

Bilateral oophorectomy before menopause linked to MCI

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(HealthDay)—Women who undergo bilateral oophorectomy before

menopause have increased odds of mild cognitive impairment (MCI) and poorer cognitive performance about 30 years later, according to a study published online Nov. 11 in *JAMA Network Open*.

Walter A. Rocca, M.D., M.P.H., from the Mayo Clinic in Rochester, Minnesota, and colleagues conducted a case-control study and cross-sectional study among 2,732 [women](#) aged 50 to 89 years to examine the risk for MCI associated with premenopausal [bilateral oophorectomy](#).

The case-control study included 283 women with MCI and 2,449 without cognitive impairment. The researchers found that compared with no bilateral oophorectomy, bilateral oophorectomy before menopause and before age 46 years correlated with clinically diagnosed MCI (adjusted odds ratio, 2.21). Variation was noted in the presence of an association by surgical indication; for 259 women with bilateral oophorectomy before menopause and before age 50 years, there was an association observed for the indication of benign ovarian condition (adjusted odds ratio, 2.43), but not for cancer or no ovarian condition. The cross-sectional [study](#) included 625 women with a history of bilateral oophorectomy and 2,107 without. Overall, 161 women underwent premenopausal bilateral oophorectomy before age 46 years, which was associated with a decreased global cognition score, attention and executive domain z score, and Short Test of Mental Status score performed at a median 30 years later.

"This finding suggests that physicians treating women with premenopausal bilateral oophorectomy need to be aware of their patients' risk of [cognitive impairment](#) or MCI and should consider implementing treatment-monitoring plans," the authors write.

One author disclosed financial ties to Biogen and Brain Protection.

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