

The Role of Hormone Therapy in the Management of Menopause

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1. Based on our current understanding of the physiology of hot flushes, the first event in the cascade appears to be:
 - A. Increase in core temperature
 - B. Hypothalamic activation
 - C. Reduction in metabolic rate
 - D. Luteinizing hormone (LH) surge
 - E. Vasodilation

2. A Cochrane review of double-blind, randomized, placebo-controlled trials of oral hormone therapy for vasomotor symptoms concluded that hot flush frequency was reduced by approximately:
- A. 30%
 - B. 45%
 - C. 60%
 - D. 75%
 - E. 90%
3. Based on double-blind, randomized trials, which of the following strategies improves the effectiveness of oral low-dose estrogen in reducing the frequency and severity of hot flushes?
- A. Addition of medroxyprogesterone acetate
 - B. Alternating low-dose and standard-dose therapy on alternate days
 - C. Addition of vaginal estrogen cream
 - D. Splitting the dose into twice-daily administration
 - E. Taking the medication at bedtime
4. For a patient with hot flushes who is not a candidate for hormonal treatment, which of the following has been shown to be of greater efficacy than placebo?
- A. Acupuncture
 - B. Black cohosh
 - C. Phytoestrogens
 - D. Vitamin E
 - E. Paroxetine
5. Based on cost-effectiveness analysis, pharmacologic treatment is recommended if the 10-year risk for a major osteoporotic fracture exceeds:
- A. 3%
 - B. 5%
 - C. 10%
 - D. 15%
 - E. 20%

6. Following several years of hormone therapy, a patient discontinues her treatment. Five years after this discontinuation, it would be anticipated that her bone mineral density would be:
- A. Comparable to that which she had at the discontinuation of therapy
 - B. Significantly greater than those who have never used hormone therapy, although less than at the end of therapy
 - C. Slightly greater than those who have never used hormone therapy
 - D. The same as those who have never used hormone therapy
 - E. Lower than those who have never used hormone therapy
7. Which of the following osteoporosis therapies is an anabolic agent?
- A. Estrogen plus progesterone
 - B. Selective estrogen receptor modulators (eg, raloxifene)
 - C. Parathyroid hormone
 - D. Monthly bisphosphonates (eg, risedronate)
 - E. Estrogen plus calcium supplementation
8. The most likely explanation for the difference between observational studies that showed a 50% reduction in coronary heart disease in women using estrogen and the Women's Health Initiative (WHI) is:
- A. Larger size of WHI
 - B. Lack of adequate controls in observational studies
 - C. Better definition of outcomes in the WHI
 - D. Healthy user bias in observational studies
 - E. Younger age of women in WHI
9. Cognitive improvements of women on hormone therapy are most likely due to:
- A. Selection bias within the study
 - B. Increased cerebral blood flow
 - C. Improved sleep
 - D. Reduced plaque formation
 - E. Increased blood glucose

10. Based on current recommendations, the need for continued hormone therapy should be reassessed at least every:

- A. 6 months
- B. 12 months
- C. 24 months
- D. 5 years
- E. 10 years

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