

P299. The role of combined hormonal therapy in the correction of cognitive disturbances in women in menopause

S A Gasparyan (RU) [1], S M Karpov (RU) [2], L D Drosova (RU) [3], A A Khripunova (RU) [4]

Context. The positive impact of hormone therapy on the cognitive function of women in menopause is being discussed, but the data are discordant.

Objective. The evaluation of the effect of combined hormone therapy on cognitive function and the quality of life of women in menopause in comparison with monotherapy with estradiol and patients not receiving hormone therapy.

Patients. The 1-st group included 20 patients receiving 0.06% transdermal gel 17- β estradiol and 200 mg micronized progesterone. The 2-nd group included 20 women receiving 1 mg of 17- β estradiol and 2 mg of drospirone. The 3-rd group includes 20 patients receiving 0.06% transdermal 17- β estradiol monotherapy. The 4-th group includes 20 patients who do not receive menopausal hormone therapy.

Methods. The following evaluation methods were used: the dynamics of the Kupperman index, the MoCA test, the Beck depression scale and the SF-36 life quality scale. The criteria were evaluated on the 90th and 180th day of follow-up.

Result. The decrease in the severity of the climacteric syndrome (the Kupperman index) compared with baseline data was achieved in all groups except the 4-th. When comparing the quality of life indicators in the patients of the 1-st, 2-nd and 3-rd groups on the 90th day of the study, positive dynamics were established in comparison with the initial data for all scales of the SF-36 questionnaire. In the 4-th group there was some negative dynamics, especially in the RF, RE and MH scales. Similar changes in the Bek test were observed on the 90th day of the study: the patients of the 1-st and 2-nd groups with mild depression went to the category of persons without depression, and the severity of moderate depression decreased to an easy degree. In the 4-th group, women from mild depression went into mild depression, and in the third group, with an initial assessment of the Bek test of 10-12 points, there was a tendency to increase the severity of depression to 12-15 points. The parameters of the MoCA test in the dynamics of the patients of the 1-st and 2-nd groups had a significant tendency to improve to 26-29 points. In the 3-rd group, there was a slight improvement in cognitive function within 1 point. Women of the fourth group had a negative dynamics of the MoCA test.

Conclusions. The use of low-dose combined hormonal drugs contributes to the effective recovery of cognitive functions in postmenopausal women compared with standard treatment regimens or monotherapy and estrogens.