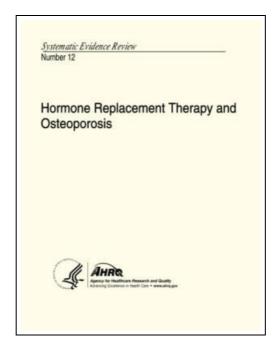
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HORMONE REPLACEMENT THERAPY AND OSTEOPOROSIS: SYSTEMATIC EVIDENCE REVIEW NUMBER 12



Createspace, United States, 2013. Paperback. Book Condition: New. 279 x 216 mm. Language: English. Brand New Book ****** Print on Demand ******. In this review, we systematically review the medical literature and evaluate data on the use of hormone replacement therapy (HRT) to prevent osteoporosis in healthy postmenopausal women. Specifically, we focus on the effects of estrogen, with and without progestins, on fracture and bone density outcomes. We also review studies of selective estrogen receptor modulators (SERMs) because of their emerging role in preventing osteoporosis. This report is part of a larger project on the risks and benefits of HRT prepared for the U.S. Preventive Services Task Force (USPSTF) to assist them in making recommendations. The term osteoporosis describes both a process of decreasing bone density as well as the clinical outcome of fracture. Bone density can be measured by a number of techniques and at a number of anatomical sites, although the measures most often used in studies are dual energy xray absorptiometry (DXA) of the hip, spine, heel, or wrist. A World Health Organization (WHO) working group proposed that osteoporosis should be diagnosed when bone mineral density (BMD) is 2.5 standard deviations below the mean for healthy young adult women at the spine, hip, or wrist, or when a history of an atraumatic fracture is present. The working group also proposed that low bone mass, or osteopenia, be diagnosed when bone density is between 1.0 to 2.5 standard deviations below the young healthy mean. The number of standard deviation units above or below the young healthy mean is called the T-score. This measure is often used in eligibility criteria for treatment trials and is used clinically to diagnose osteoporosis. Osteoporosis affects a large proportion of American women over the age of 50. An estimated 12 million (41)...



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