectable in remaining lesions. The onset of HPV infections usually occurs during premenopause. We, therefore, examined postmenopausal patients (age-range: 48 to 59). A new Digene HPV-Screening test which takes advantage of Hybrid Capture- and chemoluminescence-technology enabled the determination of the positive rate - "low risk" and "high risk" (incl. new HPV types)- in a collection of 220 postmenopausal patients' Pap-smears, all abnormal cervixes. 24.0% of postmenopausal patients with low grade SIL tested positive for low risk HPV types but only 12.0% were positive for high/intermediate-risk HPV types, in contrast to premenopausal women under 48 years of age (mean age 29 years) testing positive for low risk HPV-types (33.0%) and high/intermediate risk HPV types (6.0%). Twenty nine per cent of the women with high grade SIL and squamous cell carcinoma (SCC) of the cervix tested positive for the HPV high risk types. The low risk HPV types were less frequent in the high grade SIL and SCC groups in contrast to the high risk types which increased between the age of 48 and 59. This indicates that the postmenopausal state represents a period of risk for high/intermediate-risk HPV-positive cervixes as these virus-types were also found in 61.0% of postmenopausal cervical-SCC cases.

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Poster - Thursday - Saturday**P 19****Which Type of Contraception at Young Women****Z. Kollár*, G. Nyitray*, J. Kerényi*, É. Jámboor*, S. Bangdány, M.D., Ph.D., Prof.*, E. Puskás***

The type of contraception at young between 14-20 years old is discussed in literature. Some authors observed good effect of monophasic tablets, others underlined the significance of phasic - tablets.

Material and methods: Two contraceptives - monophasic Mercilon and triphasic Tri-Regol were compared at younger between 15-20 years old /30 - 30 girls/ and these preparations were the first in her life.

Result: The investigations show that no difference in effect of these tablets. The side effects were similar in both group. The menstrual bleeding was regura 2 - 5 days in Tri-Regol group, and it was less in Mercilon group.

Conclusion: Both tablets have good effect at young women. It may be the previous at the triphasic tablets that they simulate the hormonal changes of the normal menstrual cycle.

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Poster - Thursday - Saturday**P 20****Behavior, and Self Health Monitoring of Menopausal Symptoms in Menopausal Bangkok Women****Sasitorn Chamthavorn*, Tanimporn Ninlagarn*, Suchada Manotaya*, Yupha Onthuam ***

The purpose of this study is to analyze the knowledge, attitude, and behavior (KAB) towards menopausal symptoms and self health monitoring in Thai women between the age of 45 to 65 years old. The study also included the use of HRT and vitamins among Bangkok women. The study utilized the cross sectional study design for perimenopausal and postmenopausal women in Bangkok. The survey was responded by 600 women in which 293 were perimenopausal and 307 were postmenopausal. The survey was conducted at three government hospitals, two universities, and three fresh food markets in Bangkok. The average age of perimenopausal and postmenopausal women was 47.7 and 57.2 years old, respectively. From both groups, 40.8% of the women have had an educational below the high school level. The results revealed that both groups had approximately the same level of menopausal symptoms knowledge. The perimenopausal women showed significantly higher level of stress than postmenopausal women. The forgetfulness, hot flushes, insomnia and stress incontinence were the main symptoms (>50%) for both groups. However, postmenopausal women had greater occurrence of symptoms than the perimenopausal group. Of all the 600 women, 69.5% expressed their intention of receiving medical treatment from a physician. Within this group, 52.8% would like to take daily pills without menstruation that would stop symptoms. Furthermore, 18% exhibited their interests in using HRT to prevent menopausal symptoms.

In conclusion, the results suggested that women in Bangkok in general have gained knowledge of menopausal symptoms. The trend towards the used of HRT in Bangkok was significantly increased. However, additional information on health care and awareness for menopausal women such as exercise, healthy diet, and sensible use of hormones should be provided broadly to all community.

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Poster - Thursday - Saturday**P 21****Cortical Ultrasound Velocimetry as an indicator of the State of Osteoporosis During HRT in Climacteric Women****J. Jelinek*, A. Roztocil*, L. Pilka***

The osteoporotic changes were followed-up the new densitometric method in the group of 52 women treated by HRT. Sound Scan 2000 using "Speed of Sound" (SOS) for the measurement of tibia's corticalis was used. The followed-up group of women was divided into 3 groups; premenopausal healthy women, postmenopausal healthy women and postmenopausal women presenting osteoporosis diagnosed by means of osteomarkers. The sensitivity of the used method was evaluated. The false positive results were not present in all followed-up groups. In the group of postmenopausal healthy women and those with osteoporosis the classification bias reached 11.23% which is fully comparable with other densitometric methods. The method used proved a high diagnostic specificity, X-rays are not used and is very suitable for the monitoring and diagnostic screening in patients treated by HRT for osteoporosis.

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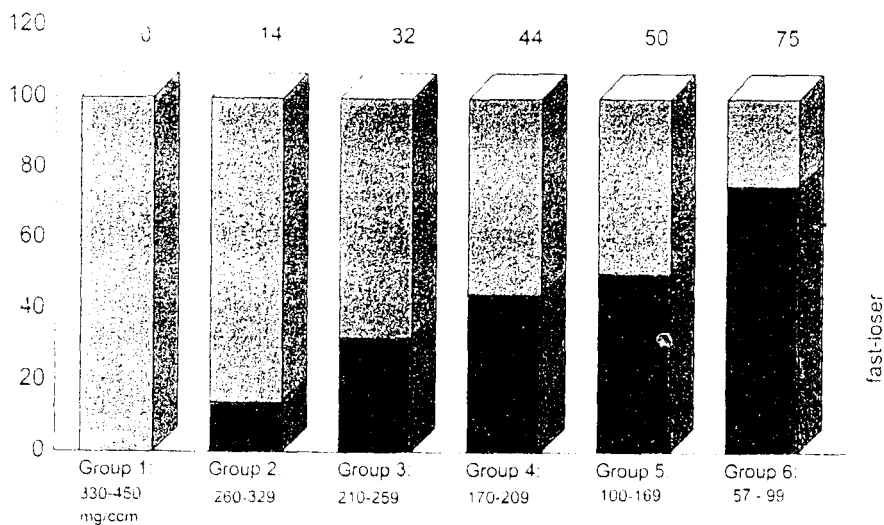
Poster - Thursday - Saturday

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Is The Amount of Loss of Trabecular Bone Dependant on Base-Line Bone Density?

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Introduction: For the tailored prophylaxis/treatment of osteoporosis we divide our patients in fast and slow losers using high precise peripheral quantitative computed tomography (Densiscan 1000, Scanco Medical Zürich). Based on the bimodal frequency distribution of the annual loss rates from the trabecular bone of the distal radius, fast losers lose $>3\%$ per year in the first years after menopause. The long term reproducibility of trabecular bone in the distal radius is 0.3% for mixed collectives. Therefore the classification into the two groups is possible with two measurements in a time interval of only 6 month.



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Aim of the study: To evaluate whether the loss of trabecular bone density depends on the base line trabecular density.

Patients: We divided 135 untreated normal, osteopenic and osteoporotic patients in 6 groups according to the trabecular bone density and the loss in the radius/year.

The results show that the lower the trabecular bone density the higher the relative bone loss-probably due to augmented surface. e.g. in the lowest bone density group (57-99 mg/ccm) we find in 75% a fast loser state.

Conclusion: Based on this data the lower the trabecular bone density is the more it is justified to use antiresorptive agents and the higher it is to use anabolic substances.