

Prolonged use of hormone therapy may minimize muscle loss associated with aging

February 12 2020



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Skeletal muscle mass and strength are critical in helping prevent falls, fractures, and disability. Yet, they continue to decline during the menopause transition. A new study showed that the prolonged use



(defined as \geq 13 mo) of hormone therapy (HT) was associated with higher muscle mass and less chance of sarcopenia. Study results are published online today in *Menopause*, the journal of The North American Menopause Society (NAMS).

Sarcopenia is defined as a loss of <u>skeletal muscle mass</u> and strength that mostly affects older people. In addition to increasing the risk of falls and fractures, it can also increase the risk of diabetes and cardiovascular disease. Although sarcopenia is highly prevalent in postmenopausal women, there is no definitive evidence supporting its link with the decline in estrogen during the menopause transition. Multiple small-scale studies have been conducted to assess the association between HT use and <u>muscle</u> mass, but their results have been inconsistent.

This new study, which included more than 4,200 postmenopausal women, is one of the few large-scale studies known to assess the link between use of HT and muscle loss in postmenopausal women. More specifically, it focused on the duration of HT use and its effect on muscle mass and the prevalence of sarcopenia.

On the basis of study results, which appear in the article "The association between <u>hormone therapy</u> and sarcopenia in postmenopausal women: the Korea National Health and Nutrition Examination Survey, 2008-2011," the researchers concluded that prolonged use of HT is associated with higher muscle mass and a lower prevalence of sarcopenia in <u>postmenopausal women</u>.

"Although not all studies examining an association between hormone therapy and muscle mass have shown positive results, this large crosssectional study demonstrated a relationship between extended use of hormone therapy and both greater muscle mass and lower risk of <u>sarcopenia</u> in women aged younger than 65 years and with a body mass index less than 25 kg/m2," says Dr. Stephanie Faubion, NAMS medical



director. "The mechanism by which estrogen protects <u>muscle mass</u> remains unclear, and additional study is needed."

More information: *Menopause* 2020. <u>DOI:</u> <u>10.1097/GME.00000000001509</u>

Provided by The North American Menopause Society

Citation: Prolonged use of hormone therapy may minimize muscle loss associated with aging (2020, February 12) retrieved 25 April 2024 from https://medicalxpress.com/news/2020-02-prolonged-hormone-therapy-minimize-muscle.html

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