

POSTTEST QUESTIONS

1. According to STRAW nomenclature, late perimenopause is described as a stage when:

- a. Changes in menstrual cycle length are greater than 7 days
- b. Menstrual flow is reduced, with changes in cycle length greater than 10 days
- c. Two or more menstrual cycles are skipped
- d. Two or more menstrual cycles are skipped and there is at least 1 period of amenorrhea exceeding 60 days
- e. b and c

2. Which of the following statements is incorrect regarding vasomotor symptoms?

- a. Vasomotor symptoms are less prevalent during the late perimenopausal stage
- b. Postmenopausal women who experience hot flashes have smaller thermoneutral zones compared with those who do not experience them
- c. The average hot flash lasts from 1 to 5 minutes
- d. Vasomotor symptoms are due to an exaggerated activation of heat dissipation mechanisms such as peripheral vasodilation and perspiration

3. Based on evidence from the SWAN study, choose the correct descending order for risk of developing hot flashes.

- a. African American > Hispanic > Caucasian > Japanese
- b. African American > Caucasian > Hispanic > Japanese
- c. Hispanic > Japanese > Caucasian > African American
- d. Caucasian > Japanese > Hispanic > African American
- e. None of the above

4. Which of these factors relate(s) to hot flash occurrence?

- a. Cold temperature
- b. BMI greater than 27
- c. Cycling and swimming
- d. Eating soy products
- e. All of the above

5. According to the WHI study, the cumulative hazard for CHD risk in the use of estrogen therapy is age dependent. Which of the following statements is/are true?

- a. Conjugated equine estrogen administered to women 50 to 59 years of age lowered the CHD risk at baseline
- b. Conjugated equine estrogen administered to women 60 to 69 years of age lowered the CHD risk at baseline
- c. Conjugated equine estrogen administered to women 70 to 79 years of age lowered the CHD risk at baseline
- d. a and b
- e. b and c

6. Transdermal hormone therapy may have particular advantages for women:

- a. With elevated triglycerides
- b. With type 2 diabetes
- c. Who smoke
- d. Who prefer nondaily therapy
- e. All of the above

7. Transdermal hormone therapy differs from oral formulations in the following aspects.

- a. Transdermal formulations avoid first-pass liver metabolism
- b. Transdermal formulations use higher doses than oral formulations
- c. Transdermal formulations cause increased thromboembolism compared with oral formulations
- d. Transdermal formulations provide more stable circulating levels of hormone
- e. All of the above

8. Among the nonhormonal neuroactive therapies, which of the following drugs offers the most effective relief for vasomotor symptoms?

- a. Venlafaxine
- b. Gabapentin
- c. Clonidine
- d. Methyldopa
- e. Bellergal

9. Which of the following statements is/are true with regard to the use of venlafaxine in the treatment of menopausal vasomotor symptoms?

- a. Although venlafaxine can decrease the frequency of hot flashes in menopausal women, the efficacy is below that observed with estrogen therapy
- b. The most common adverse effects include nausea, insomnia, dry mouth, loss of appetite, and constipation
- c. Treatment with venlafaxine may cause sexual dysfunction
- d. All of the above

10. Select the alternative treatment approach known to reduce vasomotor symptoms.

- a. Paced respiration
- b. Cooling body temperature
- c. Moderate exercise
- d. Relaxing activities
- e. All of the above

REGISTRATION AND EVALUATION FORM

Vasomotor Symptoms:

Managing the transition from perimenopause to postmenopause

I certify that I have completed this educational activity and posttest and claim (please check one): Physician credit hours Nurse contact hours

SIGNATURE

Please print clearly

FIRST NAME, MI

LAST NAME, DEGREE

TITLE

AFFILIATION

SPECIALTY

MAILING ADDRESS

CITY

STATE

ZIP

DAYTIME TELEPHONE

FAX

EMAIL

Physician: This activity is designated for a maximum of 1.5 AMA PRA Category 1 Credits™.

Nurse: This activity is approved for 1.5 nursing contact hours.

Release Date: October 1, 2008

Expiration Date: September 30, 2009

To receive a statement of credit, please complete the posttest and evaluation form and mail or fax them to:

The Chatham Institute
 Program T8X13-MG
 26 Main Street, Suite 350
 Chatham, NJ 07928-2402

Fax: (800) 239-2984

Please allow 6 to 8 weeks for processing.

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EXAMINATION: Place an X on the box under the letter that represents the best answer to each question on the previous page. There is only ONE correct answer per question. Place all answers on this form:

	A	B	C	D	E
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PROGRAM EVALUATION: So that we may assess the value of this self-study program, we ask that you please fill out this evaluation form.

Have the objectives for the activity been met?

1. Recognize menopause-related vasomotor symptoms to establish the clinical stages of menopausal transition YES NO
2. Discuss the underlying physiology of climacteric symptoms YES NO
3. Outline the various treatment options that are available for women with vasomotor symptoms and the risks/benefits associated with each YES NO
4. Evaluate the evidence-based data on hormone therapy and formulate a patient-specific treatment plan for menopausal vasomotor symptoms YES NO
5. Counsel women and their partners on the risks/benefits of alternative therapies to treat menopausal vasomotor symptoms YES NO

Was this publication fair, balanced, and free of commercial bias? YES NO

IF NO, PLEASE EXPLAIN:

1. How often do you currently use each of the following patient care strategies for your patients with vasomotor symptoms? (Scale: 1=Never, 2=Not very often, 3=Sometimes, 4=Very often, and 5=Always)

- a. Conduct a risk/benefit analysis before instituting an appropriate therapy **1 2 3 4 5**
- b. Individualize treatment plans specific to the needs and risk profile of each patient **1 2 3 4 5**
- c. Counsel patients on the available treatment options, including nonpharmacologic options, to ensure they make an informed decision **1 2 3 4 5**
- d. Follow up with patients periodically for symptom control, compliance, and side effects **1 2 3 4 5**

2. Based on your participation in this CE/CME activity, how often do you now plan to use each of the following patient care strategies for your patients with vasomotor symptoms? (Scale: 1=Never, 2=Not very often, 3=Sometimes, 4=Very often, and 5=Always)

- a. Conduct a risk/benefit analysis before instituting an appropriate therapy **1 2 3 4 5**
- b. Individualize treatment plans specific to the needs and risk profile of each patient **1 2 3 4 5**
- c. Counsel patients on the available treatment options, including nonpharmacologic options, to ensure they make an informed decision **1 2 3 4 5**
- d. Follow up with patients periodically for symptom control, compliance, and side effects **1 2 3 4 5**

Effectiveness of this method of presentation: POOR FAIR GOOD VERY GOOD EXCELLENT

What other topics would you like to see addressed?

Comments