

P-41.

Efficacy and safety of menopausal hormone therapy on women with Human Immunodeficiency Virus Infection: a systematic review

Edward Mezones-Holguin, MD MSc^{1,2}, Luis M Helguero-Santín^{3,2}, Jhackson S. Cordova-Agüero^{3,2}, José Arriola-Montenegro⁴, Luis Danckers⁵, Juan E. Blümel, MD PhD⁶, Faustino Pérez-López⁷, Peter Chedrau⁸. ¹Centro de Excelencia en Investigaciones Económicas y Sociales en Salud, Universidad San Ignacio de Loyola, Lima, Peru; ²Epi-gnosis Solutions, Piura, Peru; ³Facultad de Ciencias de la Salud, Sociedad Científica de Estudiantes de Medicina (SOCIEMUNP), Universidad Nacional de Piura, Piura, Peru; ⁴Sociedad Nacional de Capacitación (SONACAP SAC), Lima, Peru; ⁵Instituto Peruano de Paternidad Responsable (INPPARES), Lima, Peru; ⁶Universidad de Chile, Santiago, Chile; ⁷Universidad de Zaragoza, Zaragoza, Spain; ⁸Universidad Católica de Santiago de Guayaquil, Guayaquil, Ecuador

Objective: Human immunodeficiency virus (HIV) infection is a relevant worldwide public health issue. Current, due to highly active antiretroviral therapy (HAART), most infected women reach mid-age, stage where estrogen deficiency changes occurs. An important proportion of these women develop premature menopause. Several series have described a higher intensification of menopausal symptoms (MS) observed in this population and its effect over important clinical outcomes as HAART adherence, viral load, CD4 count levels and quality of life. Nevertheless, general management of these women is mainly provided by infectious disease physicians and problems related to the menopause are not usually explored. Menopausal hormone therapy (MHT) is the first line option for menopausal symptoms, although there are several clinical conditions where its use is not indicated or controversial. Moreover, the evidence supporting recommendations for the treatment of MS in HIV infected women is not clear. Therefore, the objective of our study was to synthesize the scientific evidence about the efficacy and safety of MHT in women with HIV infection and MS. **Design:** We carried out a systematic review based on the Preferred reporting items for systematic review and meta-analysis (PRISMA). Protocol was recorded in the International prospective register of systematic reviews (PROSPERO). PICOS question was delimited as follows: Women with HIV infection and menopausal symptoms (Participants), Menopausal hormone therapy (Intervention), Placebo or other interventions (Comparison), Efficacy and safety (Outcomes), and randomized clinical trials (Study design). Primary search was performed in PubMed-MEDLINE, EMBASE, WEB OF SCIENCE, SCOPUS, CINALH, y CENTRAL without language restriction. In addition, we searched in the clinical trials register of the United States of America (www.clinicaltrials.gov), European Union (https://www.clinicaltrialsregister.eu) and the International Clinical Trials Registry Platform (ICTRP) (http://www.who.int/ictpr/en/). Also, we examined in the electronic registers of the International Menopause Society (IMS), North American Menopause Society (NAMS) and European Menopause and Andropause Society (EMAS) congresses. The process of selection of studies was made by two independent and blind reviewers with participation of a third author as arbitrator. We delineated the risk of bias assessment (Cochrane tool) and data extraction under the same strategy. **Results:** We identified 383 records from the primary search, and none from other sources. After screening by title and abstract evaluation, all records were excluded because none of them answered the research question. Therefore, we could not assess the risk of bias and nor perform data extraction. **Conclusion:** We did not find randomized clinical trials evaluating the efficacy and safety of MHT in HIV infected women. Future primary studies are required to explore the causes of this, as well as, explore the use of alternative therapies in this population. **Sources of Funding:** None

P-42.

SARCOPENIA AND CLIMACTERIC WOMEN OF THE COLOMBIAN CARIBBEAN

Alvaro Monterrosa-Castro^{1,2}, Mauricio Ortiz-Banquez, Médico^{1,2}, María Mercado-Lara^{1,2}. ¹Universidad de Cartagena. Colombia, Cartagena, Colombia; ²Grupo de Investigación Salud de la Mujer, Cartagena, Colombia

Objective: To determine the prevalence of sarcopenia and associated factors in climacteric mid-aged women. **Design:** Methods: This was a cross-sectional study carried out in Colombian Caribbean women (40-59 years, n=403) who were surveyed with a form that included sociodemographic information and two validated tools (the Menopause Rating Scale and the SF-36 Health questionnaire). Calf circumference, hand grip and gait speed were measured. Low muscle mass (calf circumference < 31 cm), reduced muscle strength (<20 kg in hand grip) and lower physical performance (<0.8 m/s gait speed) were estimated. Criteria of the European Working Group on Sarcopenia in Older People were used to identify sarcopenia. Association between sarcopenia (dependent variable) and menopausal symptoms and health perception (independent variables) was estimated. **Results:** Results: Median age of surveyed women was 48 years, with 44.5% being postmenopausal. A 9.6% had low muscle mass, 18.1% reduced muscle strength and 6.9% had lower physical performance. Pre-sarcopenia was identified in 9.6% and sarcopenia in 7.9% (non-severe sarcopenia 7.1% and severe sarcopenia 0.8%). Most important factors associated with sarcopenia were: feeling full of life only sometimes, feeling a lot of energy only sometimes, having joint/muscular discomfort, history of hysterectomy, hot flashes, mestizo ethnic group, age 50 or more, being postmenopausal, sleep problems. **Conclusion:** Sarcopenia was present in this mid-aged female Colombian Caribbean sample and associated to various factors such as ethnicity, age and menopausal symptoms and status. **Sources of Funding:** none

Factors associated with sarcopenia among studied women (n = 403)

	OR [CI 95%]	p value
To feel full of life only sometimes or never	11.12 [4.74-26.07]	<0.001
Always or sometimes feeling so down in the dumps that nothing could cheer her up	10.76 [4.79-24.14]	<0.001
To be limited to stoop or kneel	7.99 [3.72-17.17]	<0.001
To be limited to walk one kilometer or more	6.17 [2.48-15.36]	<0.001
To consider true that her health will get worse	5.65 [2.27-14.05]	<0.001
To feel a lot of energy only sometimes or never	5.07 [2.41-10.66]	<0.001
To feel downhearted and depressed sometimes or always	4.92 [2.33-10.37]	<0.001
Physical or emotional health problems interfere with her normal social activities	4.81 [2.03-11.40]	<0.001
To report joint and muscular discomfort	4.38 [1.50-12.73]	<0.001
To present physical and mental exhaustion	4.26 [1.84-10.33]	<0.001
To have difficulty performing the work or other activities	4.17 [1.91-9.08]	<0.001
To accomplish less than she would like	4.11 [1.94-8.70]	<0.001
To be limited to do moderate activities	4.01 [1.91-8.40]	<0.001
To present hot flashes	3.99 [1.37-11.63]	<0.001
History of hysterectomy	3.98 [1.75-9.03]	<0.001
To be limited to climb several flights of stairs	3.71 [1.70-8.07]	<0.001
To feel worn out sometimes or always	3.58 [1.65-7.79]	<0.001
Primary school, high school or none	3.51 [1.20-10.22]	<0.001
To be Hispanic ethnic group compared to Afro-descendant/indigenous	3.23 [1.21-8.59]	0.018
Over 50 years of age	3.06 [1.41-6.65]	0.004
Being postmenopausal	2.99 [1.38-6.51]	0.005
Arthritis / osteoarthritis	2.91 [1.30-6.52]	0.009
To be limited to walk 100 meters	2.82 [1.31-6.06]	0.007
To be limited to walk several hundred meters	2.62 [1.26-5.45]	0.009
To accomplish less than she would like as a result of any emotional problems	2.60 [1.24-5.41]	0.017
To report sleep problems	2.25 [1.05-4.81]	0.035
To cut down on the amount of time she spent on work or other activities due to physical problems	2.23 [1.07-4.61]	0.030

P-43.

CONSISTENCE AND INTERNAL STRUCTURE OF ATHENS INSOMNIA SCALE IN COLOMBIAN CLIMACTERIC WOMEN

Alvaro Monterrosa-Castro^{1,2}, Adalberto Campo-Arias^{3,4}, Edwin Herazo⁴. ¹Universidad de Cartagena. Colombia, Cartagena, Colombia; ²Grupo de Investigación Salud de La Mujer, Cartagena, Colombia; ³Universidad del Magdalena, Santa Marta, Colombia; ⁴Instituto de Investigación del Comportamiento Humano, Bogotá, Colombia

Objective: To study the internal consistency and structure of the Athens Insomnia Scale (AIS) in women in the climacteric of the Colombian Caribbean. **Design:** A methodological study was carried out involving 1358 women between 40-59 years old (M=40, SD=5.8), 70.3% were mestiza, 18.2% were Afro-Colombian and 11.6% were Amerindian. 55.5% postmenopausal. The AIS is an eight-item instrument based on the criteria for insomnia of the International Classification of Mental Disorders (World Health Organization, 1992). The internal consistency was estimated with the coefficients of Cronbach alpha and McDonald omega and internal structure (dimensionality) was tested by confirmatory factor analysis and the calculation of goodness-of-fit indicators: Root Mean Square Error of Approximation and 90%CI (RMSEA), Comparative Fit Index (CFI), indice of Tucker-Lewis (TLI), Standardized Mean Square Residual (SMRM). RMSEA (<0.06); CFI (>0.90); TLI (>0.90) SMRM (<0.05). **Results:** The AIS showed both Cronbach alpha and McDonald omega of 0.93. The internal structure showed a dimension with Eigen value of 5.43 which explained 67.9% of the total variance. The commonality between 0.538 and 0.733. The coefficients between 0.774 and 0.880. RMSEA=0.111 [90%CI: 0.101-0.121]; CFI=0.96; TLI=0.94 and SMRM=0.03. These findings need to be corroborated in other Colombian and Latin American populations. **Conclusion:** The AIS presents high internal consistency with a one-dimensional structure in Colombian climacteric women.

Sources of Funding: None
ATHENS INSOMNIA SCALE

Items	Commonality	Coefficients
Difficulty with sleep induction	0.612	0.782
Awakening during the night	0.538	0.733
Early morning awakening	0.558	0.747
Total sleep time (sufficiency)	0.746	0.864
Overall quality of sleep	0.774	0.880
Well-being during the day	0.696	0.834
Functioning during the day	0.596	0.772
Sleepiness during the day	0.551	0.742

P-44.

COMPARISON OF SARCOPENIA PREVALENCE ACCORDING TO AGE GROUP IN CLIMACTERIC WOMEN FROM THE CARIBBEAN OF COLOMBIA

Alvaro Monterrosa-Castro^{1,2}, Mauricio Ortiz-Banquez, Médico^{1,2}, Angelica Monterrosa-Blanco^{3,2}. ¹Universidad de Cartagena. Colombia, Cartagena, Colombia; ²Grupo de Investigación Salud de la Mujer, Cartagena, Colombia; ³Universidad de la Sabana, Chia, Cundinamarca., Colombia

Objective: To compare sarcopenia prevalence according to age group in middle aged women. **Design:** Cross-sectional study in caribbean women from Colombia between 40-59 years, healthy in their communities, who participated voluntarily and anonymously with prior signature of informed consent. Sociodemographic form and anthropometric