



Dr. Ratnabali Chakravorty  
President IMS India, 2018-19

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## Indian Menopause Society

### 1<sup>st</sup> International Newsletter

June 2018

Theme 2018: Menopause ....A New Mindset!

Slogan: **Fit @ Forty, Strong @ Sixty & Independent @ Eighty**

## 1<sup>st</sup> IMS International Newsletter

### **16<sup>th</sup> World Congress on Menopause Scientific Deliberations**

6<sup>th</sup> -9<sup>th</sup> June 2018, Hotel Fairmount, Vancouver, Canada

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  - **Association with Sarcopenia- Talk by Dr. Atul Munshi**
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### **Highlights of the World Congress!**

**By Dr. Atul Munshi, IMS India Representative to CAMS**



*It was a unique experience to attend International Menopause Conference with record number of delegates from our country representing Indian Menopause Society.*

*Forty Indian participants included speakers, chairpersons, delegates presenting posters and interested delegates from Length and breadth of India. Few Indian origin delegates from other countries were also attending this mega event.*

*3 days official conference was preceded by scientific workshop*

#### **On 5<sup>th</sup> June – workshop topics were**

- *The Perimenopause: Challenges & Solutions, and Dinner Symposium - When MHT is so good*

#### **On 6<sup>th</sup> June – following interesting topics were discussed**

- *Cardiovascular window of opportunity, Androgens – too much or too little? Understanding, preventing and treating urogenital diseases, worldwide trends in menopausal symptoms. A session on Contraception for the older woman was Chaired by Dr. Sonia Malik, Past President, IMS.*





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#### **On 7<sup>th</sup> June – topics included**

· *MenoGuias AEM: Recommendations based on the system GRADE, Cardiovascular disease and menopausal hormone therapy in Korean women, Update on Menopause, The Multiple Faces of Menopause, Life after Cancer, Transdermal MHT: Key Issues- 16 Years Post WHI, Reproductive depression & Quality of Life, Optimising the pelvic floor, Menopause, beyond obesity and metabolic disorders*

#### **On 8<sup>th</sup> June – topics included**

· *The Indian Menopause Society conducted a Symposium entitled 'Bone Health "Bone Health – The Indian Scenario, A change of Heart, Medically induced premature ovarian Insufficiency, From Evidence to practice, Estrogens and Breast Cancer, The Challenges of the Menopausal Women, Sexuality: Psychological perspectives.*

*A session on "Breaking News" was chaired by Dr. Meeta, Past President , IMS and Dr. Jyothi Unni, Past President IMS, chaired a Debate on Ovarian Cancer Screening : Is there a Role?*



#### **On 9<sup>th</sup> June – topics included**

· *Menopause: At work, rest and play, Health and quality of life in midlife women, Breast cancer and hormones, Premature Ovarian Insufficiency, Obesity: challenges and strategies, An update on clinical trials of menopause, Basic research in menopausal medicine*

*Plenary sessions on variety of relevant topics by global experts, interactive sessions and symposia by leading clinicians, clinical researchers and basic scientists were quite interesting.*

*Overall the 16 World Congress on Menopause provided a unique balance between clinical and basic research papers on Women's health from midlife and beyond.*

*Time management was excellent. Inauguration, Valedictory and all other official sessions were simple and to the point.*



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#### **A word about Indian participation at this congress:**

- On 6<sup>th</sup> June – the CAMS governing council meeting was attended by Dr. Duru Shah, Dr. Sunila Khandelwal and Dr. Atul Munshi.
- Dr. Sunila Khandelwal was declared elected as Treasurer of International Menopause Society.
- At 7:30 pm on same day India Nite was celebrated at Salam Bombay. Almost all Indian delegates and invited guests from the international Menopause Society Board were participants. Fun filled night in presence of our Indian national flag and delicious Indian cuisine were appreciated by one and all. Dr. Ratnabali and her team managed the show meticulously.
- On 7<sup>th</sup> June – the CAMS dinner was attended by Dr. Sunila Khandelwal, Dr. Ratnabali Chakravorty and Dr. Atul Munshi.

#### **On 8<sup>th</sup> June – The Indian Session**

*Bone Health – The Indian Scenario (Indian Menopause Society)*

*Chairpersons: Jignesh Shah, Jyothi Unni*

- *Parag Biniwale Epidemiology in Indian subcontinent*
- *Atul Munshi Association with Sarcopenia*
- *Reeti Mehra Preventive Strategies*
- *Ratnabali Chakravorty Current Management Options*
- *Bipasa Sen Future Prospects*

*The session was well attended and quite interactive.*

- *The Presidents dinner on 8<sup>th</sup> at roof top was very impressive. Office bearers with past presidents of IMS attended on behalf of India.*



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· Presentation of special awards to Dr. Duru Shah and Dr. Sunila Khandelwal were star attractions.

**9<sup>th</sup> June** was the last day and the valedictory session was attended by Dr. Duru Shah, Dr. Sunila Khandelwal, Dr. Ratnabali Chakravorty and Dr. Atul Munshi.

**Overall it was a pleasing and satisfying experiencing to attend THE 16<sup>TH</sup> World Congress on Menopause in the beautiful city of Vancouver.** The standard of academics & time management was superb! Simple inauguration & valedictory!

About 40 Indian delegates, more than 10 posters, quite a few lectures well attended INDIAN academic session & Fun filled Indian Nite & ABOVE ALL TWO PRESTIGIOUS AWARDS! INDIAN MENOPAUSE SOCIETY SHINES!



**I am more than happy as CAMS representative!**



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### **Awards & More ..... at 16<sup>th</sup> World Congress**

**By Dr. Sunila Khandelwal**

**“The Wulf Utian IMS/CAMS Award”** awarded to **Dr. Sunila Khandelwal**  
For Achievement in Furthering Women’s Health



The Recipient of Award was announced during CAMS assembly on June 7, morning, at Hotel Fairmont, Vancouver during World congress on Menopause, 2018. Dr. Sunila was the first awardee!!!

**“The Presidential Recognition Award”** awarded to **Dr. Duru S. Shah**  
For the First ever Smart Phone App- IMPART in furthering Post-Menopausal Health In Women





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I felt truly honoured and emotionally touched getting this recognition during the Presidential Gala Dinner in warm presence of my dear friends past presidents of IMS and having this award bestowed on me by Prof Wulf Utian meant a lot to me!



Personally, I feel so fortunate for having his blessings since last 20 years. Ever since I met him personally at Boston NAMS meeting (1997), he is always a source of inspiration to me. We all appreciate his Pioneer work, contributions with dedication and commitments for mature women health care. His vision for creating such an important arm of International Menopause Society – CAMS, is acting as a vehicle to diffuse the work of this organization across the globe for furthering women's health.

CAMS is an initiative instigated by Prof Utian, but I took opportunity to convey my sincere thanks to Camil, the past chairman, whose prompt responses to my efforts, not only during my role as CAMS representative of India and CAMS Secretary, but till today working in board together, I will cherish forever!

Looking back, last 20 years in this passionate journey with Indian Menopause Society and also nearly 10 years working actively with International Menopause society in different roles, I learned a lot from each one of you especially Duru, Sonia, Meeta, Jyothi, Ratnabali & Dr Atul Munshi( their cheers made this



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evening so special) off course our founders Madam Rama Vaidya & Dr Urvashi Jha. My heartiest congratulations to Duru for the President's Award!



My special thanks to dear Arshia at our secretariat passing me the compiled reports, which received a great applause globally and Lee Tomkins (Executive Director International Menopause Society) for her continuous practical directives and help at each step, to work in this field confidently. Honestly, without the inspirational Guidance, cooperation & encouraging support from my own organisation - IMS Family, my friends I wouldn't be able to do anything. So, this is truly yours!

Personally, I extended my gratitude to the Jury for this prestigious award and accepted it with all humility; was a little proud yet humbled, elated yet anxious, because there is so much to do. Getting this award does not mean that it is the end of the road for me, rather it is the inspiration to do much more.

Your faith in me over these years, has motivated me to take up Executive position in at International Board, in the challenging role of treasurer. I would strive to keep India flag flying high and to lend my support to strengthen both the organization.

Once again thank all the big delegation who has kept our visibility strong at this great academic event and also for this excitement in my life, which will propel me further and to soar high towards my precise destination of improving women's lives in their second adult hood - Menopause & Beyond!

#### **Introduction of the present Executives:**

CAMS Chairman- David Archer

President IMS – Susan Davis

Sigma Canadian President & Host





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President Indian Menopause Society  
Dr. Ratanabali Chakravorty

IMS Executive Director – Lee Tomkins



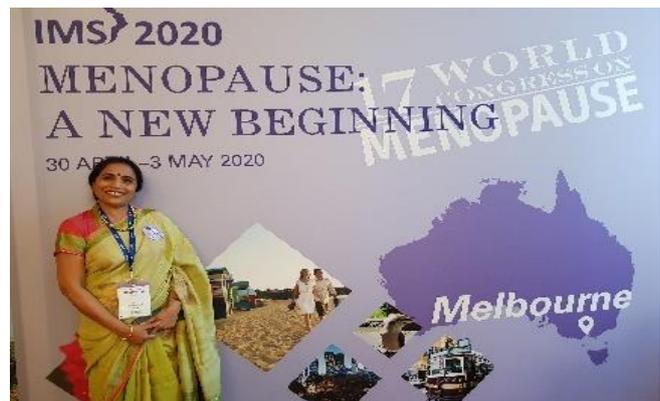
### Glimpses of the main events at world congress

Launching of IMPART .....at opening session.

Meet the expert Breakfast session, Symposium on Obesity & Media reporting.....



Social times & Inaugural function highlights.....



**Hope to have you all at Melbourne 2020 world Congress! Till then Cheers!!**



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## **International Menopause Professional Activity For Refresher Training IMPART Programme**

**Talk by Dr. Duru S. Shah**

**Reported By Dr. Duru S. Shah and Dr. Alka Kumar**

**Worldwide menopause and preventative healthcare training scheme launched.**

**International Menopause Society launches first-ever smartphone App for post-menopausal health**

A new online training course to enable doctors to optimise the healthcare of the vast numbers of women in their care who are in midlife or going through the menopause, is being launched today by the International Menopause Society, the world's leading international organisation focused on menopause and associated health issues.

The International Menopause Society Professional Activity for Refresher Training- "IMPART" course is aimed at both family doctors and medical specialists, was launched at the World Congress on the Menopause in Vancouver. In spite of menopause being one of the most common conditions they manage, many family doctors are not aware of the best practice recommendations for menopausal symptoms, and lack confidence in prescribing treatment.

This is the first educational initiative pertaining to menopause that is internationally applicable to family doctors and specialists working in midlife women's health. IMPART delivers internationally-accepted evidence-based educational material to improve midlife women's health care. IMPART is accessible on line and is cost free.

*"This is an area where there has been a deficiency in readily-available continuing medical education"* said Professor Duru Shah (University of Mumbai, India), Director of Digital Education for the International Menopause Society.

IMS President, Professor Mary Ann Lumsden (University of Glasgow) said: *"This is a much-needed educational initiative put together by a group of clinicians from all around the world. Physicians who successfully complete the course will thus be confident that they are working to the best internationally-accepted standards. IMPART means that women approaching midlife and the menopause can be sure that their doctor is trained to current best-practice."*

Incoming IMS President, Professor Susan Davis (Monash University) added: *"The IMPART project will be a core educational activity for the International Menopause Society over the foreseeable future. Doctors completing the course will be equipped with the tools to make a positive long-term impact on the lives of their female patients and their families"*.

Doctors can register for the IMPART course (the course is **free**) via the IMS website <http://www.imsociety.org/>. The course has been developed with the assistance of Technology Partner Bio Quest, with multi-level review by the IMS, under Professors Johannes Bitzer (University Hospital, Basel), Mary Ann Lumsden (University of Glasgow), Susan Davis (Monash University, Melbourne), Mr Tim Hillard (Poole Hospital, UK) and Professor Duru Shah (University of Mumbai).

This individualised App – the **Menopause Health Tracker** enables women to better understand their individual health risks for such conditions as cancer, heart disease, mental health and osteoporosis. It was launched at the World Congress on Menopause in Vancouver and available on the Apple Store & Google play

Women are well aware of the menopause itself, but most women know little of how their health risks change during and after the menopause. This App allows women to understand which changes might be relevant to them and so take steps to ensure a healthy the menopause into old age.



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### **Showcasing India at 16<sup>th</sup> World Congress**

**By Dr. Ratnabali Chakravorty, President IMS**

**Report by Dr. Bipasa Sen and Dr. Pushpa Sethi**

**Date - 06.06.2018**

**Venue - Hotel Saalam Bombay, Vancouver Downtown**

The Indian Menopause Society  
Cordially invites you to an  
*India Nite*  
on  
Wednesday: 6<sup>th</sup> June 2018  
Dinner @ 8.30pm  
Venue: Salaam Bombay  
Diagonally opposite to Fairmount- 130 mtrs  
217 - 755 Burrard Street, Vancouver BC V6Z  
Dress Code: Semi Formal

Dr. Ratnabali Chakravorty President  
Indian Menopause Society  
Dr. Atul Munshi India Representative  
Dr. Duru S. Shah Member, Board of Trustees  
Dr. Sunila Khandelwal Member, Board of Trustees  
International Menopause Society  
RSVP - indianmenopausesociety@gmail.com



The INDIA NIGHT was celebrated at The International Menopause society congress at Vancouver on 6<sup>th</sup> June evening, at "SALAAM BOMBAY". It was attended by most of the members of Indian Menopause society attending the conference together with their spouses.

The International menopause society Board members attending the conference included Dr Mary Ann Lumsden, Immediate Past President,, Dr Susan Davis, President, Dr Sunila Khandelwal, Treasurer International Menopause Society, Dr Rod Baber, Past President and editor Climacteric with his wife, Dr Serge Rozenberg, member Board & Dr Duru Shah, Director of Digital education..



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From our own GC, we present Dr. Ratnabali Chakravorty, President Indian Menopause Society, Dr Pushpa sethi , Secretary General IMS, Dr Bipasa Sen, Joint secretary IMS, Past Presidents Dr Meeta Singh, Dr Sonia Malik, Dr Jyothi Unni, Dr. Atul Munshi, IMS Representative to CAMS , Dr Maninder Ahuja, Dr. Jignesh Shah together with most members attending the conference.



The evening started with our (Bipasa, Anju Soni, Lakshmi Ratna, Bharati, Ratnabali, Sandhya, etc etc - I mean all others ) enthusiastic efforts to decorate an arena of the restaurant with Indian Flag, IMS flag, Tricolour Ribbons on tables, one table specially decorated with lamps - on which the cake was kept. We all put on tricolour ribbons in many innovative ways- some on their wrist to some on their hair to some wearing it like garlands. We all wore metal IMS badge and some put on tricolour hats brought by Jignesh. The tune of Vande Mataram was played ! Indian food was served, Indian music was played, The fun went on till 10pm. The Gala Nite ended with photo session. It was a very lively evening, with a lot of interaction and sumptuous dinner. A Cherished memory for ever.





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### **IMS Then and Now ..... From Budapest to Vancouver!**

**By Dr. Sonia Malik, Past President IMS 2007-2008**

The IMS was founded in 1995 and was doing well in spreading awareness about menopause amongst both doctors and general public. However, with just a handful of members its presence in the country and abroad was insignificant. The founder secretary Dr. Urvashi Jha had initiated a dialogue with international societies but we had no representation abroad. We also got to know that internationally as well they were also not very organized. I took over as secretary general in 2004 and started correspondence with the International Menopause society.



The 11<sup>th</sup> World Congress of the International Menopause Society in 2005 brought in radical changes in international thought. With the incoming of the new team headed by Prof. Amos Pines, IMS expanded tremendously. It was realized that for Menopausal medicine to grow, there should be representation from all parts of the globe. The CAMS consisted of only 10 member countries. It was decided that the CAMS must be given some autonomy and have programmes and meetings separate from the IMS. The **Council of Affiliated Menopause Societies** also elected a new chairman – Dr. Alice McLennon from Australia, while Dr. Genazzani became the secretary and Dr. Ertungealp the new treasurer. As a part of the new initiative, invitations were sent to societies to join the IMS Consensus meeting to be held in Budapest February 2007. In 2007, I was the President elect and received an invitation to join the International Menopause Society meeting at Budapest.

On receiving the invitation, I highlighted the advantages of becoming members of CAMS to all governing council members and the following members of the governing council became members of the International Menopause Society:

1. Dr. Jyothi Unni
2. Dr. Duru Shah
3. Dr. Sonia Malik
4. Dr. Meeta Singh
5. Dr. Sunila Khandelwal
6. Dr. Nirmala Aggarwal
7. Dr. Indarani Ganguli

This enabled us to join the Council for Affiliated Menopause Societies (CAMS). CAMS was to become a very strong arm of the International Menopause society comprising of representatives from various national societies while the **International Menopause Society** is a society of INDIVIDUAL MEMBERS. CAMS was therefore the group that looked after the interests of different societies. The minimum



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requirement of IMS members needed to qualify entry into CAMS is 5 members of the International society that belong to the same national society. Since we had 7 members from the Indian menopause society as International Menopause society members, we joined CAMS in February 2008 and I, then President Elect 2007 -2008, became the CAMS representative from India. I along with Dr. Meeta Singh attended the CONSENSUS GUIDELINES MEETING in Budapest as special invitees.

Joining the IMS gave us the confidence of some recognition but in order to tell people at home that the Indian Menopause Society was a group of hard working, highly motivated, serious physicians, we needed to show case ourselves.



We organized our first International conference in March 2008. I was the organizing chair and Dr. Jyothi Unni was the organizing Secretary. With 18 international speakers, it was the first time that India witnessed a very successful conference on the subject of menopause. This also launched us abroad. Many landmark decisions took place : an exchange programme with the British menopause society , the birth of SAFOMS and invitations to join APMF and NAMS. As a member of CAMS, for the first time we got our symposium in the upcoming 10<sup>th</sup> World Congress at Madrid.



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Interestingly, it was still difficult to make people join this congress and we were just 8 representatives from India. However, with stories of our successful conference in Delhi, we were received well and represented quite well. Our participation:

IMS Symposium , 2 Oral papers, 2 posters & 1 chaired two sessions

I was interviewed for a film on "MENOPAUSE AROUND THE WORLD" which is being produced for the ministry of health of France and addressed the press conference on Breast Cancer.



Dr. Duru as President and me as the CAMS representative attended the CAMS meeting there.



As years have passed, I have seen the society grow with leaps and bounds. Each president has given his or her best. In fact each member is doing her/his best. The 16th World congress at Vancouver was a



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delight for me. With 38 members attending the conference, we were now capable of celebrating an India night and inviting Council members for it! We are also so proudly and prominently sitting as Board members of International Menopause Society and CAMS , with Dr. Sunila Khandelwal as treasurer IMS and Dr. Duru incharge of Digital of Education! It was a totally different experience now as we were recognized, appreciated and applauded everywhere. As special invitees to the Presidential dinner, it was a treat to see both our representatives getting special awards! Sunila Khandelwal got the Wolf Utian Award for exemplary service in the field of Menopause and Duru got the President's special award. A proud moment for all of us.

It was indeed a very satisfying experience for someone who initiated this movement in 2004.



I congratulate the President Dr. Ratnabali and her team for getting us all together during the congress and for bringing out this newsletter which will be another landmark in the history of IMS.

**God bless IMS!**





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### **The Certification Knowledge on midlife health**

**Talk by Dr. Duru Shah**

**Report by Prof. Anjoo Agarwal, Lucknow**

The session was a proud moment for India. Dr. Duru presented the concept behind the IMPART program which was launched by her. It was conceptualised in 2016 when the international menopause society decided to expand its scope into education. Thereafter it was developed by Dr. Duru with the help of her team. The funding was done by Pfizer with an unconditional grant. The program is aimed at effective utilization of the window of opportunity and vulnerability by both physicians and consumers. That is why it has 2 programs one for physicians and one for consumers. After introducing the concept Dr. Duru officially released the online program with a lot of fanfare inviting the main contributors on stage mesmerising the audience.





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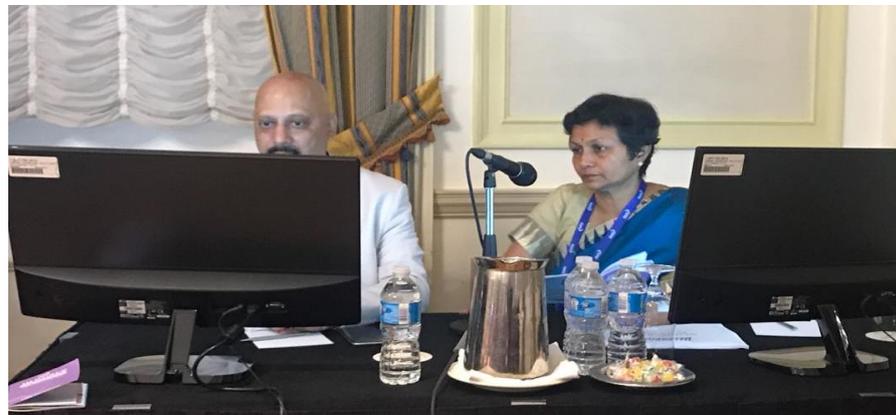
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### **Bone Health - The Indian Scenario**

*Session Chaired by, Dr. Jyothi Unni & Dr. Jignesh Shah*

- *Dr. Parag Biniwale- Epidemiology in Indian subcontinent*
- *Dr. Atul Munshi- Association with Sarcopenia*
- *Dr. Reeti Mehra- Preventive Strategies*
- *Dr. Ratnabali Chakravorty- Current Management Options*
- *Dr. Bipasa Sen- Future Prospects*



#### **Epidemiology in Indian subcontinent**

**Talk By Dr. Parag Biniwale  
Reported by Dr. Hema Warriar**

##### **Key Message:**

As life expectancy increases, India will see increase in population of postmenopausal women, from 8.1 million in 2002 to 324 million in 2050.. No. of osteoporotic women were 36 million in 2013. In women aged 30 to 60 years, osteopenia prevails in 52% and osteoporosis in 29%. The major cause is inadequate nutrition. In addition dressing pattern, darker skin pigmentation, indoor work and genetic factors also contribute. Dietary factors include low calcium diet (milk and milk products being expensive).In addition, there is no national program for bone health. Many studies have shown that Vitamin D deficiency exists in 52 to 100% of population. There is also poor awareness among public on the disease Osteoporosis. There is increased fracture risk, especially hip and vertebral fractures. One year mortality after hip fracture is upto 30%.

**Conclusion:** Osteopenia among women needs to be addressed properly and remedial steps should be taken, by prioritising as a public health problem and increasing awareness among public.





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▪ **Association with Sarcopenia- Talk by Dr. Atul Munshi**

**Report by Dr. Lakshmi R. Markani**

**Key Message:** Sarcopenia is loss of muscle mass and function associated with ageing. By 2050 individual more than 65 years would be 20% of global population. At around 4th decade of life, decline occurs in muscle mass and strength. This accelerates with advancing age.. Physically inactive people can lose as much as 3-5% of their muscle mass per decade after age 30. Screening should be done in high risk individuals.

Diagnosis is done by muscle mass anthropometric, bio impedance analysis, DEXA and Hand grip strength.

Physical power impairment by: weak muscle strength, slow gait speed and poor balance.

The principles of treatment:

-Prevention: Exercise, life style modification and nutrition which includes Calcium, Vit D, Protein and supplements.

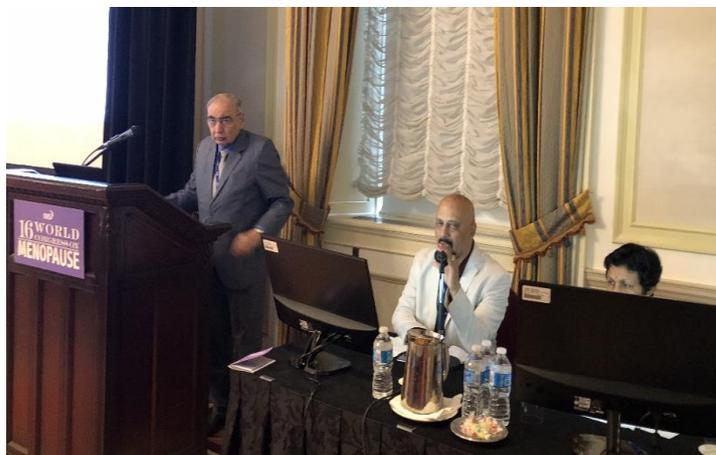
- Medical therapy:

Growth hormone: IGF 1, Ghrelin.

Role of MHT: Indirectly improves correction of osteopenia and osteoporosis.

Anabolic Steroids: Short term benefit.

**Conclusion:** In mature women Sarcopenia is an important ailment with grave consequences if neglected. Life style changes and proper nutrition can play an important role in its prevention and management.





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#### ▪ **Preventive Strategies- Talk by Dr. Reeti Mehra**

**Reported By Dr. Bharti Morey**

Osteoporosis causes considerable morbidity & mortality. It also has a tremendous impact on the social & economic bearing of the nation. Thus preventing this silent killer is of paramount importance.

The strategies of prevention are essentially as follows—

1. Adequate vit D & Calcium supplementation
2. Enforcing lifestyle changes e g avoiding excess alcohol & smoking
3. Physical exercises
4. Recognizing osteopenia & of high risk
5. Performing BMD with DEXA & FRAX Score in high risk patients.
6. Starting pharmacotherapy in indicated patients.
7. Ensuring continuance of the treatment & follow up
8. Creating awareness of Osteoporosis in general population via medias like Radio & Television



#### ▪ **Current Management Options- Talk by Dr. Ratnabali Chakravorty**

**Reported By Dr. Jyothi Unni**





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*New Approaches to Treating Osteoporosis*

**Key Messages:**

*There is a huge burden of Osteoporosis in our country and it is imperative to screen, prevent and treat this.*

*The importance of lifestyle intervention, Calcium and Vit D was stressed. Pharmacologic treatment was advocated in high risk women and women with Osteopenia and Osteoporosis. Menopausal Hormone therapy should be considered in women who also have menopausal symptoms.*

*The role and dosage of various Bisphosphonates, SERMS, particularly Raloxifene, Calcitonin, Strontium and Flouride was elucidated.*

**Conclusion:** *Individualise treatment for Osteoporosis based on age and symptoms.*

▪ **Bone Health- Future prospects – Talk by Dr. Bipasa Sen**

**Report by Dr. Sandhya Dixit**

*In the future overall, multifaceted and multidisciplinary approach is the key with, counselling, physiotherapy, life style modification and advanced Spine surgeries wherever required.*

*The pharmacotherapy of Post Menopausal Osteoporosis includes newer Serms like Bazedoxifene, newer Bisphosphonates , Calcitonin Parathormone and others Strontium ranilate, Odanacatib Advanced diagnostics may help aid in early diagnosis. Some of these are: height of vertebrae in spine radiograph, bone Scintigraphy, MRI spine.*





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### **Breaking news!**

**Session Chaired by Dr. Meeta Singh**  
**Reported by Dr. Parag Biniwale**



*This was an interesting session name for a session on controversial issue. It was ably chaired by Dr Meeta, Past President Indian menopause Society.*

*The session had following speakers*

- 1. Sonia Cerdes - Vit D -the controversy continues*
- 2. James Pickar- life beyond WHI - ethical reporting of data*
- 3. Margery Gass - effect on sexual function in older women discontinuing hormone therapy*

*Vitamin D has been in discussion for a long time with its beneficial effects. Dr Cerdes discussed it at length . She shared International menopause Scotty 2016 recommendations that 1000-1500 mg calcium should be prescribed to women who have increased risk of fracture. Routine supplements of calcium & vitamin D to low risk population is not justified. She dismissed all issued like kidney stones or cardiovascular disease due to calcium intake. She also stated that Vitamin D in right dose works well but high doses of vitamin D increases risk of falls & fractures.*

*Dr. Pickar's talk on ethical reporting of data was an eye opener. It enlightened audience on conflict of interest & disclaimers that are used to the benefit of person conducting a study or giving guidelines. He also stated that ethics is closely related to politics & it is an attempt to bring of collective desires of group bear upon individuals.*

*Dr. Gass discussed effect on sexual function in older women discontinuing hormone therapy. She pointed out that the outcomes of various studies are unreliable. Use of MHT is not related to women remaining sexually active except in women who have undergone hysterectomy & bilateral oophorectomy. After stopping MHT, 1 out of 5 women may experience decrease in some aspects of sexual function, other options must be discussed with them to mitigate negative effect. Women should be informed that most women are satisfied with their sex life and maintain their capacity of orgasm in spite of stopping MHT.*



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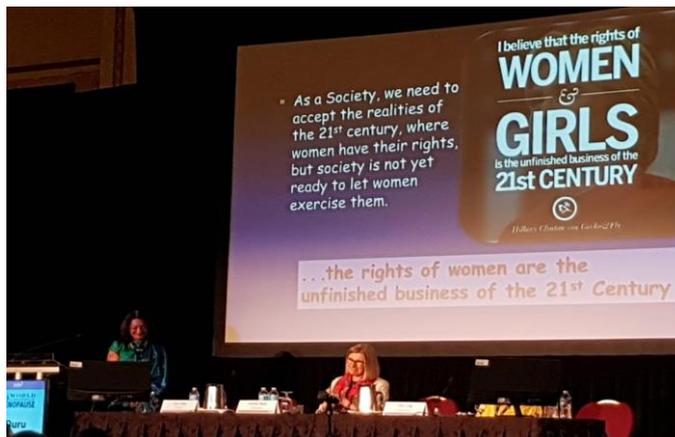
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### **Women's Rights in Asia and elsewhere: a fact or an illusion?**

**Talk by Dr. Duru Shah**

**Report By Dr. Bipasa Sen**

The talk highlighted the fact about women being most often treated inferior to men. They get less salary, work harder, denied many rights at workplace. 70% of ultra-poor population of the world are women. The picture is not different in India, China, South-East or Middle East Asia, Americans, Caribbeans. Many examples like burning in husband's pyres in India to foot binding in China - in spite of efforts of great reformers like Raja Rammohan Roy and others to abolish all those customs. Feminist movement started in 20th century- mainly focussed on Women's rights on their own body, how to dress, when to have baby etc. were discussed. A silver lining is that UN Agenda is Gender Equality by 2030.



### **Obesity: Lifestyle and dietary strategies – Talk by Dr. Sunila Khandelwal**

**Report by Dr. Sunila Khandelwal**

#### **Topic: Obesity: Lifestyle and dietary strategies**

Key message:

- As women face an inexorable increase in body weight (approx. 0.5 kg/year) in midlife and beyond, Menopause is an ideal opportunity to discuss a woman's risk profile, ensure risk perception, screen for weight gain/obesity and to develop long term preventative plan.
- Lifestyle factors, have a profound modifying effect on the epidemiology of adiposity-based lifestyle diseases (ABCD of midlife). Weight loss of only 5–10% is sufficient to improve many of the abnormalities associated with the insulin resistance syndrome.
- Promote cost-effective Educational programs: changes in lifestyle including an increase in physical activity and weight reduction through appropriate and healthy diets to maintain negative energy balance,
- Yoga, acupuncture and some traditional Chinese herbal medicines have been shown to aid weight loss in some studies.
- Obesity can be reduced through a step-wise weight loss program, guided by the information-motivation-behavioural skills model that identifies essential elements to reduce weight in menopausal age women.
- Shared decision is appropriate and group treatment is the most cost-effective treatment approach.



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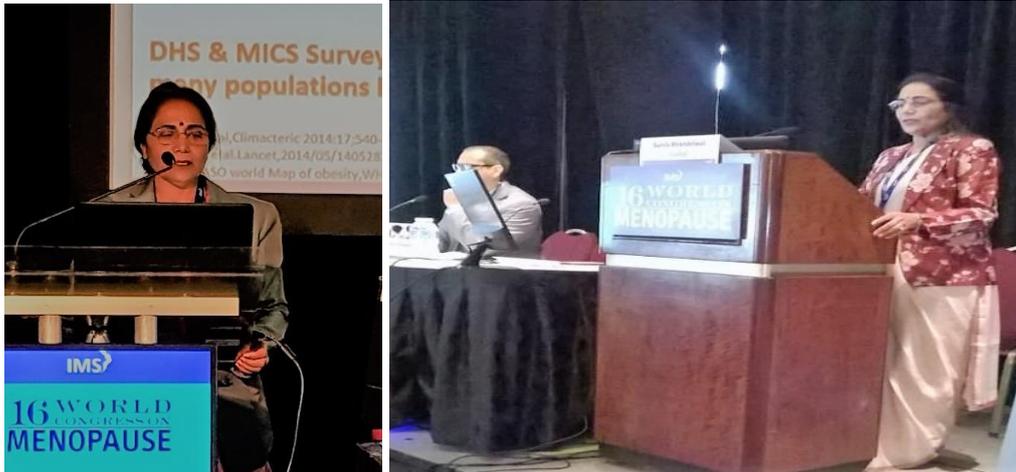
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### **Practical Management of Premature Ovarian Insufficiency**    **Talk by Dr. Duru Shah** **Report by Dr. Duru Shah**



Premature menopause also called as Primary Ovarian Insufficiency (POI) is defined as cessation of ovarian function, accompanied by raised basal levels of follicle stimulating hormone (FSH) and luteinising hormone (LH) along with decreased levels of estradiol (E2) before the age of 40 years. The condition can be both spontaneous and induced. Known iatrogenic factors include ovarian or pelvic surgery, chemotherapy/ radiotherapy. POF has widespread physical and psychological consequences due to long term effects of sex steroid deficiency. Women with POF are at risk of mood disorders, psychosexual dysfunction, osteoporosis, cardiovascular diseases, menopausal symptoms and infertility.

In women with premature menopause, systemic menopausal hormone therapy(MHT) is strongly recommended by the International Menopause Society(IMS) at least until the average age of natural menopause. MHT has the potential for improving the cardiovascular profile, preserving bone density and lowering the risk of dementia. Prophylactic oophorectomy should be avoided for women undergoing hysterectomy for uterine pathology with normal ovaries and all surgeries involving tubo-ovarian pathologies should be done meticulously preserving as much of ovarian tissue as possible.



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Preventive measures should also be undertaken in women undergoing chemotherapy or radiotherapy to preserve the ovarian Function. Recent advances in assisted reproductive technology (ART) like oocyte donation has helped many women of POF to get pregnant. Early detection in such conditions leads to early intervention, therefore, education and public awareness of the condition is a must for prevention and fertility preservation.



### **Papers Presented at 16<sup>th</sup> World Congress on Menopause**

a) **Dr. Maninder Ahuja, Faridabad** -Age of menopause and relationship to infertility and art





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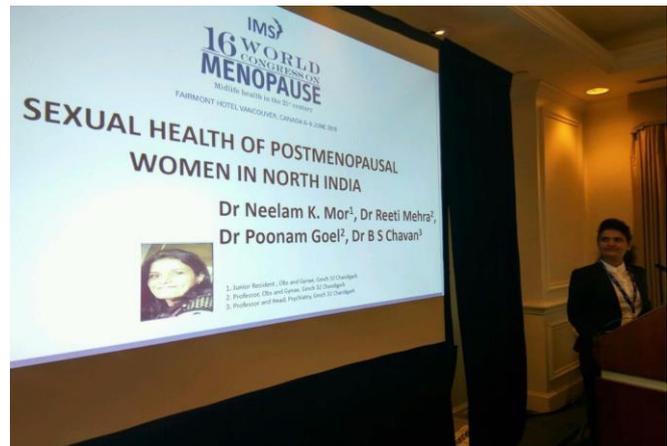
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**b) Dr. Neelam K. Mor , Chandigarh - Sexual Health of Postmenopausal Women in North India**



**c) Dr. Meena Desai, Mumbai -Osteoprotegerin (OPG) and Receptor activator of nuclear factor kappa b ligand (RANKL): implications in postmenopausal osteoporosis**

**d) Dr. Kalpita Shringarpure, Vadodara - Menopause and osteoporosis....A double whammy?? A cross-sectional study among peri-menopausal women in Vadodara, India**



**e) Dr. Vandana Singh, Telanagana - Validation of traditional formulation Durva Swarasa (Cynodondactylon Linn. Pers Juice) in Rajonivrittijanyavikritavastha (Menopausal syndrome) – A Reverse Pharmacology Approach.**



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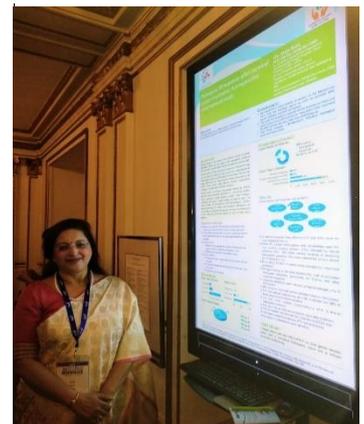
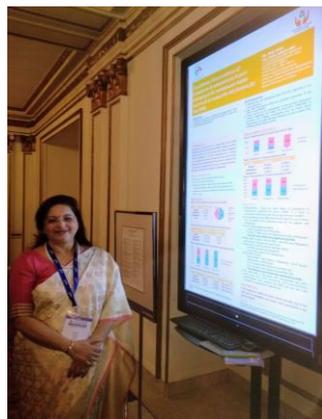
### Posters Presented at 16<sup>th</sup> World Congress n Menopause

**i. Dr. Ratnabali Chakravorty, Kolkata**

- 1) Knowledge, attitude, practice and behaviour of women attending gynaecological clinic towards cervical cancer and pap smear screening in eastern
- 2) India Cardiovascular risks among postmenopausal women: a community based case control study from west Bengal

**ii. Dr. Anju Soni, Jaipur**

- 1) OVERACTIVE BLADDER DYSFUNCTION
- 2) Prevalence of risk factors for low BMD in women
- 3) To assess effectiveness of MHT & percentage of symptom relief to cervical cancer cases



**iii. Dr. Rajendra Baxi, Vadodara**

*Menopause and its symptoms....A way of life; not the end of life. A cross-sectional study among peri-menopausal women in Vadodara*



**Menopause and its symptoms....A way of life; not the end of life. A cross-sectional study among peri-menopausal women in Vadodara.**  
Dr. Rajendra Baxi, Vadodara

**Objectives:** To estimate prevalence of menopausal symptoms among peri-menopausal women in Vadodara.

**Study Design:** Cross-sectional study.

**Study Population:** Peri-menopausal women aged 45-55 years.

**Inclusion/Exclusion Criteria:** Inclusion: Women aged 45-55 years, residing in Vadodara. Exclusion: Women with chronic diseases, on hormone therapy, or with cognitive impairment.

**Data Management:** Data was collected using a structured questionnaire. The questionnaire was pre-tested and validated.

**RESULTS:** The prevalence of menopausal symptoms among peri-menopausal women in Vadodara was 78.5%. The most common symptoms were hot flashes (85%), night sweats (75%), and mood swings (70%).

**CONCLUSIONS:** Menopause is a natural part of life, and its symptoms are common. It is important to recognize and manage these symptoms to improve the quality of life.

**RECOMMENDATION:** Health care providers should provide education and support to peri-menopausal women. Lifestyle modifications and hormone therapy can help manage symptoms.

**THANK YOU**  
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**iv. Dr. Hema Warriar, Palakkad**

*Ormeloxifene in the treatment of perimenopausal bleeding*



**v. Dr. Anjoo Agarwal, Lucknow**

- 1) Cross sectional Study of Bone Mineral Density in postmenopausal women of North India
- 2) Need for Vitamin D Supplementation in Menopausal Women in a tropical country

**vi. Dr. Alka Kumar, Nagpur**

- 1) Cervical Cancer :Early Detection and Preventability in India
- 2) The saga of missing strings at menopause



16th World Congress On Menopause  
8th - 9th June 2018 Hotel Fairmont Vancouver, Canada

Subject E- Poster presentation

Date: 7th June 2018

Time :11:30

Topic: The saga of missing strings at menopause

Objective :

Women in India are not fully educated on contraception usage and what they are putting in their body. Data collected from 2005 - 2008 indicate that only 15.6% of women were informed of all the options and what are effects and reactions in utero body. Patients with abnormal postmenopausal bleeding, foul discharge per vagina and chronic pelvic pain are commonly reported in our patients department of gynaecology.

Presenting case reports of a retrospective study of forgotten IUCD's in four cases of peri and post menopausal age presenting with different symptoms .

Methods: A retrospective study of 4 cases of menopausal age who presented with retained IUCD's for a decade with different symptoms were investigated and managed accordingly.

All four cases were subjected to the Speculum examination :  
X-ray Pelvis, CT Scan and ultrasonography was done.

Managed according to symptoms and sign. Two patients underwent Hysterectomy.

In other two CUT was removed under short general anaesthesia.

Conclusion: It is essential to ascertain that women who had IUD inserted at one time or other to be evaluated for device.

After menopause complete examination and USG to be done to rule out any forgotten IUCD. When contraception is no longer needed it is prudent to remove IUCD before menopause.

Before inserting device women should be shown the device and briefed about it. Regular examination should be advised.

Key Words : Intrauterine Devices, Menopause, Pyrometers

16th World Congress On Menopause  
8th - 9th June 2018 Hotel Fairmont Vancouver, Canada

Subject E- Poster presentation

Date: 6th June 2018

Time :13:50

Topic: Early Detection and Cancer Cervix Preventability in India

Objective

OBJECTIVE: The aim of our study modality was to educate the asymptomatic women so that they approach voluntarily for screening of cervical cancer, based on a well drafted model

Which included Educate, Screening, Visualize, Treat, Immunization and counselling.

Methods: The study was based on educative program. Social organization and activist working for well being of women , offices where working women was 30 to 100 , teachers of girls school and colleges were contacted personally by IMS Nagpur Chapter to arrange for educative programmes.

Publicity was through local newspapers. Distribution of handballs and pamphlets and power point presentations were made of education.

Total 159 public forums were conducted . Annually :39.75. Followed by screening camps on same day or next day. Selection of cases was done on basis of age , parity , chronic symptoms of discharge and other factors. Exclusion of women below 21 and above 65 years.

Written consent taken , screening test Pap Test was carried out. Sent for cytological Reading.

Abnormal cytological reports were called for colposcopy and visual inspection.

Geographical Area : Central India, Nagpur

Conclusion: Prevention of cervical cancer is a public health problem. It should be organized on educate

cytology based screening and treat modality. Education programme prior to screening combined with screening and immunization with participation of women groups and civil society can substantially reduce the burden of cancer cervix.

Key words : cervical cancer, Public forums, Educate.





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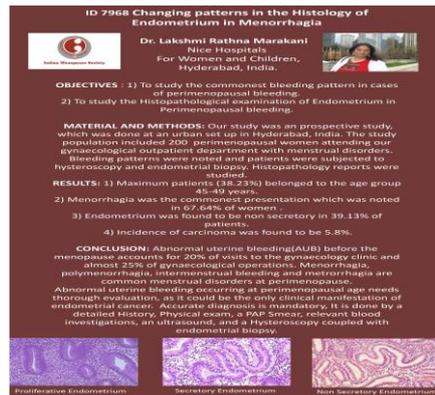
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**vii. Dr. Lakshmi R. Markani, Hyderabad**

*Changing patterns in the histology of endometrium in menorrhagia*



**viii. Dr. Meeta, Hyderabad**

- 1) Long Term Sequelae Of Genitourinary Syndrome -An Underrated Entity
- 2) Impact Of Ovarian Endometrioma On The Age Of Menopause

**ix. Dr. Lalita S Savardekar, Mumbai**

*Bone Health of Women belonging to low income strata in Mumbai: A community based Clinic study*

**x. Dr. Atul Munshi, Ahmedabad- Andropause – A Myth or A Reality !!?**



**xi. Dr. Jignesh Shah, Ahmedabad-Surgical menopause**





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- xii. **Dr. K. D. Sandhya Rani, Hyderabad-** Identification of a hormone marker for menopause among perimenopausal women



- xiii. **Dr. Bipasa Sen, Kolkata-** Utility of Health Camps – Chance Detection of medical disorders in 40plus Women





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## **Travellers Eye ..... Exploring the Rockies**

**By Dr. Lakshmi R. Markani**



Bonjour,

*Hello everybody, today i want to share with you about my exotic experience to the Rockies of Canada. I and my son planned a short trip to the Rockies to explore the nature's secret trails and extraordinary peaks prior to attending world congress on menopause.*

*We started our journey from Hyderabad on 31st afternoon by Air India to Mumbai. After reaching Mumbai airport we met with other members of the group. We were awestruck to witness that 95% off the flight which we boarded from Mumbai to Toronto was filled with Indians. However our flight was delayed by 1:30 hour, and which made us worry about our connecting flight from Toronto to Calgary which was at 7:05 AM but as a group we were standing together and we were comfortable. We reached Toronto by 7:00 AM, but the Airline agent had already kept our boarding passes ready for the next flight which was 2 hours from that time, so it was comfortable and we really thank air Canada for that.*





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#### **June 1st:**

*On reaching Calgary, we were greeted warmly by rest of the group who arrived from Delhi. We were led into the Galva car Coach by Mr. Kelly who was an elderly enthusiastic Canadian tourist driver.*

*On the way we had our lunch at an Indian restaurant called Five Rivers hotel to refresh our taste buds with a well spread buffet of our choice after such a long flight. After filling our tummies sumptuously we proceeded to Banff national Park which was one of the oldest and well preserved national park in the world.*

*On our way to the Banff town where we would be staying for the next two nights, we got a glimpse of the bow river(which is very long) which travelled along with us all the way parallel. We were surrounded by Rockies and in fact it looked as if they were circling us. On the way we also got to visit some of the beautiful lakes on our 4 Hour trip. We enjoyed the journey a lot by admiring the Rockies, Conifers and few lakes which we had stopped by to take pictures like lake Minnewanka. When we reached Banff we checked in to Canasta Lodge which was a Cabin made out of huge wooden logs. It was a cozy little hotel with all the basic luxuries to set in. After arriving we took some time to unwind ourselves from the jet lag.*

*In the evening we went to The Old Spaghetti Factory for dinner. To our surprise the sunset time in Banff was around 10:30 pm and we were wondering why the shops were closing so soon even in daylight . After our dinner we came back to the hotel where all the members of the group came together to sing a birthday day song to my son which was a very lovely gesture.*

*Later that night we slept off early to wake up fresh.*

#### **June 2nd:**

*After having a good breakfast we started to Banff Gondola and on our way we visited Cave and basin which was the starting point of the Banff national park where it originated and we saw the surprise turning view point. Next we visited the Bow river falls which even though were not high but wide enough and full of force. We carried on to Banff gondola which was a 5 minute ride. After reaching the destination by gondola we went to the visitors centre where we read about the different fauna and flora of the mountain valleys. There was a 2 km walk by the wooden bridge to the summit of an adjacent cliff where it ended at a weather station. Back to the visitors centre they arranged a cute fireplace overlooking at the massive mountains from the viewpoint.*

*After that we came down and started to the famous lake Louise which was vibrant and turquoise in colour. It was formed from the Victoria glacier, here we couldn't contain ourselves and went straight down to renting a canoe along with my son and Dr. Sushma Chawla where we became a part of the scenic beauty. After that we headed back to the town to Bamboo garden which was a authentic Chinese restaurant for lunch. After our meal we went on a short stroll to find some good souvenirs.*



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#### **June 3rd:**

After checking out from Canalta lodge we started on our journey to Jasper which was around 300 km and on the way we had to stop by the Columbian ice field but because of some technical issues our visit to ice field was postponed to the next day. Today we met our new Indian tourist driver and guide Amit who would be taking care of us till the end of the trip. He showed us some of the scenic lakes( Johnson and Herbert) on the way to jasper and we got to see few Mountain goats near the skywalk which we would be going to tomorrow. On reaching the small cosy tourist town Jasper, we went to visit Lake Patricia and Lake Pyramid after which we checked into Lobstick Lodge. I must recommend you guys to visit the hot tub Jacuzzi there because you would have such a lovely view of the Rockies and be surrounded by the conifers relaxing in your small warm pool. Later we went to have our dinner at the Jasper Indian Curry place which had a mouth watering spread of desi cuisine. After such a long journey, we just dozed off as soon as we reached hotel.





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Lobsticks means a type of conifer tree which had its branches cut off except the top ones which were used as a sign to follow trails in the dense conifer forests



#### **June 4th:**

Today we had to start early than usual because we had to make it to the Columbian Ice fields by 10:00 AM as we had missed it already yesterday. On reaching Columbian ice fields we took a short break for rest rooms and boarded the first bus which would take us to the point where we would be getting on the huge god-like Ice Explorer bus which were specially made to travel on glaciers. There were only 24 of them in the world and 22 of them were in this Columbian ice field. They had a top speed of 18 kmph and were capable of climbing on insane steep.



On reaching the Athabasca Glacier which was few hundreds of metres thick and stretched on for kilometres, we were left on a small area of glacier which was safe as after which we were not allowed to go because it was dangerous with many furrows and holes in which we could be trapped. We got a chance to experience the finest glacier which would not stop providing us with supply of fresh water. As our tour guide had advised us to take an empty bottle to collect the fresh glacier water we got to taste the most purest water that we could ever have.

After the glacier we were taken back to the first point where another human scale bus would take us to a viewpoint area called skywalk, here we were given an handset which was pre-recorded with all the



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information describing the Sunwapta valley created by the glacier water forming the Sunwapta river. It also described about the various forms of wildlife in that region and the brugges fossil site where the scientist found some of the most well preserved fossils in the world. It continued to take us on a glass skywalk which was 200 meters above the valley giving an amazing view of the valley and river with many waterfalls and amazing greenery. As we were returning from the sky walk it suddenly started snowing and it gradually increased blurring out our vision making it hard to see, with in seconds the whole climate of the place changed. The only thing i could see was the clear hexagonal mystical snow crystal slowly settling on my trench coat.



After the snow settled we went back to the ice field office and boarded our bus to Jasper. We were told by the Ice field guides that the route from the ice fields to jasper was named as the most beautiful highway by the National geography and it truly justifies.

As we were on our way we got to meet our friends again the mountain goats which were coming towards the roads in this particular season of summer in search of wild berries.

The road was laid along with the river turning all along its course and in the background the Rockies slowly fading away into the clouds, such a magnificent view.

After reaching the jasper town we had our lunch at the open park with some fresh pizza and got ready for our journey to Kamloops. It was a long journey but we got to see the real Canada apart from the Rockies and urban cities, we were travelling the countryside. We crossed farms filled with cows grazing



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## Indian Menopause Society

### 1<sup>st</sup> International Newsletter

**June 2018**

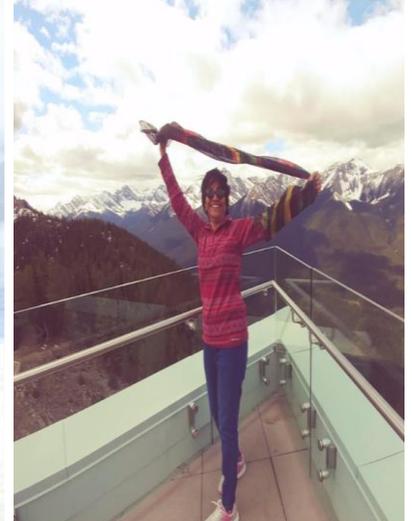
**Theme 2018: Menopause ....A New Mindset!**

Slogan: **Fit @ Forty, Strong @ Sixty & Independent @ Eighty**

on fresh green lands and we witnessed an amazing view of a double rainbow which were shaped like a complete bow. Canada was blessed with such scenic nature.

On reaching Kamloops we went to have our dinner at the Kohinoor Indian restaurant which served a delicious spread of buffet.

After such a long day we headed straight to Holiday Inn suites Kamloops to take rest for the day.



#### **June 5th:**

In the morning we checked out from the hotel early and started to Whistler, but unfortunately the regular route from Kamloops to Whistler which was around 4 hours travel was closed due to some mud slide and we had to take a longer route all the way around Vancouver and going by the sea to sky highway to reach the tourist town of Whistler. On the way we stopped at Shannon Falls which was amazing to visit. It was a more like a well preserved park with some mind blowing waterfalls and trees which were older than 100 years.

After the Shannon falls we started to Whistler which was only 40 minutes from there. On reaching Whistler we went straight to Peak to Peak Gondola which was world famous for the longest support less gondola.

Whistler was the town where 2010 winter Olympics were held, it was located in between the Blackcomb and Whistler mountains. During summer it was filled with energetic mountain bikers and during winter it was filled with adrenaline junky skiers.



**Dr. Ratnabali Chakravorty**  
President IMS India, 2018-19

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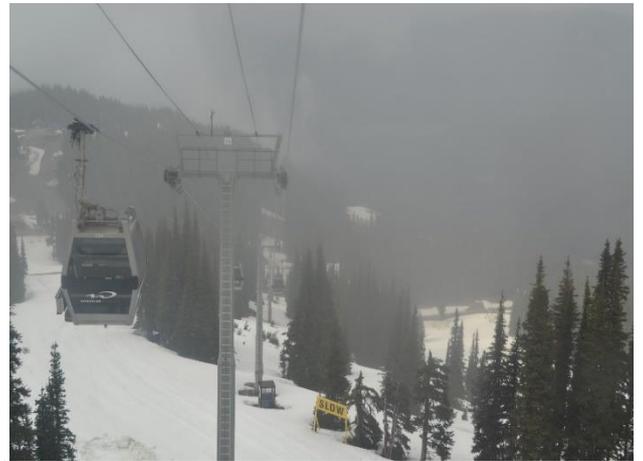
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We got down from our bus and headed to the first gondola which would take us on to the peak of Whistler Mountain. I must appreciate the people who worked hard in designing the means of transport and maintain the support at this altitude. There were numerous lines of cable carts from the town to different peaks around. On the way to the peak of Whistler Mountain we saw the bikers riding at heart pounding speeds below us. As we moved higher the mountain was slowly covered with snow and as we reached the peak it was completely white with powerful winds and the crew on top were discussing what a sunny day it was for them



There was a rest point on top with a souvenir store, washrooms, coffee shops and a monument of Olympics 2010 erected on the mountain. Then we moved on to board the longest support less gondola connecting the peaks of Whistler and Blackcomb Mountain on a glass bottom cart which had a capacity of upto 12 people.



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*As the gondola started we saw the view of two peaks hundreds of metres above the ground travelling a top of conifers, snow and the river passing between these two mountains.*



*The view was breath-taking and cannot be explained by words. On reaching the black comb mountain we had some time to take pictures and experience the snow covered mountain top of black comb after which we came back to the whistler town and checked in to Westin Hotels.*

*We took time to relax and enjoy the beautiful weather of whistler by the side of fireplace and enjoyed the view of gondolas passing by from the balcony.*

#### **June 6th:**

*In the morning we took a leisure walk to the town of whistler and returned back to check out and started towards Vancouver on the same sea to sky highway.*



*On reaching Vancouver we directly went to the Fly over Canada show which was truly a must visit if you are going to Vancouver. It was an 7D movie experience showcasing the spectacular sights of the coasts of Canada to its deep countryside.*

*Later we carried on to Capillano suspension bridge which was a marvel to stand the test of time, the park was also decorated with totem poles depicting the culture of Red Indian tribes residing in the region at that time.*



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After Capillano suspension bridge we checked into Holiday Inn suites at Howe street, we got ready and went to the Inaugural Ceremony of International Menopause Society at Fairmont hotel.



After the cocktail meet we moved to Salaam Bombay Restaurant for the Indian Night where we had arranged an august gathering for presidents of various affiliated societies of menopause.

#### **June 7th:**

After the conference everyone gathered at the Fairmont Hotel to go for lunch at the Dosa Factory which was quite a surprise cuisine for our fellow travellers. After enjoying the meal we met our city guide who would be taking us for a complete tour of Vancouver, As we began, we went to Elizabeth garden where there were hundreds of different greens and variety of florals.



The guide showed us a peculiar type of tree with its branches curved in the shape of a monkey's tail. Funny tree. Then we got to see the statue of 4, where the statue of a person clicking the picture of two women and a man who was getting fresh at the view point grazing at Grouse Mountain.



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Moving from the Elizabeth garden we went to the Stanley park which was a well preserved 1000 acres of forest right in the urban area of Vancouver. It was home to some the endemic species and it also has its trails for cyclists to explore. The guide made the first stop at the viewpoint of totem poles and harbour where we saw yellow heaps of sulphur after which he showed us an 800 year old tree.

We made our second stop at the viewpoint at Lions Gate Bridge where we had the view of outer harbour and inner harbour along with the majestic bridge.



Then we moved onto see the statue of a girl in swimsuit over a rock by the shore, also we saw the statue of an artist who portrayed himself in 12 laughing postures and the statue of engagement rings. On the way we also got to cover the beaches of stanley park which would be crowded on sunny days. As we moved on we went to the gas town where we saw the famous steam clock the icon of vancouver describing the history of how vancouver was founded by early merchant ships. Completing the city tour we went on to have an early dinner at Himalaya Indian restaurant and returned to our hotel to call it a day.



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**June 8th:** Early in the morning at around 7.30 AM all the 34, members and faculty representing Indian menopause society attended the Indian session at Fairmont Hotel.

After finishing the conference and having our packed lunch we were ready to unleash the shopaholics in us at the McArthurGlen Designer Outlet mall.

After a long shopping spree emptying our pockets we came back to our hotel with hearts filled with memories. As we bid farewell to our dear friends who were going to leave at different hours the next day we all sure learnt a lot and cherished all the time we spent together travelling by the Rockies.



**June 9th:**

With heavy heart as we say goodbye to Canada after experiencing the wonders of nature for which we all are surely blessed, we started our long journey back home.

En route India



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*Everyone is welcome to visit us if you are travelling to Hyderabad anytime.*

*We Thank you and wish everyone a safe travel and good health.*

*Adieu.*





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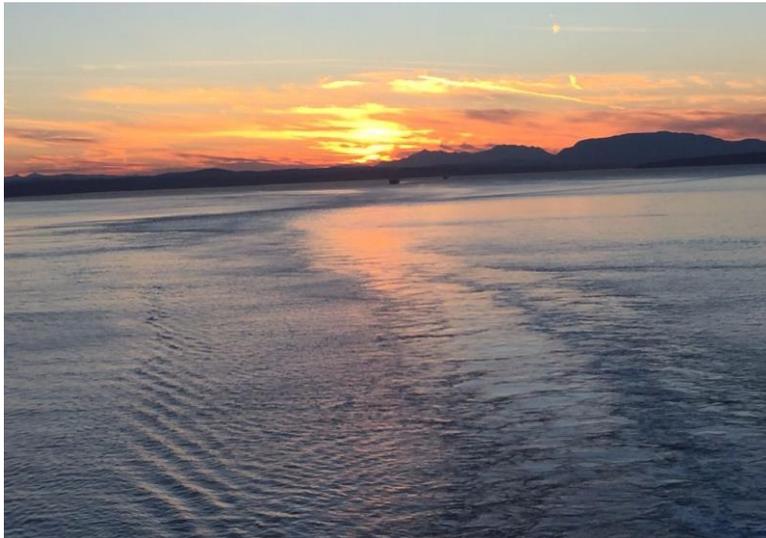
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#### Team 2018-19



**Dr. Ratnabali Chakravorty**  
President  
IMS 2018-19



**Dr. Yashodhara Pradeep**  
Vice President  
IMS 2018-19



**Dr. Pushpa Sethi**  
Secretary General  
IMS 2018-19



**Dr. Bipasa Sen**  
Joint Secretary  
IMS 2018-19



**Dr. R. N. Goel**  
Treasurer  
IMS 2017-20



**Dr. Mrutyunjay Mohapatra**  
Jt. Treasurer  
IMS 2018-19

Indian Menopause Society  
[indianmenopausesociety@gmail.com](mailto:indianmenopausesociety@gmail.com) , [www.indianmenopausesociety.org](http://www.indianmenopausesociety.org) ,  
[www.jmidlifehealth.org](http://www.jmidlifehealth.org)

The International Menopause Society is the pre-eminent international organisation working to improve care in women in midlife and during the menopause. The IMS annual conference took place in Vancouver, Canada, from 6-9 June 2018, <http://www.imsvancouver2018.com/>.

For membership information, please visit: <http://www.imsociety.org>

Lee Tomkins, IMS Executive Director

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