Highlights

Articles on

- PCOS and Menopause – Dr. Duru Shah
- Thyroid and Menopause – Dr. Atul Munshi
- Newer Concepts in MHT – Dr. Jyothi Unni
- Fertility and ageing – Dr. Sushma Baxi
- Basics of a website – Dr. Jyothika Desai
Dear Friends,

We are extremely delighted to release this 3rd issue of IMS Newsletter of our tenure 2021 – 22.

Since most of us have been vaccinated against Covid-19, and graph of this pandemic is also declining, hence we are hoping to meet all of you physically from now onwards.

Highlights of this issue are the following scientific articles

- PCOS and Menopause: The Metabolic Association – Dr Duru Shah
- Thyroid and Menopause – Dr Atul Munshi
- Newer Concepts in Menopausal Hormone Therapy – Dr. Jyothi Unni
- Fertility and ageing – desire vs dilemma – Dr Sushma Baxi
- Basics of a website – Dr Jyothika Desai

We thank all the authors who have spared time to pen down these articles in spite of their busy schedule.

We are striving hard to generate awareness about menopause and its challenges amongst doctors, healthcare workers, students and public by doing various programs. But, We need to work more hard to make our females, Fit @ 40, Strong @ 60 and Independent @ 80.

Thanks and Regards

Long Live IMS

Dr. Ambuja Choranur
President
IMS India, 2021 – 2022

Dr. Sudhaa Sharma
Secretary General
IMS India, 2021 – 2022
Indian Menopause Society
International Affiliations

IMS International Representatives
2021 & 2022

Dr. Sunila Khandelwal
Advocacy Committee
International Menopause Society

Dr. Hara Pattnaik
International Menopause Society – CAMS

Dr. Atul Munshi
Asia Pacific Menopause Federation – APMF

Dr. Jignesh Shah
South Asian Federation of Menopause Societies – SAFOMS
Report from Asia Pacific Menopause Federation – APMF

Dr. Atul Munshi
APMF Representative
Indian Menopause Society

- APMF council meeting was held on 14th October 2021.
- Along with this 2nd meeting of technical writing group of APMF was also held.
- 16 members attended from different regions of Asia Pacific.
- Detailed discussion was done on topics to be taken for research study and later on publications in various international journals.
- On 15th October 2021, Special session on “Challenges in the Management of Menopause during the Pandemic” – views of different countries were discussed – Dr. Atul Munshi – (IMS representative to APMF) also participated… the talk was well appreciated.
- On 15th-16th-17th October – the scientific deliberations from various countries were quite interesting and informative. Dr. Jyothi Unni and Dr. Atul Munshi attended virtual meetings on all 3 days.
- There were suggestions from all member countries to Indian Menopause Society to bid for the biannual meeting of APMF, 2024-25.
- Dr. Munshi suggested to inform president/secretary and governing council members and pass in IMS governing council meeting.
CUTTING EDGE SCIENCE IN A MARVELOUS CITY

Celebrating Women's Health at Midlife and Beyond will highlight clinical, research and social aspects of the menopause. We invite you to learn from international experts, network with colleagues from around the world, and enjoy the beautiful historic city of Lisbon. Join us in Portugal in 2022!

Steven Goldstein
Pauline Maki, Rossella Nappi, Tim Hillard

https://imslisbon2022.com/
Introduction

Polycystic Ovarian Syndrome (PCOS) appears to be a very ancient disorder with heterogeneous clinical manifestations whose pathogenesis remains elusive, though it is closely linked to a multifactorial genetic and familial association. As per the latest evidence, intrauterine hyperandrogenemia suggestive of trans-generational transmission of PCOS from mother to fetus, plays an important role compared to the genetic transmission. (1) As per the Rotterdam Criteria, the classical phenotype of PCOS is identified by the triad of Oligo-anovulation (OA), Hyperandrogenism (HA) and PCO morphology (PCOM) of ovaries on ultrasound. After analyzing all the current evidence on the pathogenesis of PCOS, it is evident that PCOS is a multifactorial issue with multi-systemic involvement and not merely an ovarian dysfunction. There has been a shift of the thought process which points to far greater metabolic consequences than initially implicated.

Pathophysiology of Metabolic Syndrome

One in three women with PCOS also have Metabolic Syndrome (MS), with consequences including Cardiovascular disease, Type 2 Diabetes Mellitus (T2 DM) Sleep apnea and Psychologic problems. The ATP III (Adult Treatment Panel III) Guidelines have been popularly used to diagnose Metabolic Syndrome.

Insulin resistance in PCOS

Insulin resistance and consequent hyper-insulinimemia is a prominent feature in PCOS and can be seen in up-to 80% of women with PCOS and more so in obese women with PCOS. A meta-analysis(2) reported that PCOS has an intrinsic Insulin resistance with a 27%lower insulin sensitivity in BMI matched women without PCOS. The meta-analysis also concluded that an increase in BMI results in a disproportionate increase of insulin resistance in PCOS women compared to non PCOS women. Hence PCOS is considered one of the strong non-modifiable risk factors for T2 DM, as 80% women with PCOS are obese and a large percentage are insulin resistant.

Obesity and Hypertension in PCOS

PCOS is an important metabolic disorder and its manifestations are greatly potentiated by obesity. Modest reduction of weight (around 5%) often results in
substantial improvements in reproductive, hyperandrogenic and metabolic features of PCOS. In obese individuals the increased levels of Insulin and Free Fatty Acids (FFA) result in potentiation of the sympathetic outflow, and the activation of the Renin Angiotensin Aldosterone System (RAAS), leading to hypertension. Associated vascular endothelial dysfunction also contributes to the development of hypertension. (3)

Pathophysiology of Metabolic issues during Menopause

Menopause is inevitable in women around the age of 50 years, hence metabolic disorders that are influenced by the hormonal changes of menopausal transition and chronologic aging, become additive.

Estrogen depletion during menopause is responsible for the redistribution of the weight which leads to increased waist circumference. Increased waist circumference due to increased visceral fat is very strongly related to insulin resistance and cardiovascular disease (4). Visceral adiposity is pro-inflammatory and releases inflammatory cytokines that cause impairment of insulin signaling. Estrogen increases vasodilatation and inhibits endothelial injury and prevents development of atherosclerosis. A decrease in estrogen levels during menopause result in loss of this protective function. Menopause is also associated with decreased levels of Sex Hormone Binding globulin (SHBG) which add to the increase in the risk factors. The lipid profile in menopausal women deteriorates making it more atherogenic compared to the premenopausal status. These changes make menopausal women more vulnerable to the metabolic syndrome and cardiovascular disease. (4)

Metabolic syndrome in menopausal PCOS women

There is amelioration of hyperandrogenism and reproductive dysfunction of PCOS as age advances making it difficult to establish a diagnosis of PCOS at a later age. Women with PCOS have a higher initial ovarian volume and a lesser slope of decline. Even if the follicle number starts decreasing with age, the volume takes a longer time to reach normal levels. In a longitudinal study done over 20 years in women with PCOS, it was observed that even though the menstrual cycles got regular, the metabolic abnormalities persisted, and were associated with an increase in the waist circumference with time. (5)

Hyperandrogenism

Hyperandrogenism seen in PCOS is both from ovarian and adrenal origin. There is a higher exposure to androgens in these women, which plays a pivotal role in the development of metabolic disease. and increases the cardiovascular risk.

Androgens inhibit the effects of peripheral and intra-hepatic insulin and also increase the formation of FFA resulting in insulin resistance and metabolic abnormality. (6)

Insulin Resistance and Type II Diabetes Mellitus (T2 DM)

Insulin resistance (IR) is central to PCOS and women with PCOS exhibit higher levels of IR Insulin levels were higher after a oral glucose tolerance both before and after menopause compared to Non PCOS women. A 10 year follow up study demonstrated that the prevalence of T2 DM in women with PCOS in their 4th and 5th decades of life, is 6.8 times higher than in general population without PCOS. (7)
Cardiovascular diseases in PCOS and menopause

CVD is a leading cause of death in women.(8) The exposure to metabolic abnormality make menopausal women with PCOS vulnerable to Cardio-vascular diseases.

There is limited data on the prevalence of CVD in postmenopausal women with PCOS.

Women with PCOS have endothelial dysfunction at a younger age assessed by the Carotid Intima- Media thickness (CIMT) and Coronary Artery Intima Calcium score (CAC). (9) A recent meta-analysis by Jun Zhang colleagues found an increased risk of CVD in PCOS women including myocardial ischemia, ischemic heart diseases and stroke, but the found no difference in all cause or CVD related mortality in two groups. (10)

There is little evidence on cardiovascular disease in patients with PCOS at menopause with conflicting results. A prospective study by a Swedish group found a higher level of triglyceride and Hypertension in PCOS women, but did not report any increased incidence of Myocardial ischemia, stroke, ischemic heart disease in women with PCOS compared with age matched controls without PCOS. (11)

A retrospective cohort study in menopausal women diagnosed with PCOS in their reproductive age versus controls were followed up to 70 years of age to assess the cardiovascular morbidity, found a higher risk of stroke in women with PCOS but this group also had increased BMI and a higher incidence of T2DM. (12) A meta-analysis concluded that all components of metabolic syndrome were adversely affected by menopause, whilst surgical menopause had a 1.5-fold higher risk of metabolic syndrome compared to natural menopause. (13) Women with a premature menopause have increased risk of CVD and each year of early menopause is associated with a 3%increased risk of CVD. (13) The American Heart Foundation have concluded that physiologic changes in menopause are relevant to cardiovascular disease risk, and hence it will be helpful to have an aggressive prevention-based approach to prevent the physiologic detrimental changes leading to cardiovascular diseases.(8)

The international Guidelines on PCOS (14) have suggested that it is unclear if PCOS can be considered as an independent risk factor for CVD, and women in the meantime women with PCOS should be screened for cardiovascular risk factors.

Conclusion

Hence, further studies are needed to determine whether the increased cardiovascular risk in reproductive life translates into an increased cardiovascular morbidity and mortality in later life for women with PCOS
It is now evident that PCOS continues beyond the reproductive age group. The prolonged exposure to androgens, insulin resistance and increased metabolic issues add to the metabolic vulnerability during the menopausal transition. Even though there is uncertainty if these risk factors cause an increase in cardiovascular disease, it is prudent to identify these factors, educate the patient and encourage life style modification before the occurrence of metabolic syndrome, helping to nip it in the bud.

References


4. Lobo R A. Metabolic Syndrome after menopause the role of menopause. Maturitas 2018; 60:10-8


TOT Sessions
9th TOT Session on 10th August 2021
With Jaipur, Jodhpur & Indore
Faculty: Dr. Sunila Khandelwal & Dr. Seema Sharma

10th TOT Session on 17th August 2021
With Surat, Udaipur & Vadodara
Faculty: Dr. Parag Biniwale & Dr. Jyothi Unni

11th TOT Session on 24th August 2021
With Bhopal & Rajkot
Faculty: Dr. Sheela Mane & Dr. Hephzibah Kirubamani

12th TOT Session on 7th September 2021
With Allahabad, Cuttack & Guwahati
Faculty: Dr. Jignesh Shah & Dr. Anita Shah
13th TOT Session on 14th September 2021
With Kolkata, Lucknow & Raipur
Faculty: Dr. Bipasa Sen & Dr. Seema Sharma

14th TOT Session on 21st September 2021
With Patna, Gorakhpur & Bhagalpur
Faculty: Dr. Atul Munshi & Dr. Ambuja Choranur
Introduction

In clinical endocrine practice, thyroid disorders constitute the second most common conditions after diabetes. In an epidemiological study in eight cities in India by Unnikrishna AG et al. the prevalence of hypothyroidism in Indian adults was 1/10 of the study population, was three times more common in women. It was the highest in the age group of 55 years and above. Women are more prone to thyroid disorders.

Thyroid dysfunction is common in the general population, especially in women. Thyroid function and the gonadal axes are related throughout the woman’s fertile period.

Studies on the relationship between menopause and thyroid function are few and do not allow to clarify whether menopause has an effect on the thyroid regardless of aging.

Figure 1 Schematic diagram explaining the relationship between thyroid, ovary, liver and kidney; actions of thyroid hormones, estrogens, T3, triiodothyronine; SHBG, sex hormone binding globulin; TBG, thyroxine binding globulin; FSH, follicle stimulating hormone

Hypothyroidism

Causes of hypothyroidism

Primary

- Chronic autoimmune thyroiditis
- Iodine deficiency
- Drugs: iodine excess (including iodine-containing contrast media and amiodarone), lithium, antithyroid drugs, p-amino salicylic acid, interferon-α and other cytokines, aminogluthethimide
- Congenital hypothyroidism: absent or ectopic thyroid gland, dyshormonogenesis, TSH-receptor mutation

Secondary

- Hypopituitarism: tumors, pituitary surgery or irradiation, infiltrative disorders, Sheehan’s syndrome, trauma, genetic forms of combined pituitary hormone deficiencies
- Isolated TSH deficiency or inactivity
- Hypothalamic disease: tumors, trauma, infiltrative disorders, idiopathic
Transient
Silent thyroiditis, including postpartum thyroiditis
Subacute thyroiditis
Withdrawal of thyroxine treatment in individuals with an intact thyroid
After I treatment or subtotal thyroidectomy for Graves’ disease.

Screening
Screening for thyroid disorders has been recommended by the Indian Menopause Society (IMS).

Thyroid Homeostasis and Interpretation of Biochemical Tests in Elderly.
Some manifestations of menopause are similar to the signs and symptoms suggestive of thyroid dysfunction. Hot flushes, intolerance to heat, sweating, palpitations, irritability, insomnia, and rapid changes in mood can be traced back to a status of hyperthyroidism.

Special considerations in diagnosing and treating perimenopausal and postmenopausal women with thyroid dysfunction include the difficulty of differentiating between menopausal symptoms and symptoms related to thyroid dysfunction.

Screening test
Measurement of serum thyroid-stimulating hormone (TSH) and further testing by a free thyroxine (T4) is added only if the TSH is abnormal.

As a screening test, serum TSH is appropriate to identify primary hypothyroidism, which is the most common form. Investigation for other causes depends on the clinical situation.

Importance of Screening for Thyroid Disease in Women at Menopause
Women with higher-than-normal TSH were likely to report fearfulness among 15 menopause symptoms evaluated.

Lethargy, weakness, weight gain and mild edema are more in Hypothyroidism, in this group of patients.

This is of concern because clinical features and TSH levels must be interpreted in terms of age-level normal.

The practical implications arise from the increased risk of fracture among women with hypothyroidism, either primary or iatrogenic. A recently published case-control study concluded that in the elderly, aged 70 years or more, was associated with increased risk of fracture, with a strong dose-response relation.
**Treatment for Hypothyroidism**

Consultation by an expert endocrinologist is advisable before starting of the treatment.

Levothyroxine (L-T4) is the treatment of choice for hypothyroidism. L-T4 is converted to the bioactive hormone T3 in peripheral tissues. The replacement dose for adult women is estimated at 1.6 μg/kg.

In women without other pathologies aged between 40 and 60 years, the initial dose is 50 μg/day.

Drugs such as ferrous sulfate, calcium carbonate, cholestyramine, sucralfate and proton pump inhibitors can interfere with the gastrointestinal absorption of L-T4.

Because many postmenopausal women are also diagnosed and treated for hypothyroidism, the concomitant use of estrogen/hormone should be monitored carefully.

**Hyperthyroidism including Thyroid Nodules**

The other common conditions of thyroid dysfunction are hyperthyroidism and the occurrence of thyroid nodule.

The signs and symptoms of hyperthyroidism are often vague and insidious. They are attributed to normal aging. Annual incidence of overt hyperthyroidism was reported to be 2–3 per 1,000 women. Hyperthyroidism is thrice as common in women as in men.

**Basically, there are following types**

- Graves ’disease
- Subacute thyroiditis
- Toxic multinodular goitre and toxic adenoma
- Functioning thyroid carcinoma metastases
- Ingestion of excess thyroid hormone (thyrotoxicosis factitia) or thyroid tissue

**Importance of Hyperthyroidism in menopause**

Thyroid autoimmunity is more common in females than in males, probably because of the action that sex hormones, estrogens and androgens have on the immune system.

Development of an autoimmune thyroiditis is also often seen in patients who are taking estrogens or SERMS.

Patients of early menarche and late menopause are also prone to autoimmune thyroiditis.
Treatment

Again, expert advice of endocrinologist is a must.

Overt hyperthyroidism should be treated. Drug therapy with thionamides (methimazole or propylthiouracil).

A trial of l-thyroxine replacement therapy should be considered. For such patients who have been started on l-thyroxine for symptoms attributed.

Surgery may be needed for goitre.

Conclusion

- Thyroid dysfunction is common especially in women over the age of 50 years.
- Postmenopausal women are at increased risk of both osteoporosis and cardiovascular disease.
- Untreated thyroid disease may exacerbate these risks.
- Screening for thyroid dysfunction in asymptomatic individuals is controversial, but aggressive case-finding should be pursued.
- Serum TSH investigations can be justified in perimenopausal and postmenopausal women with symptoms.
- Women with overt thyroid dysfunction should be treated, but caution is required in diagnosing and treating thyroid dysfunction in women who are taking estrogens or SERMs.
- Presence of thyroid disorder should not interfere with indicated Menopausal Hormone Therapy (MHT).

References:

India is ageing at a much faster pace than several other countries. It is estimated that there will be 89 million women above the age of 60 by the year 2026. Elderly women will outnumber men and we need to prepare ourselves to take care of the needs of these women.

Globally, the mean age at menopause is 51 years whereas in India it is 46.2 years. So, our women have to live with the consequences of estrogen deprivation for longer.

There has been considerable debate about the risks and benefits of Menopausal Hormone Therapy (MHT) in the past two decades. MHT is the most effective treatment for vasomotor symptoms and for the prevention and treatment of post menopausal osteoporosis.

**Low Dose Therapy:**

Lower doses of MHT continue to provide the efficacy with fewer side effects. There is better compliance and the benefits on bone health are not compromised. Estradiol in a dose of 1 mg orally daily or Conjugated Equine Esrogen (CEE) 0.3 mg orally daily should be the starting dose. Women should be counseled that it may take one to three months for symptoms to abate. If in three months, there is not adequate symptom relief, the dose of estrogen can be increased. However, women with Premature Ovarian Insufficiency should be given regular doses of hormone therapy and not low dose therapy till the natural age of menopause.

**Transdermal Estrogen:**

It is preferable to use the transdermal route of delivery of estrogen in women who are obese as it avoids the first pass effect in the liver and thus has a more favourable effect on lipids and coagulation parameters. Though the transdermal patches were not found satisfactory for use in India due to the warm and humid conditions, estradiol gel which can be applied on the skin is available and is a useful agent.

**Vaginal Estrogen Therapy:**

Genito-urinary symptoms are best treated with local vaginal estrogens. Either Estriol cream or Conjugated equine estrogen cream can be used daily at bedtime for 10 to 14 days followed by twice weekly for 3 months. Safety data is available for 12 months of continuous use. Progestogens are not required when only vaginal estrogen is being prescribed ie no systemic estrogen is being given.

**Progestogens:**

Women with an intact uterus need to be given progestogens for at least 12 to 14 days a month to prevent endometrial hyperplasia. The use of Dydrogesterone or
Micronised Progesterone, instead of the more androgenic preparations used earlier continue to provide endometrial protection with less adverse effects on the lipid profile and the breast. The Levonorgestrol Intra-Uterine system is an excellent option for women who accept it. Consideration should be given to adding a progestogen as part of MHT in women who have undergone Hysterectomy with Bilateral Salpingo-oophorectomy for severe endometriosis to avoid flaring up of any residual endometriosis.

**Ospemifene:**

Ospemifene is a third generation Selective Estrogen Receptor Modulator (SERM) which has been approved for oral use for the treatment of Dyspareunia. 60 mg is given in a single daily dose. It has no adverse effects on the breast and endometrium.

**Testosterone:**

The use of Testosterone in women has been the subject of controversy. It is effective for the treatment of female sexual dysfunction. However preparations for women are not available in India. A recent position statement from the International Menopause Society suggests that preparations available for men can be used but in doses which are physiological for women.

**Tibolone:**

Tibolone is an agent with estrogenic, progestogenic and androgenic properties. It is particularly useful in women with symptoms pertaining to mood and libido. A lower daily dose of 1.25 mg orally is as effective as 2.5 mg.

**The Tissue Selective Estrogen Complex (TSEC)** is the combination of 20 mg of Bazedoxifene (BZA) which is a SERM with 0.45 mg of CEE. Tissue selective activity comes from the blended activity of both agents. It is effective in treating vasomotor symptoms and also prevents bone loss. It does not stimulate the endometrium. There is more amenorrhoea and less breast pain. It is not available in India yet, but it has been approved for use in several countries.

**Timing Hypothesis:**

The concept of the ‘window of opportunity’ came about soon after the WHI trial was abruptly terminated. Several researchers started looking at the timing hypothesis. Results of the KEEPS and ELITE trials suggest that starting MHT in the early postmenopausal years may reduce the risk of coronary artery disease.

**Duration of Therapy:**

MHT should be given for the required duration and not for the shortest duration as was recommended earlier. The decision to stop or continue therapy should be discussed and a decision made based on the woman’s individual needs. Anecdotally, it is better to taper therapy rather than abruptly stopping it, though there is no hard data to help decide which would be the better way.
Co-Morbidities:

Hypertension is not a contra-indication for the use of MHT, if the blood pressure is well controlled. It does increase the stroke risk, particularly in obese women, so life style modification should be advocated.

MHT reduces fasting glucose and increases insulin sensitivity and so reduces abdominal fat and the development of Type 2 Diabetes.

Cancers:

A recent meta-analysis has shown that there is no harmful effect of MHT on survivors of Carcinoma Cervix and the authors suggest that it should be offered to young survivors.

MHT reduces Colon cancer risk, but it should not be prescribed solely for this indication. There is no contra-indication to the use of MHT in women who have been treated for Ovarian Cancer. MHT increases the recurrence risk in Breast Cancer survivors and it is prudent to offer them non-hormonal alternatives for symptom relief.

Major Adverse Effects:

The increased risk of breast cancer is primarily due to synthetic progestogen. The risk is less than 1 in 1000 women per year of use and occurs after 5 years of therapy. It is dose and duration dependent and there is no increase in the mortality risk.

There is an increase in stroke risk of 8-12/10,000 per year. Rates are strongly age related. This can be reduced by using low dose and ultra low dose formulations and non-oral routes of therapy.

The risk of Venous Thrombo-embolism increases with oral MHT, particularly in women over 60. This can be avoided by using the transdermal route.

Coronary artery disease was thought to be the other significant adverse effect. However, in women who are recently menopausal (within 10 years), below the age of 60 and with no prior history of cardiovascular disease, there is a consistent reduction in mortality with the use of MHT.

The safety of MHT largely depends on age and time since menopause. We should help women make informed choices and offer them both behavioural and pharmacological therapy.

Suggested Reading

Activities by Committees
Aesthetic Health Committee

Dr. Ragini Agrawal

Aesthetic Health Committee of IMS & IACDG
in association with Calicut Menopause Society Present
Menopause an Eternal Truth

Episode: 12: Vaginal Laxity Prolapse Dt 17th Sep 2021 :time 2.30-5.00pm

Chief Guest: Dr C Ambuja
Guest of Honor: Dr Sudha Sharma, Dr Anita Shah, Dr Ajitha PN, Dr Lakshmy S, Dr Chellamma
Program Director: Dr Ragini Agrawal

SESSION 1 TALK 1 BY DR RAGINI AGRAWAL: VAGINAL LAXITY TO PROLAPSE PREVENTTION & NON SURGICAL TREATMENT
SESSION 2 TALK 2 BY DR MANDAKIN CHOPRA: PELVIC PHYSIOTHERAPY MAKES A DIFFERENCE
SESSION 3 TALK 3 BY DR SHOBHNA MOHANDAS: SURGICAL MANAGEMENT

VOTE OF THANKS: DR LAKSHMY S
Dr. Arti Gupta Sharma

Indian Menopause Society and Jaipur Menopause Society
Agra Obs & Gynae Society
Club 35+ Public Awareness Committee

Presents

EK SHAAM DESH KE NAAM
KAHI GEET SAMMELAN

On Occasion of
INDEPENDENCE DAY

Program Coordinators
Dr Arti Gupta
Dr Naazam Jain
Shahba Sethia
Ratna Sharma

Chief Guests
Dr Ambuj Charan
Dr Sunil Mantriwal
Dr Sudha Sharma
Dr Atul Kini

Guests of Honour
Setu Sushil Sant
Dr Rajkumar Ranjan
Bhumika Jain

Invited Guests

Dr Gaurav Jain
Deeptiha Gaurav Jain
Khushboo Bakhal
Dr Babu Sarkar
Dr Shilpa Jain

Invited Poets

Dr Ritu Patni
Dr Archana Shukla
Nishi Raj
Dr Anjali Pathak
Dr Rajpreet Pargat

Digital partner

Club 35+ Committee

AGRA (14 Aug): The Club 35+ committee, under the aegis of Indian Menopause Society and Jaipur Menopause Society, organized an event on Independence Day to promote awareness about menopause. The event, titled "EK SHAAM DESH KE NAAM: KAHI GEET SAMMELAN," was held on 14th August, 2021, from 05:00 PM to 07:30 PM. The program was coordinated by Dr Arti Gupta, Dr Naazam Jain, and Shahba Sethia.

The chief guests for the event were Dr Ambuj Charan, Dr Sunil Mantriwal, Dr Sudha Sharma, and Dr Atul Kini. Guests of honour included Setu Sushil Sant, Dr Rajkumar Ranjan, and Bhumika Jain.

The event included performances by invited poets and singers, such as Dr Gaurav Jain, Deeptiha Gaurav Jain, Khushboo Bakhal, Dr Babu Sarkar, and Dr Shilpa Jain.

The event aimed to raise awareness about menopause among women and to celebrate the spirit of independence.

For more information, please visit the official website at www.jagran.com.
Education Committee

Dr. Laxmi Shrikhande

- Long acting Contraceptive methods - Dr Ambuja Chairpersons, Lakshmi Ravindran, Dr Anju Soni
- Emergency Contraception - Dr Laxmi Shrikhande Chairpersons - Anita Shah, Tapan Pattanaik

Case based panel discussion
Moderators -
Dr Tripura Sundari
Dr Sandhya Dixit

Panelists -
Dr Shobhana Mohandas
Dr Rekha Bhiwapurkar
Dr Ashwini Bhalerao Gandhi
Dr Bharti More
Dr Garima Gupta
Dr Sushma Verma
IMS Education Committee presents live webinar on - Trials & Studies on Menopausal health

Date- Thursday 16th September
Time- 4 to 6 pm

Chief Guest- Dr Ambuja C
GOH- Dr Sudhaa Sharma

First Session on
WHI study- Dr Sudhaa Sharma
Chairpersons-
- Dr Manoj Chellani,
- Dr Moushmi Parpillewar Tadas

Session on
HERS study- Dr Meeta singh
Chairpersons-
- Dr Charu Bapaye,
- Dr Revathi Janakiraman

Followed by Q & A session
Tree plantation on 29th of August
Dr. Savita Tyagi

- Camp at village Ladukhera by IMS Rural committee, AOGS and Grace rotary club Agra HB , blood sugar, BMD done free of cost , out of 130 women 35 were anaemic and 60 were osteopenic and 10 were with high blood sugar levels

Lastly on the 17/09/2021 , celebrating birthday of our prime minister Narendra Modi BJP had organized state wise pap smear camps. In rajkot word no. 13 my hospital was selected for pap smear camp. Around 40-50 per hospital pap smears were done and all smears were sent to GCRI onco center. This programme had many benefits - It provided mass screening to all needy patients at free of cost. - It also made women aware about this deadly cancer - It made world record also around 8000 women were screened in 178 words between 2 pm to 5 pm across Gujarat.
MHCC – Community Health Committee

Dr. Nirmala Pipara

- Kolkata Menopause Society organized a MHCC camp at Apanghar, P-57, Raghunathpur along with Inner Wheel Club on 1.8.2021 between 9.30 am to 11.00 am. 19 postmenopausal women were examined and free Hb, TSH, Blood Sugar and BMD was done. Eldest patient was 92 years old. We distributed free Iron, Calcium, Antacid, Laxative, Cough Syrups and what required by the patients. The Programme was a grand success.

- Kolkata Menopause Society and The Bengal Obstetric & Gynaecological Society organized a MHCC camp at Tollygunge Sthanakvasi Jain Sangh, 61/22, Manik Bandyopadhyay Sarani (Moore Avenue), Kolkata-700040. The aim was to create an Awareness regarding Anemia, Diabetes, Hypothyroidism and Osteoporosis. There were 75 registrations and Free HB, Sugar (R), TSH and BMD tests were done. Free Iron, Calcium, Antacids, Laxatives, Cough Syrups, Antibiotics distributed to the patients as an when required. The Programme was attended by Dr Bipasa Sen, Dr Nirmala Pipara and Dr Sharmishtha Ganguly. It was a grand success.

- Kolkata Menopause Society and The Bengal Obstetric & Gynaecological Society organized a MHCC programme on 3/9/2021 between 11.00 am to 2.00 pm at Matri Mangal Pratisthan, 228, Rabindra Sarani, Kolkata-700007.

   This time we selected 50 senior staff, nurses and paramedical for evaluation of health awareness against Obesity, Anemia, Diabetes, Hypertension, Hypothyroidism, Lipid profile was done of all 45+ women. Lipid profile was done about 30 patients. About 20 had abnormal lipid profile.

   Hip waist ratio was also taken. A short talk was given on Obesity.

   The Programme was a grand success.
MMIMSR, Mullana, Ambala, Haryana under Aegies of IMS, conducting a program with lectures of CANCER SCREENING IN PERIMENOPAUSAL WOMEN, COVID 19 VACCINATION, PRECAUTIONS FOR COVID-19 during covid 19 pandemic to celebrate monthly varisht mahila swastha shivir under aegis of IMS under MHCC on 11.09.2021 at 12:00pm in gynae OPD

- A total of 35 opd patients attended and lecture was taken.
- 3 lecture were taken
  a) cancer screening in perimenopausal women: Dr. Ruby Bhatia Prof & HOD OBG.
  b) covid-19 vaccination: Dr. A.S. Dhillon(prof.)
  c) precautions for COVID-19: Dr. Tajinder Kaur (Prof.)

- venue- obstetrics & gynaecology OPD

Dr. Nirmala Pipara
“What do I want more than anything else in this world? I want a baby, I want children.” — Marilyn Monroe

These were the words of one of the most beautiful woman of the world in her late 40+. Issues with elderly females related to fertility are on rise, so has the need. To be honest, whether one likes or not – one cannot ignore the care and importance of fertility in elderly females.

The trend to delay birth of the first child until the age at which female fecundity or reproductive capacity is lower has increased the incidence of age-related infertility in late 20th century. The trend and its consequences have also stimulated interest in the possible factors in the female and the male that may contribute to the decline in fecundity with age.

A woman is born with approx. 1 million eggs, out of which she is going to use 300 to 400 in her lifetime. Her eggs decrease in quality and quantity over a period. Age is the single most important factor affecting women’s fertility. While being in good health improves the chance of getting pregnant and having a healthy baby, it doesn’t override the effects of ageing on a woman’s fertility.

Tests reflecting ovarian reserve include ovarian volume, total number of antral follicles and estimates of AMH, inhibin B or FSH concentrations. Although these tests relate with follicle number, the variation between subjects is such that they have limited value in predicting when the ovary will fail in an individual woman!! and they are even less accurate in predicting the likelihood of conception. The lower number and diminished quality of oocytes causes a marked decline in fecundity, which is clinically relevant in women from their mid-30s.

A woman in her early to mid-20s has a 25–30% chance of getting pregnant every month. Fertility generally starts to reduce when a woman is in her early 30s, and reduction continues faster after the age of 35. By the age of 40, the chance of getting pregnant in any monthly cycle is around 5%.

WOMEN’S AGE AND IVF

It’s a common misconception that ivf treatment can overcome age-related infertility. A woman's age also affects the chance of success with IVF. In Australia, the chance of a live birth from one complete IVF cycle (which includes all fresh and frozen-thawed embryo transfers following one ovarian stimulation) is about:

- 43% for women aged 30 to 34 years
- 31% for women aged 35 to 39 years
- 11% for women aged 40 to 44 years.

For older women the chance of having a baby increases if they use eggs donated by a younger woman.
Unfortunately, even ART cannot compensate for >30–50% of the fecundity that is lost by delaying attempts at conceiving.

WOMENS AGE AND PREGNANCY COMPLICATIONS

The risk of miscarriage and chromosomal abnormalities in the foetus increase from age 35. Complications such as hypertension, gestational diabetes and placenta Previa, caesarean section, preterm labour and still birth are also more common among older women than younger women.

DESIRE Vs DIELLEMA

1. The need for fertility in midlife is on the rise.
2. ART usage is on rise but it has its own limitations and complications.
3. Social freezing of embryos or eggs has opened up new fertility dimensions in carrier oriented individuals.
4. Medical science cannot eliminate all the risks related to midlife fertility.
5. Judicious use of technology is the need of the day.
6. Unwanted fertility is other angle of paradigm emphasising need for effective and safe contraception.

ISSUES RELATED TO 40+ FERTILITY

1. It is harder to get pregnant
2. It is harder to stay pregnant
3. It is harder to avoid medical complications
4. It is harder to be sure that child will be healthy
5. Menstrual disorders and overconfidence leads to non-usage of contraceptives and unwanted pregnancy.

MENS AGE AND FERTILITY

While the effects of female age on fertility have been known for a long time, more recent studies have shown that the age of the male partner also affects the possibility of pregnancy and perinatal outcome.

Male fertility generally starts reducing around age 40 to 45 years when sperm quality and quantity starts decreasing. Upper age of 65 + has higher DFI and poorer fertilisation capability.
While balancing the need for fertility in 40 plus women with safety, it is certain that we cannot opt for or support infinite reproductive span.

Various issues for consideration are chronological age vs biological age. We must also consider older parents and associated parenting challenges too. It is certain that physical limitations of aged parents can affect child rearing and caring. There is also a concern for loss of one or both the parents due to age related complications which leads to increase in number of orphan children and related social issues.

40 plus pregnancies are high risk pregnancies and risk of loss of mothers due to ante, intra or post-natal complications is higher. Thus policy makers will have to focus on safer options and availability of adequate services.

Amongst available advanced technological services, we have pre implantation genetic diagnosis, PGT –A, use of stem cells, or artificial gametes and elective sperm and oocyte cryopreservation and ovarian transplantation to improve pregnancy rate, live birth rate and replace declining ovarian reserve.

While advocating any of these methods and using them for better pregnancy rate and outcome, one needs to keep cost factor in mind.

These new procedures will expose ART practitioners and gynaecologists to face social, ethical and legal challenges. Society at large, Judiciary, government and research organisations should be responsible to consider desire versus safety.

I end my write up with the statement of Mahmoud Faathalla former director of the WHO reproductive program (HRP).

“If public health policies encourage couples to delay and plan pregnancies, (then it is) equally important that they are assisted in their attempts to conceive in the more limited time available”

At the end I wish to remember and remind the age old oath of HIPPOCRATUS

Primum non nocere ~ First do no harm
Sunday WhatsApp Quiz
Quiz Committee

Dr. Jyoti Jaiswal

Sunday WhatsApp Quiz

Date: 1st August 2021
Theme – MHT & Its Impact on Visceral Fat

Choose one best answer.
1.: Current Menopausal Hormone Therapy (MHT) is associated with:
   a. Reduced total and visceral adiposity
   b. The effect to reduce visceral obesity is short lived
   c. The effect disappears when therapy discontinued
   d. All of the above

2.: True or False
Benefit of MHT on body composition might rapidly disappear after its withdrawal, and it is important therefore to strongly encourage women to optimize nutrition and increase physical activity when stopping MHT.

3.: MHT is associated with
   a. Significantly decreased VAT,
   b. Decrease in BMI
   c. Decrease in Android Fat Mass
   d. All of the above

4.: A 52-year-old woman presents to your office with concerns about weight gain. She experienced her last menstrual period at the age of 49, and reports gaining 8 pounds since then. She reports bothersome hot flashes and night sweats. She wonders about using MHT, but is concerned it will cause her to gain more weight. Her physical examination reveals a BMI of 27.6 and blood pressure of 136/88.
   How do you advise her?
   a. You explain that the extra weight will have little impact on her overall health.
   b. You indicate that she could use MHT, but that it might result in additional weight gain, particularly around the midsection.
   c. You advise more exercise as an effective means for taking off the extra weight.
   d. You counsel that MHT would be effective for management of hot flashes and night sweats and will contribute in her weight loss and will increase her bone health.
   e. You explain that menopause is the primary reason for her weight gain.

5.: Answer True/False
In both Study of Women’s Health across the Nation (SWAN) and Penn Ovarian Aging Study (POAS), obese women had lower Estradiol (E2) and Follicular Stimulating Hormone (FSH) levels than nonobese women, and in the POAS, lower Luteinizing Hormone (LH) and Inhibin B levels as well.

Quiz compiled by
Dr Payal Bhargava
Member Quiz committee, IMS

ANSWER SHEET
1. D. All of the above
2. True
3. D. All of the above
4. D. You counsel that MHT would be effective for management of hot flashes and night sweats and will contribute in her weight loss and will increase her bone health.
5. True

Reference

Winners of WhatsApp quiz of 01/08/2021 on MHT & Its Impact on Visceral Fat

<table>
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<tr>
<th>Dr. Vidhya Chauhan</th>
<th>Dr. Shazia Jammu</th>
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Date: 15th August 2021  
Theme – Metabolic Syndrome & Menopause

Q1: Menopause is a risk factor for
A) Cardiometabolic diseases  
B) Metabolic syndrome (MetS)  
C) Type 2 diabetes  
D) Cardiovascular diseases.  
E) All of the above.

Q2: Metabolic Syndrome is a constellation of interdependent factors such as insulin resistance, abdominal obesity, dyslipidemia, and hypertension.
TRUE / FALSE

Q3: The prevalence of Metabolic Syndrome in postmenopausal women is due to loss of the protective role of estrogens and increased circulating androgens resulting in changes to body fat distribution and development of abdominal obesity.
TRUE / FALSE

Q4: Excessive Visceral Adipose Tissue plays an important role due to synthesis and secretion of bioactive substances such as
A) Adipocytokines  
B) Proinflammatory Cytokines  
C) Reactive Oxygen Species  
D) Prothrombotic, and Vasoconstrictor factors.  
E) All of the above.

Q5: Metabolic Syndrome may also impact risk assessment of breast cancer, osteoporosis and chronic kidney disease, and quality of life during the menopausal transition.
TRUE / FALSE

ANSWER SHEET
1 – E: All of the above  
2 – True  
3 – True  
4 – E: All of the above  
5 – True

Reference

Winners of WhatsApp quiz of 15/08/2021 – on Metabolic Syndrome & Menopause

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<td>Dr. Sunena Goyal</td>
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Quiz compiled by Dr Payal Bhargava  
Member Quiz committee, IMS
**Quiz Committee**

**Date: 5th September 2021**  
**Theme – Metabolic Syndrome & Menopause**

**Q1:** What is the criteria for metabolic syndrome apart from insulin resistance  
A) waist to hip ratio > 0.85 in women  
B) BMI > 27  
C) Hypertryglyceridemia>250 mg/ dL  
D) HDL < 50 mg/ dL

**Q2:** What is not a risk factor for Metabolic Syndrome  
A) Obesity  
B) pear shaped body fat distribution  
C) excess calories intake  
D) physical inactivity

**Q3:** Metabolic syndrome is associated with all EXCEPT  
A) Type 2 DM  
B) Alcoholic fatty liver  
C) hyperuricemia  
D) obstructive sleep apnea

**Q4:** TRUE / FALSE  
The prevalence of Metabolic Syndrome decreases with age

**Q5:** TRUE / FALSE  
Increased waist circumference is most strongly associated with insulin resistance and cardiovascular disease.

**Winners of WhatsApp quiz of 05/09/2021 - on Metabolic Syndrome & Menopause**

<table>
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**Quiz compiled by**  
**Dr Jyoti Jaiswal**  
Chairperson, Quiz committee, IMS

**ANSWER SHEET**

1 – A: waist to hip ratio > 0.85 in women  
2 – B: pear shaped body fat distribution  
3 – B: hyperuricemia  
4 – False  
5 – True

**Reference**

**Quiz Committee**

**Date: 19th September 2021**
**Theme – Metabolic Syndrome and Associate Disease**

**Q1:** What is/ are the key target for damage due to metabolic syndrome
A) Cardiovascular system  
B) pancreas  
C) liver  
D) All the above

**Q2:** What is not a risk factor for Metabolic Syndrome  
A) increased triglyceride  
B) increased blood sugar  
C) hypotension  
D) oxidative stress

**Q3:** Which hormonal resistance may initiate the development and maintenance of obesity  
A) leptin  
B) oxytocin  
C) progesterone  
D) prolactin

**Q4:** TRUE / FALSE  
Parental obesity is a significant risk factor for obesity in offspring

**Q5:** TRUE / FALSE  
Long sleep duration at early childhood is associated with increased risk of childhood obesity.

---

**Answer Sheet**

1 – D: All the above  
2 – C: Hypotension  
3 – A: Leptin  
4 – True  
5 – False

**Reference**

The metabolic syndrome and associated diseases.

Toxicology sciences, vol162, issue1, march 2018; pg 36-42

**Winners of WhatsApp quiz of 18/07/2021 – on Metabolic Syndrome and Associate Disease**

<table>
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<tr>
<th>Dr. Megha Agra</th>
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<td>Dr. Minakshi Bajpayee Kolkata</td>
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<td>Dr. Narumalar Madurai</td>
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**Quiz compiled by**

Dr Jyoti Jaiswal  
Chairperson, Quiz committee, IMS
Do you know what the word “website” means? It is a set of related web pages located under a single domain name, typically produced by a single person or an organization. Picking the sort of website design depends upon the kind of business and requirements of the entrepreneurs.

It is not a simple task to satisfy search engines as well as web users as they both have specific needs. There are many types of website designs with their own unique features and advantages that a business or an individual can utilize to improve their online presence. A seeker for a corporate identity for his company cannot go for a visual design. If one wants to promote a particular product or offer an exclusive service, the design should have a lot of text so as to make it stand out.

There are basically three types of web design: Static, Dynamic or CMS and e Commerce.

1. **Static website design:**

   Here, the data is all on a few pages and the data never changes. The information remains the same and does not change with time. These websites have to be updated manually which makes it a very tedious and laborious task.

2. **CMS or Dynamic website:**

   The website is as the name suggests- it has dynamic data. This means that change is a constant feature here with new data being updated automatically. The only problem with this website is that it is very difficult to design.

3. **E-Commerce website:**

   This website caters to marketing and sales and anybody who has a shop or a store with something to sell, takes up the e Commerce website or e-store. The advantage of this type of website is that it does not need the services of an expensive web designer, is possible to be created by a person or business as it is easy to design without much experience or expenditure. It can also give an exclusive appearance to make the website appear totally different from others.
Some more Gyaan about a website:

1. How to open a website?

To see a website one requires a browser (e.g., Internet Explorer, Safari, Firefox, or Chrome). Once you enter the browser, the website can be opened by typing the URL in the address bar. For example, by typing "https://www.indianmenopausesociety.org", you can directly enter the IMS home page. If the URL of the website you want to visit is not known, a search engine to find the website on the Internet can be used.

2. When was the first website created?

The first website was built at CERN by Tim Berners-Lee and launched on August 6, 1991.

3. How many websites are on the Internet?

As of January 2018, there are between 1.3 and 1.8 billion websites. Quite a few of these websites are not used or not visited by many people, but the websites continue to exist and are included in the count.

4. What is the difference between a website and a web page?

A website refers to a central location with more than one web page or a series of web pages. A web page is part of a website.

5. Who creates websites on the Internet?

Any business, government, organization, or person can create a website on the Internet. The Dynamic website, however, needs the services of a professional web designer.

6. What can you do on a website?

The options depend upon the purpose for which the website is designed. You can access the information on each page depending upon your interests. Most websites have hyperlinks which on clicking, can perform a task or give you specified information. There are websites where you can listen to different genres of music, can watch videos, can purchase, communicate, etc.

7. What is an Archive website?

This is a special website which stores information of one or more websites. The best example of an Archive website is the Internet Archive.

8. What is a Blog (weblog)?

We hear of so many celebrities making news with their blogs. Well, a blog is an exclusive website created by an individual to store whatever interests him or her.

9. What is a Microblog?

You feel we are splitting hair, don’t you? Yes, a Microblog is a smaller version of the Blog website, where the number of characters posted in an individual blog entry are restricted. It is nevertheless, a very popular website, especially in the form of Twitter, which is a microblog website for social networking.
10. What is a Web Server?
A Web Server is a computer that hosts a website on the Internet.

11. What is a Search engine?
A Search Engine is a web service that helps you find other web pages, such as Google, Bing, Yahoo, etc.  

Some of the websites which are commonly used are: Business website, Community website, Dating website, Gaming website, Government website, Malicious website, Mirror website, School websites, Phishing website, Fake news website, etc.

It is time we know more about the information that our very own IMS website offers:

1. Current Office Bearers along with the President’s Message
2. The illustrious history of IMS and the worthy contributions of its Past Presidents
3. List of Governing Council Members
4. The various IMS Committees along with their Chairpersons and Committee Members
5. Details of the CIMP Exam, including the Prospectus, Application Form and Syllabus. The list of successful candidates from the inception of the CIMP Exam till now is displayed as an open invitation to others to join suit.
6. Details of International, National and Zonal Conferences, past and upcoming, can be easily accessed from the website.
7. IMS Publications are available on the website along with the IMS Journals, Newsletters, POISE Magazines, not to forget Educational Material presented at National and International Conferences by our illustrious members.
8. Information of the most awaited IMSCON is available on the website too, along with the Registration form, Hotel Tariffs, Scientific Programme and places of interest close by.
9. Most interesting and attractive entries are the Fortnightly IMS Quiz Results displayed so prominently again and yet again.

Apart from these details already available on the IMS website, the future endeavour of the Website Committee is to have Hobbies and Achievements of our talented Members also posted on the website, so that more and more members will visit, enjoy and applaud indianmenopausesociety.org- an exciting world opening up just with a click!

References
1. My Story: 3 Different Types of Website Design to Choose from; By Dinesh Bhardwaj; April 23, 2020
2. Computer Hope; updated June 2021
3. Mozilla Developer Network; 2nd September, 2021
Activities by Local Societies
Ahmedabad Menopause Society

Webisode no. II
Vulval Cosmesis to Disorder
Aesthetic health committee of IMS and IACDG
with Ahmedabad and Surat Menopause Society
Date: 20.8.2021 | Time: 4:30 - 6:30 pm

4-4.30pm - Inauguration

CHEIF GUEST
Dr. C Ambuja
President, IMS

GUESTS OF HONOUR
Dr. Sudhaa Sharma
Secretary General, IMS
Dr. Anita Shah
Past Secretary General, IMS

PROGRAM DIRECTOR
Dr. Ragini Agrawal
VP FOGSI-2020, Founder chair Aesthetic health committee - IMS, President IACDG

CHAIRPERSONS
Dr. Binal D Shah
President Menopause Society, Vadodara
Dr. Bhairavi Joshi Vakhariya
Cosmetic Gynaecologist, Ahmedabad
Dr. Asha Bhatt
President, Menopause Society, Surat

4.30-5.30 pm - Discussion

SPEAKERS
Dr. Ragini Agrawal
VP FOGSI-2020, Founder Chair Aesthetic health committee - IMS, President IACDG

MODERATOR
Dr. Anjana Chauhan
Secretary IMS, Ahmedabad Chapter

TOPIC: Vulval Disorder (Non Neoplastic)

TOPIC: Vulval Cosmesis

5.30-6.30 pm - Panel Discussion

PANELISTS
Dr. Nikhil Parwate
Senior Consultant, Aditya Birla Memorial Hospital, Pune

Prof. N.Sundari
Senior Consultant M.S. Ramaiyah Hospital, Bangalore

Dr. Bhagyalaxmi Nayak
Chairperson Oncology Committee, FOGSI 2018-20

Dr. Dipti Patel
Sr. Gyao, Surat

Dr. Ashwini Bhalerao
P.D. Hinduja Hospital, Mumbai
Bhopal Menopause Society

- BMS celebrated Independence Day by having a get together.
- All members were dressed in colors of our flag. Programme started with a Quiz on theme of Independence Struggle
- Prizes won by 1st Dr Vinita, 2nd Dr Gore & 3rd Dr Shraddha
- We had a competition on self composed poems on deshbhakti and prizes won by 1st Dr Basanti, 2nd Dr Vaijaynti & 3rd Prize Dr Sandhya
- We all sang patriotic songs, solo and chorus.
1. **Healthy Aging Series** – 3 on 18th August 2021, on Oncological problems in the perimenopausal age group. We had 2 eminent guests of honour Prof. Hemanthraj, Executive vice chairman, Cancer Institute, Adyar and Prof. Begum Rokeya Anwar HOD – NICR & H, Dhaka- Bangladesh. Panel discussion with the experts was preceded by lectures. Newsletter with the Oncology theme was released during the session.

2. **Online awareness programme** – 11-08-2021. Health tips and know your MOM for Allied Health Sciences Students of Saveetha Medical College

3. **Public Awareness program on Mid life crisis for the staff of Sriperumbadur Pump Station**

4. **Chennai Menopause Society conducted the Quiz on Bone Health in Mid-life on the 30th August 2021, in the virtual mode.** 125 postgraduates registered from all over the state. Following a preliminary round, 20 students were selected for the second round and the top 5 were selected for the final round. At the end of the finals, Dr Yashaswi Pandey, DNB student from the Railways Hospital won the first place and will be representing the Chennai Menopause Society at the IMSCON 2021 @ Varanasi
1. International webinar on “Sexual Health in Midlife and beyond” was conducted on Saturday 4th September 2021. It was a well-attended program with several national and international speakers sharing their knowledge.

2. Free camp by CMS on 6th September to screen for Non-Communicable diseases among midlife women.

3. Know your body, know your MOM on 22nd September 2021, speaker meet with the Rotract club of Stella Maris College. Talk was delivered by the President Prof. Hepsibah Kirubamani.
Delhi Menopause Society

- Indian Menopause Society in collaboration with Society of Vaginal Surgeons of India and South Asian Federation of Obstetrics and Gynaecology have started with a series of Webinars titled “Tips and Tricks of Vaginal Surgery”.

- The first such event “Masterclass on Prolapse” was organised by IMS North Zone on 4th September 2021. The program was well attended by nearly 40 national and international faculty and 416 registrations.

- Stalwarts of Indian Vaginal Surgery Dr Shirish Sheth, Dr Hara Pattanaik, and Dr Vineet Mishra graced the occasion.

- President, Indian Menopause Society Dr Ambuja Choranur, Secretary General Dr Sudhaa Sharma and Vice President Dr Pushpa Sethi contributed actively and shared their pearls of wisdom.

- The organisers Dr. Sonal Bathla, Ex chair Rural committee IMS, Dr. Manoj Chellani, co-chair of Urogynae Committee, IMS and Dr Priti Arora Dhamija, Treasurer, IMS Delhi chapter made the program interactive by including lectures, video demonstrations of surgeries and panel discussion. SOVD President, Dr Shalini Rajaram, AOGD President, Dr. Achala Batra and Delhi IMS President, Dr. Meenakshi Ahuja provided their full support. Overall it was a very successful CME conducted with an aim to promote vaginal surgery which is cheaper, safer and associated with lesser morbidity and mortality.
Delhi Menopause Society

- **21st September 2021**
- Stalwarts like Dr Maninder Ahuja and Dr Sharda Jain graced the occasion and shared their pearls of wisdom. Dr Parag Biniwale, Vice Chairperson, ICOG and Dr Sonal Batla, Ex chair Rural Committee, IMS gave their expert opinions. Dr Meenakshi Ahuja, President IMS-Delhi chapter and Dr Jyoti Bhaskar, Secretary IMS-Delhi chapter took 2 very interesting talks on menopause. Dr Kiranjeet Kaur, Joint secretary IMS-Delhi chapter along with Dr Pooja Jain, Joint secretary, DGF -NW conducted a very interactive session on Menopausal Case scenarios. The whole program was well conducted and attended by 60 delegates.

- **30th September 2021**
I. 15-08-2021 Sunday Whatsapp Quiz
10 Participants
Dr. Aruna Chhaparia was the winner

II - Webinar on 31st August 2021
*Dear Colleagues and Friends*,
*Block your Date and Time*: *Tuesday, 31st August 2021*
*6:00 PM – 8:00 PM* for Live Webinar on *Chronic Pelvic Pain in Menopause* organised by *Gorakhpur Menopause Society* (GMS)

*Patron GMS* -
Dr. Reena Srivastava

*President GMS* -
Dr. Surheeta Karim

*Secretary GMS* -
Dr. Amrita Sarkari Jaipuria

*Session 1*– *An Overview of Chronic Pelvic Pain in Menopause*

*Chair Persons*
Dr. Radha Jina
Dr. Reena Srivastava

*Speaker*
Dr. C Ambuja

*Session 2*– *Orthopaedic Pain to be ruled out in Chronic Pelvic Pain in Menopause*

*Chair Person*
Dr. Anubha Gupta
Dr. Vikrant Agrawal

*Speaker*
Gorakhpur Obstetrics and Gynecological Society (GOGS) & Gorakhpur Menopause Society (GMS) cordially invite you for a Webinar on 27 September 2021.

**Theme: Contraception for All**

1. **Safe Contraception in Women With Medical Disorder**
   - **Speaker:** Dr. Geeta Gupta (Former Associate Prof, BDO, Medical College, Gorakhpur)
   - **Chairperson:** Dr. Pratibha Gupta (Consultant, GOGS, Gorakhpur)
   - **Chairperson:** Dr. Jyothi Singh (Associate Prof, BDO, Medical College, Gorakhpur)
   - **Moderator:** Dr. Shobha Shukla (Society, GOGS)

2. **Role of COC in Heavy Menstrual Bleeding**
   - **Speaker:** Dr. Archana Shukla (Associate Prof, BDO, Medical College, Gorakhpur)
   - **Chairperson:** Dr. Pratibha Gupta (Consultant, GOGS, Gorakhpur)
   - **Chairperson:** Dr. Vaishali Jhokha (Medical Officer, BDO, Medical College, Gorakhpur)
   - **Moderator:** Dr. Shobha Shukla (Society, GOGS)

**Panelists**
- Dr. Archana Shukla (Consultant, BDO, Medical College, Gorakhpur)
- Dr. Preeti Baby Singh (Assistant Prof, AIIMS, Gorakhpur)
- Dr. Prachi Verma (Assistant Prof, BDO, Medical College, Gorakhpur)
- Dr. Preeti Jyothi (Assistant Prof, AIIMS, Gorakhpur)
- Dr. Vidushi Singh (Assistant Prof, AIIMS, Gorakhpur)
Gurugram Menopause Society

Gurgaon Menopause Society
Organising a CME on Calcium in Menopause & Lifestyle Modifications With Age
on Wednesday 22nd September 2021
Hotel Hilton, Gurugram

Date: Friday 6th August, 2021
Timings: 3:30 pm to 5:30 pm

Kindly click on below link for joining.
https://npadotnmeetings.webex.com/npadotnmeetings/j.php?lnid=9750e042eb077925a2543c6d6c2e09f9035b5e

Meeting number (Access code) : 1460850429
Meeting password : 1234
Hyderabad Menopause Society

- Participated in South zone Zonal conference at Madurai. On 31st and 1st of Aug. Our Hyderabad team. Dr. Dhatri & Pratyusha won 1st and 2nd prizes in the free paper presentation. 2 lectures were given by Dy. Ambuja mam and Dr. Tripura and Dr. Sandhya etc. Spell bound Talk by Dr. Meeta in the conference was the highlight 😊 12th Aug. An exiting awareness programme was conducted, targeting youth. Young doctors, parents and teachers on life style diseases was conducted by Dr. Shanta kumari. 5th Aug. A webinar was conducted on contraception to elderly. Whic to choose, why and how. 15th Aug. Celebrated independence day with all pride and fun. 21st Aug. contraception webinar on 20th Sug on PETIME LOAUSAL BLEEDING- by Dr. Fahmeeda Baanu. Celebrated Lakshmi pooja with pride and pompus.

- Many webinars were conducted on perimenopausal bleeding and infertility in middle age. Conducted online PG Quiz competition. 98 PGs all over AP and Telangana participated. It was conducted in 2 rounds. Winners were given gynecology textbooks as prizes. Conducted awareness programmes on osteoporosis and nutrition in 3rd and 4th week of September.

- Happy to announce that our Hyderabad PGs bagged 1st & 2nd Prizes in south zone conference.

- 1st Prize- Dr. Pratyusha (PG Of Anupama) &
- 2nd Prize- Dr. Dhatri (PG of Tripura Sundari)
Jaipur Menopause Society

Indian Menopause Society and Jaipur Menopause Society
Agra Obs & Gynae Society
Club 35+ Public Awareness Committee

Presenting

EK SHAAM DESH KE NAAM
KAVI GEET SAMMELAN

On occasion of
INDEPENDENCE DAY
14th August, 2021
05:00 - 07:00 PM

Program Coordinators
Dr. Anil Gupta, Dr. Reena Jain, Dr. Shabana Sethia

Director of the Event
Dr. Suresh Sethia

Masters of Ceremony
Dr. Seema Singh, Dr. Kusum Soni

Chief Guests
Dr. Deepak Sethia, Dr. Radhika Jain

Guests of Honour
Dr. Surajit Chatterjee, Dr. Suresh Gandhi

Invited Poets
Shri Sudhakar Pandey, Shri Raju, Shri Tanju

Invited Singers
Dr. Gaurav Jain, Deopesh Gaurav Jain, Dr. Deepali Sethia

Invited Judges (Poems)
Dr. Ranu Pratap, Dr. Archana Shukla, Dr. Rajiv Raj

Invited Judges (Songs)
Dr. Anil Mehta, Dr. Rajeev Sethia

Poetic renditions by Dr. Ambuja, Dr. Sudha, Dr. Anjum Soni, Dr. Archana Shukla

Melodious Songs by Dr. Sunil, Dr. Rajprabha, Nishi Raj, Dr. Ranu Pratap, Dr. Ami Mehta

Enthralling poems full of patriotic fervour by Sri Sushil Saraf, Dr. Rajhuma Ranjan, Bhimika Jain

Mesmerising songs by our Guests Dr. Barun Sarkar, Dr. Dilip Soni, Dr. Gaurav, Deepshikha and Khushboo were an unforgettable experience

Great competing by Dr. Seema Singh, Dr. Ratna Sharma

Icing on the cake were the poems and songs of the poems and songs competition making us wonder about the hidden talents of our members

Sharing a few reminiscences of the programme
Arli Gupta, Neelam Jain, Shubha Sethia

WINNERS PATRIOTIC SONG COMETITION
CUB 35(INDIAN MENOPAUSE SOCIETY)

FIRST PRIZE
Mitra Parekh, Ahmedabad

SECOND PRIZE
Dr. Priya Sharma, Varanasi

THIRD PRIZE
Dr. Taruchans Banals, Jaipur

WINNERS PATRIOTIC POEM COMPETITION
CUB 35(INDIAN MENOPAUSE SOCIETY)

FIRST PRIZE
Kamini Khurana, Agra

SECOND PRIZE
Dr. Subhash Kovi, Gurgaon

THIRD PRIZE
Dr. Seema Marwaha, Jaipur

Consolation prizes (poems)
- Sheela Tandon (Noida)
- Ritu Arora (Varanasi)
- Shailesh Jain (Jaipur)
SAWAN CELEBRATION WITH CLUB 35+

- Date: 7th August, 2021
- Topic: Sawan Celebration with Club 35+
- Summary: A program on theme Sawan was organised for club 35+ members

A Motivational talk was given by Mrs. Preeti Kumar on Aesthetics of Lifestyle Management followed by a Game of Antakshari.
WEBINAR ON WOMEN’S HEALTH+

- Date: 7th August, 2021
- Topic: Webinar on Women’s Health
- Summary: A Hybrid Programme on Antiaging titled ‘Freeze your Age’ was organized focusing on Non Hormonal Antiaging therapies by Dr. Deepak Chaturvedi from Mumbai and Quality of Life After Hysterectomy by Dr. Ambuja Choranoor (President IMS) from Hyderabad.
Jabalpur Menopause Society

BONE MASS DENSITY CAMP

- **Date**: 4th September, 2021
- **Topic**: Bone Mass Density Camp & Teachers Day Celebration
- **Summary**: Jabalpur Menopause Society organised a Bone Mass Density Camp and Teachers Day Celebration for all Society members and members of Club 35+. All who had T Score less than -1 were given 50% discount on Dexa Scan.

The Camp was followed by a very Interesting and Rapid Fire Question Answer session by Club 35+ members with Renowned Othopedicians of Jabalpur Dr. Abhay Shrivastav (President Jabalpur Orthopedics Society), Dr. Jatin Dhirawani (Secretary Jabalpur Orthopaedic Society), Dr. Nachiket Pansey, Dr. Sparsh Nayak. Program was followed by High Tea.

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**Jabalpur Menopause Society invites Club 35+**

For a program on BONE HEALTH of our members

**OUR PROGRAM**

- **3pm to 4pm**: BMD check up & Issuing of Membership card
- **4pm to 5pm**: Rapid Fire - Question and Answer Round with Renowned Orthopedicians of Jabalpur
- **5pm to 6pm**: Teachers Day Celebrations: FELICITATION CEREMONY

**VENUE**: HOTEL GULZAR (Makamandir, Baj)

Timings - 3:00 - 6:00 pm (sharp)

R.S.V.P: Dr. Pragya Dhirawani (President, JMS), Dr. Archana Shrivastav (Secretary, JMS)
TEACHERS DAY CELEBRATION – TEACHERS FELICITATIONS
Jabalpur Menopause Society holds debate

Medical experts participating in the debate held by Jabalpur Menopausal Society.

Day. The teachers explained about the art of living. Those who attended the programme included Dr. Kavita Singh, Dr. Neena Shrivastava, Dr. Sandeep, Dr. Shankaran, Dr. Swaraj Naik, Dr. Chitra Sen, Dr. Roma Nag and others.

The programme was anchored by Dr. Richa Dhirawani.

[News clip regarding the events at Jabalpur Menopause Society]
NATIONAL POSHAN WEEK

- Date: 25th September, 2021
- Topic: National Poshan Saptaah at IMA House Jabalpur
- Summary: National Poshan Week is celebrated by Women's Doctors Wing and Mission Pink Health of Indian Medical Association, Jabalpur chapter.

- There is small discussion with dietician about myths and facts of dieting.
- Dietician and Doctors took part in the competition of dishes prepared which were high protein but of low cost.
KNOW YOUR MOTHER

The department of Obstetrics and gynecology GMC Kathua under the aegis of Jammu menopause society today organized an awareness lecture for the undergraduate students of 3rd semester. Prof Anil Mehta, head of the department and president Jammu menopause society, briefed the importance of menopausal health, its multidimensional impact on the overall wellbeing of a woman and the consequences of morbid menopause. In this interactive session students were told how to approach elderly women at home undergoing menopause /menopausal transition, remedies to cope with them and the facility of elderly women clinic at GMC Kathua which has been started especially for peri-menopausal and menopausal women. The students thoroughly enjoyed the interaction and came up with many queries and problems about the family members. The faculty of OBGY, GMC Kathua has decided to take awareness lectures for the elderly women of Kathua district and adjoining areas since a huge percentage of women need care related to menopausal health.
Jammu Menopause Society organized National CME on Scientific Writing & Paper Publication held on 27th September, 2021. Enthusiastic response of delegates in the CME made it very successful & we proudly share that 1036 delegates attended this CME. Thanks to eminent faculty also for their valuable & interesting presentations.
Kanpur Menopause Society

- Kanpur menopause society is pleased to inform that under leadership of Dr. Kiran Pandey - President Kanpur Menopause Society had conducted free cervical cancer awareness camp on 24th sep, 2021. 110 women participated....pap smear was taken and other midlife issues were taken care of. Free camp was conducted by Dr. Garima Gupta- Secretary KMS, Dr. Pavika Lal-Jt Sec KMS and Dr. Bandana Sharma.

- The camp was appreciated by all with good media coverage.
Kolkata Menopause Society

Forwarded

Kolkata Menopause Society organized a MHCC camp at Apanghar, P-57, Raghunathpur along with Inner Wheel Club on 1.8.2021 between 9.30 am to 11.00 am. 19 postmenopausal women were examined and free Hb, TSH, Blood Sugar and BMD was done. Eldest patient was 92 years old. We distributed free Iron, Calcium, Antacid, Laxative, Cough Syrups and what required by the patients. The Programme was a grand success.
organized a CME on “Update on POI” on 18th September, 2021 from 7.30 – 8.30 pm on a digital platform.

Dr Indira Mainam, HOD of Dept of Endocrinology, R G Kar Medical College, Kolkata spoke on “POI” and Dr Arnab Basak, Consultant, Gynae & Obs, Apollo Glenegles Hospital, Kolkata spoke on “Newer HRTs”. The Chairpersons for the session were Dr Jayanta Kuar Gupta and Dr Sudip Chakraborty.

This was followed by a Panel Discussion on “MHT – Bursting the Bubble: A Case Based Discussion” which was moderated by Dr Ratnabali Chakraborty, Past President, IMS, Chairperson, National Advocacy Committee, IMS and the panelists were Dr Pallab Gangopadhyay, Consultant Gynaecologist & Obstetrician and Dr Soumya Mukherjee, Asst. Professor, KPC Medical College, Kolkata.
Kolkata Menopause Society

Kolkata menopause society & Bengal obstetric & gynaecological society organised MHCC program on 3.9.21 at Matri Mangal Pratisthan. 228 Rabindra Sarani. Total no of patients 50. Free Hb, R sugar, TSH, BMD was done. Lipid Profile of 40 plus women was done. Programme was a grand success.
Lucknow Menopause Society

First Activity

- Lucknow Menopause Society organized a webinar and the Installation Ceremony of its office bearers on 19th of August, 2021, Thursday at 3.00 pm on zoom.

- The President of Indian Menopause Society Dr Ambuja Chorunar was the Chief Guest for the occasion.

- The President Elect IMS, Dr Shobhana Mohandas and Secretary General of IMS Dr Sudha Sharma were the Guests of Honour.

- The new team of office bearers of Lucknow Menopause Society – President Dr Yashodhara Pradeep, Vice President Dr Naini Tandon, Secretary Dr Asna Ashraf, Joint Secretary Dr Sangeeta Mehrotra and Treasurer Dr Amrit Gupta took over the charge from the outgoing team.
On this occasion the outgoing Secretary Dr Deepa Kapoor spoke about the achievements of her two tenures, first as Chapter Secretary and then as Secretary of Lucknow Menopause Society.

The outgoing President Dr Sharad Kumar invited the incoming President Dr Yashodhara Pradeep to take charge and introduce her team.

Dr Yashodhara spoke on her vision for the future activities of Lucknow Menopause Society.

Dr Ambuja Chorunar, Dr Sudha Sharma and Dr Shobhana Mohandas all congratulated the new team of office bearers of Lucknow Menopause Society.

The webinar also included a well chalked out scientific programme. The chairpersons for the first session were Dr Yashodhara Pradeep, Dr Sharad Kumar and Dr Deepa Kapoor.

Dr Ambuja Choranur spoke on Long term consequences of PCOS. Her talk was much appreciated.

This was followed by a panel discussion on “Urinary Problems and the Gynecologist”, which was moderated by Dr Shobhana Mohandas. The panelists were Dr. S.P. Jaiswar, Dr Sunita Chandra, Dr Saurabh Agarwal, Dr Renu Singh, Dr Sabuhi Quereshi and Dr Sumita Arora. The panel discussion was very interactive and gave new insights on the management of urinary problems in midlife women. The webinar was attended by 98 participants.
Lucknow Menopause Society

Second Activity

- Lucknow Menopause Society organized an **online Quiz on 15th September 2021 on the theme of Bone Health, Osteoporosis and Menopause** to select one candidate to represent Lucknow in the national Quiz at IMSCON 2021, Varanasi.

- There were **32 registrations** for the quiz from different medical colleges of Lucknow and 18 candidates finally qualified for the quiz. It was won by Dr Vallina Narang from King George Medical University who will be representing Lucknow at the IMSCON 2021.

- The Second Position was shared by Dr Aparajita, Dr Astha Gupta, and Dr Mehak.

- All three will get the Certificate of Second Position. The third Position was shared by 2 contestants Dr Akansha and Dr Ritu Rani.

- All participants will be receiving a certificate from Lucknow Menopause Society.
Installation ceremony of new team of Menopause Society Nagpur (2021-23), was held on 19th August 2021

Mrs Kanchantai Gadkari was chief guest at the occasion, Advocate Ketki Joshi and Dr Nirmala Vaze were the guest of honour. Dr Kshama Kedar was installed as the new President of Menopause Society Nagpur, and Dr Vidya Sutaone as Secretary, Dr Pragati Khalatkar as vice-president, Dr Bhakti Gurjar as treasurer and Dr Shantala Bhole as joint secretary.

The executive members are Dr Arti Wanjari, Dr Rujuta Fuke, Dr Mausami Tadas, Dr Prajakta Barde, Dr Sushma Deshmukh, Dr Surekha Khandagle, Dr Shilpi Sood, Dr Sheela Jain, Dr Trishala Dhemre, Dr Usha Wanjalkar, and Dr Vaidehi Marathe.

The Club 35+ (A public forum to disperse knowledge about menopause) was officially inaugurated by Respected Mrs Kanchan tai Gadkari, and she talked about importance of spreading awareness about menopausal problems. Advocate Ketki Joshi elaborated on some legal problems faced by women. Dr Nirmala Vaze(also the founder chapter secretary) talked about the initial years of the society. Dr Kshama Kedar talked about the agenda for the coming tenure.
- Club 35 + meeting was held on 7 September 2021, and was well attended, (by more than 50 participants)
- An introductory talk about 'Tackling Menopause' was given by Dr Kshama Kedar. Queries regarding menopause were answered by Dr Kshama Kedar
- Dr Shantala Bhole gave a talk on “Mental Gymnastics” replete with practical examples of how to develop new skills. Every one took active part in these “Brain games”
- Dr Asha Pugalia, was the Zumba instructor. Everyone in the audience joined the Zumba session wholeheartedly for 15 min
- It was a fun-filled evening and the talks and the games (mental gymnastics) were much appreciated by our club35+ members.
Under the patronage of Honourable Chairman Sh. Tarsem Garg, Respected Principal, Vice Principal, M.S and CEO sir, ‘Department of Obstetrics and Gynaecology, MMIMSR, Mullana (Deemed to be University) in association with SOGA/Patiala Menopausal Society & Aesthetic Committee IMS under aegis of FOGSI & IMS has graciously celebrated the ‘world breast feeding week’ from 1st August 2021 to 7th August 2021. Dr S Shantha Kumari, Dr C Ambuja being the chief guests and Dr Alpesh Gandhi, Dr Jignesh Shah being the guest of honours this event was a great success from the start.

On 2nd August 2021, A poster exhibition was conducted on the themes of breast feeding – mother’s pride for students of MM College Nursing college, Mullana. Theme of ‘Breast feeding for better child health’ was given to the MBBS 3rd prof students, MBBS interns, nursing students. A total of 282 creative posters were displayed all over the OPD and presented by students. This event was graced by Dr B K Agarwal, Dr Kiran Sodhi, Dr Jyothi Sareen and Dr A S Dhillon as judges.

On 3rd August 2021, A counselling session was conducted on exclusive breast feeding by Dr. Simmanjit Kaur (prof) and team in antenatal ward.

A poster presentation competition was conducted on Google meet on 3rd August(1-3PM). There were 2 categories for poster presentation; BREAST FEEDING and MISCELLANEOUS for the junior residents of Obs & gynae, Paediatrics, Medicine and other departments. Dr Ruby Bhatia, Dr Paramjit Kaur, Dr Gurdeep Kaur and Dr Anand Thawait were invited as judges for this session. A total of 22 junior residents from all the departments of MMIMSR presented posters online.

A webinar on Breast feeding -Health for all was conducted on Google meet on 4th August 2021. A total of 141 faculties and delegates attended the webinar. Starting with Saraswathi Vandana and welcome address it was followed by message from the honourable chief guest DR. S. SHANTHA KUMARI (PRESIDENT FOGSI) & DR. C. AMBUJA (PRESIDENT I.M.S). 6 sessions were held:

1. Breastfeeding for global health with Dr. Ruby Bhatia as speaker and Dr. Beant Singh and Dr. Lajya Goel as chairpersons.
2. Lactation pragmatic choice in present day crisis with Dr. Sandhya Dixit as speaker and Dr. Prabha Lal and Dr. Simmanjit Kaur as chairpersons.
3. Breastfeeding for better child health with Dr. Baljinder Kaur as speaker and Dr. A.K. Bhardwaj and Dr. A.S. Dhillon as chairpersons.
4. Breastfeeding and Nutrition with Dr. Savita Singhal as speaker and Dr. Ashi R. Sarin and Dr. Udit Narang as chairpersons.
5. Breastfeeding- long term benefits with Dr. Anupama Bahadur as speaker and Dr. J.B. Sharma and Dr. Santosh Minhas as chairpersons.
6. Breastfeeding and Contraception with Dr Ragini Aggarwal as speaker and Dr. Deepa Goel and Dr. Shashi Joshi as chairpersons.

On 5th August 2021 Essay writing competition was conducted for Residents, faculty and members of obstetrics and gynaecology, paediatrics, medicine among others on topic breastfeeding for global health.

The session was judged by Dr. Nishi Gupta, Dr. Anshul Mittal, Dr. Tajinder Kaur and Dr. Sukhbir Kaur.

On 6th August 2021 an Interactive session on Exclusive Breast feeding in postnatal wards was conducted by Dr. Tajinder Kaur and Team.

Finally, on 7th August prizes were announced.
E-POSTER CELEBRATION

**BREASTFEED- THE BEST FEED**

- Best form of nutrition
- Strengthens immune system
- Enhanced neurological development
- Reduced risk of osteoporosis, obesity, etc.

**Benefits for baby**

- Foods for baby: increases IQ, helps in learning, reduces obesity, and enhances growth and development.
- Benefits for mother: prevents breast cancer, reduces the risk of breast, ovarian, and uterine cancer, and reduces maternal mortality.

**Benefits for child**

- Protects child against infections, reduces risks of SIDS, and reduces the risk of developing diabetes, heart disease, and obesity.

**Benefits for family**

- Helps strengthen family bonds.
- Prevents postpartum depression.
- lowers the risk of breast and ovarian cancer in women.
- Reduces maternal stress.

**WHO 2021 THEME**

**PROTECT BREASTFEEDING: A SHARED RESPONSIBILITY**

- Encourages breastfeeding as the best form of nutrition.
- Promotes maternal and child health and well-being.
- Supports women and families in breastfeeding.

**Patiala Menopause Society**

- Public health programs have primarily focused on increasing breastfeeding duration and exclusivity without addressing the emotional expressions of breastfeeding.
- The emotional aspect of breastfeeding is critical as it helps women to connect with their babies, providing comfort and security.

**Postpartum Care**

- Postpartum care is crucial for the health of both the mother and the newborn.
- It includes assessments of physical and emotional well-being.
- Early detection of postpartum complications, such as postpartum depression, is essential.

**E-POSTER CELEBRATION**

- **Purpose and Impact**
  - Highlighting the importance of breastfeeding and its benefits.
  - Encouraging public health programs to focus on emotional support and breastfeeding duration.

- **Methods**
  - Interactive workshops and discussions.
  - Multimedia presentations.
  - Networking opportunities for health professionals.

- **Outcomes**
  - Increased awareness and support for breastfeeding.
  - Improved breastfeeding rates.
  - Enhanced emotional well-being during breastfeeding.

- **Future Directions**
  - Continued research and development of effective breastfeeding programs.
  - Collaboration with other organizations and communities to promote breastfeeding.

- **Conclusion**
  - Breastfeeding is a vital aspect of child health and well-being.
  - It requires a holistic approach that includes emotional and physical support.
  - Continuous efforts are needed to improve breastfeeding rates and support for mothers.
Results:
Poster Presentation:

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<th>Award</th>
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<td>Dr.Karishma</td>
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<td>2&lt;sup&gt;nd&lt;/sup&gt; Position</td>
<td>Dr.Disha</td>
<td>OBGY</td>
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<td>3&lt;sup&gt;rd&lt;/sup&gt; Position</td>
<td>Dr.Anshraj</td>
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<td>Consolation</td>
<td>Dr.Raghavendra</td>
<td>PEDIATRICS</td>
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<td>Miscellaneous Group</td>
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<td>Dr.Bhavika</td>
<td>OBGY</td>
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<td>Dr.Arshdeep</td>
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<td>3&lt;sup&gt;rd&lt;/sup&gt; Position</td>
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Poster Exhibition

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<td>Dr Riya Kalawat</td>
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<td>Dr Mehar Fatima</td>
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<td>Dr Shefali Chandal</td>
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<td>Dr Nikhil Gupta</td>
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<td>MBBS 2&lt;sup&gt;nd&lt;/sup&gt; PROFF</td>
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<td>Dr Geeteshwar Diwan</td>
<td>INTERN</td>
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<td>Kushboo</td>
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<td>4&lt;sup&gt;th&lt;/sup&gt; Position</td>
<td>Dr Pooja Kumari</td>
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<td>Dr Shiristii</td>
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Essay Writing Competition

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<td>3&lt;sup&gt;rd&lt;/sup&gt; Position</td>
<td>Dr Sashi Joshi</td>
<td>OBGY (OUTSIDE FACULTY)</td>
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<td>Dr Reena</td>
<td>OBGY</td>
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<tr>
<td>4&lt;sup&gt;th&lt;/sup&gt; Position</td>
<td>Dr Kartika</td>
<td>OBGY</td>
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Slogan Writing Competition

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<tr>
<th>Award</th>
<th>Name</th>
<th>Department</th>
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<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; position</td>
<td>Dr. Aishwarya Kanan</td>
<td>OBGY</td>
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<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt; position</td>
<td>Dr. Roohaniat Singh</td>
<td>OBGY</td>
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• MMIMSR, Mullana, Ambala, Haryana under Aegies of IMS, conducting a program with lectures of CANCER SCREENER IN PERIMENOPAUSAL WOMEN, COVID 19 VACCINATION, PRECAUTIONS FOR COVID-19 during covid 19 pandemic to celebrate monthly varisht mahila swastha shivir under aegis of IMS under MHCC on 11.09.2021 at 12:00pm in gynae OPD

• A total of 35 OPD patients attended and lecture was taken.

• 3 lectures were taken
  
  a) cancer screening in perimenopausal women: Dr. Ruby Bhatia Prof & HOD OBG.
  b) covid-19 vaccination : Dr. A.S. Dhillon (prof.)
  c) precautions for COVID-19: Dr. Tajinder Kaur (Prof.)

• venue- Obstetrics & Gynaecology OPD
- Dr Usha Didwania delivered talk --Menopause and daily routine----during awareness program in JD Women's College on 05-08-2021

- Program was well attended

- Organised a hybrid CME and installation ceremony of New office bearers on 05-09-2021

- Dr Shobhana Mohan Das gave an Exhaustive talk on Pelvic pain. Session was chaired by Dr C Ambuja President IMS and Dr Jignesh Shah Immidiate past President IMS.

- It was followed by installation ceremony of New team of office bearers 2021-23. The new team took over charges as
  - President --Dr Renu Rohtagi
  - Vice-president--Dr Neelam
  - Secretary-- Dr Nibha Mohan
  - Treasurer -- Dr Alka Pandey
  - Jt Secretary- Dr Nutan Narayan

**Working Committee members**
- Dr Rita Jha
- Dr Anjana Sinha
- Dr Poonam Lal
- Dr Minie Anand
- Dr Supriya Jaiswal
- Dr Amulya Singh
- Dr Vineeta

Dr Usha Didwania was declared as Patron PMS

Meeting was well attended physically by Office bearers and Executive Committee members and virually by many members.
Quiz competition for junior doctors at NMCH Obs Gynae dept on 06-09-2021.

10 candidates from PMCH NMCH AIIMS & IGIMS participated enthusiastically. Dr Priyanshu Bharti NMCH was declared winner who will be participating in IMESCON 2021 at Varanasi. 1st runner up was Dr Ujjwala (AIIMS) 2nd Runner up was Dr Shefali (PMCH)

Quiz was conducted successfully by Dr Renu Rohatgi Dr Anjana Sinha and Dr Nibha Mohan

PMS along with POGS organised an inspirational webinar on 08-08-2021 in gracious presence of IMS president Dr C Ambuja.

Swami Nirmalanand Saraswati from Bihar school of Yoga Munger gave a talk on Yogic management of Menopausal problems. Session was chaired by Padmashree Dr Shanti Roy and Dr Pramila Modi. Deliberation was highly appreciated by all.
Patna Menopause Society

- Organized a virtual CME on 26-09-2021. Excellent deliberation by eminent surgeon Dr A A Hai on Breast Lump - what a Gynaecologist should know. Session was chaired by Dr Shobha Chakraborty and Dr Renu Rohatgi President PMS. 1st session ended with Q&A. Sir happily cleared all the queries.

- Panel - Breast lump in Midlife women - case based discussion -- moderated by Dr Manisha Singh was highly appreciated when panellists were Dr Kumkum Sinha, Dr Saroj Singh, Dr Neelam, Dr Charu, Dr Pritanjali and Dr Mukta Agrawal.

- CME was well attended by many respected seniors and junior members.
Rajkot menopause society with rotary club of rajkot had organised an informative talk on food FACTS VS FADS" Busting myths associated with dieting " Speaker was very well known and famous dietitian from jamnagar Ms. Simi khanna on 07/08/2021 at rotary bhavan . Around 50 to 60 women participated and everyone got the right take home message. The event was appreciated by one and all.

Rajkot menopause society had organised fitness with fun programme in association with rotary club and women wing of IMA on 08/08/2021 with fitness partner Mr. Mulrajsinh of Mz fitness. Around 80-100 women were present. We started with bollywood fitness then zumba, yoga and followed by garba for whole one hour. Then we had different competition i.e. skipping, weight lifting and other different exercises. All winners were given prizes. The whole event was well appreciated and enjoyed by one and all.
Rajkot Menopause Society

- Rajkot menopause society along with rotary Club organized awareness programme on "Perimenopausal symptoms". Dr. Ami mehta delivered an excellent lecture and around 30 Ladies applauded our efforts.

- Rajkot menopause society president Dr. Ami mehta along with kundariya foundation have done mega cervical vaccination camp in month of July and August. Total 1080 girls were vaccinated. They all were educated about menstrual hygiene and made aware about adolescent problems by our members.

Rajkot menopause society members wrote wonderful articles -

- Dr. Ami mehta - sugar
- Dr. Manisha moteria - water
- Dr. Lata jethvani - milk
- Dr. Jigna ganatra - oil
- Dr. Krupali bhatra - salt

All these articles were accepted by IMS magazine 'poise' and will be published soon.
Celebrating birthday of our prime minister Narendra Modi BJP had organized state wise pap smear camps. In rajkot our 3 members of RMS had participated in this mega event:

- Dr. Ami mehta
- Dr. Hina popat
- Dr. Shaily modi

Around 40-50 per hospital pap smears were done and all smears were sent to GCRI onco center.

This programme had many benefits

- It provided mass screening to all needy patients at free of cost.
- It also made women aware about this deadly cancer
- It made world record also around 8000 women were screened in 178 words between 2 pm to 5 pm across Gujarat.
Raipur Menopause Society

Quiz

Theme: Bone Health & Postmenopausal Osteoporosis

Eligibility Criteria:
- Final Graduate and Gynaec who have completed Final Graduate within 5 years of the date of Quiz.
- Quiz will be held in Google Form.
- First Winner will be eligible to take part in National IMS Quiz which will be held in Varanasi.
- Travel Train Ticket 3rd AC will be provided to the candidate.

Calcium requirement during Menopause & beyond

Sunday, 5th September
3 PM (IST)

We Talk... Do You?

www.puberty2menopause.com
Dear Sir/Madam,

As part of Danone Nutricia’s commitment & belief in the importance of Scientific Education, it is our pleasure to invite you to attend our scientific session

INVITATION

Date: 26th SEP, Wednesday | Time: 2:30 PM TO 3:30 PM

https://invitations.danone.com/meetwlabina.org

TOPIC – PCOS - Clinical And Nutritional Perspective

DR. BINAL D SHAH, M.D.(OGG) Gold Medalist
DWARKEHSH HOSPITAL BARODA
GUJARAT

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Request to all Presidents & Chapter Secretaries to encourage your Members to visit The IMS Website: www.indianmenopausesociety.org

- Please send brief report of your activities with 3-4 good Pics to activityims@gmail.com

- Please send Membership Form and Message regarding Membership to Mail ID imsmemberships@gmail.com

- Mail ID for General Communication and Messages to IMS indianmenopausesociety2020@gmail.com

- Mail ID for Any Financial Communication and Messages to IMS Finance Committee indianmenopausesocietyfinances@gmail.com

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