

## Cardiovascular risk and postmenopausal hormone therapy

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In women cardiovascular disease (CVD) accounts more than half of all deaths in western countries. Increasing evidence indicate that cardiovascular effects of postmenopausal hormone therapy (HT) are affected by age and/or time since menopause at the initiation of HT ("Timing effect"). Furthermore, little is known about the cardiovascular safety of HT discontinuation.

Most recent data indicate that the use of HT is accompanied with reductions in CVD if initiated soon after menopause. We have shown that the earlier the HT had been started, the smaller was the cardiac mortality risk. Thus, our findings support the "timing hypothesis". In combination with estradiol the different progestins appeared to possess a rather similar "timing effect" in CVD death risk.

In a separate cohort we evaluated the mortality risk in women who discontinued HT. Within the first follow-up year, the risk of cardiac death was elevated, and particularly in women who discontinued HT at <60 years of age.

In conclusion, we have shown that HT is associated with reduced cardiovascular mortality, particularly in women initiating HT close to the menopause. Furthermore, in the first post-treatment year the discontinuation of HT use was accompanied with elevations in the risk for cardiac death. Thus, our findings question the safety of HT pause/discontinuation practice in recently menopausal woman to evaluate whether they could manage without HT.

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