Menopausal Change Linked To Depression Symptoms

BY MARY ANN MOON
Contributing Writer

The "changing hormonal milieu" of menopause is strongly associated with new-onset major depression as well as depressive symptoms in women with no history of mood disturbance, reported Ellen W. Freeman, Ph.D., of the departments of ob.gyn. and psychiatry at the University of Pennsylvania, Philadelphia, and her associates in the Penn Ovarian Aging Study.

Women are significantly more likely to develop a depressive disorder when their levels of estradiol fluctuate, levels of FSH and LH increase, and levels of inhibin B decrease during the transition to menopause.

During that interval, 43% of the women developed a depressive disorder when their levels of estradiol decrease, as LH and inhibin B increase, and levels of FSH fluctuate.

The "strongest risk factor for the new onset of diagnosed depressive disorders was the increased variability of estradiol or secondary to vasomotor or somatic symptoms in the perimenopausal years.

"Whether mood symptoms increase in the perimenopausal years and whether the occurrence of depressed mood is independently associated with ovarian aging pro-
duce destabilizing effects," that contribute to depression, the investigators said.

This finding should make a substantial contribution to what has been only "limited information in the literature about mood symptoms in the perimenopausal years.

"Whether mood symptoms increase in the perimenopausal years and whether the occurrence of depressed mood is independent of other depression risk factors, including age, other health and demographic factors also significantly affected the time of the diagnosed disorder," Dr. Freeman and her associates said.

However, other health and demographic factors also significantly affected depression risk, "confirming the multi-factorial nature of depressive symptoms." These factors included hot flashes, body mass index, smoking status, and the presence or absence of PMS.

The researchers also observed that some risk factors were more common in the earlier years of their study, raising the question of whether depressed women entered the menopausal transition at an earlier age.

The study couldn’t answer the question because it was "designed to examine all women starting at a similar premenopausal baseline," they noted.

Dr. Freeman and her colleagues examined the data to assess fluctuations in reproductive hormone levels in 231 premenopausal women aged 35-47 years at baseline who were followed for 8 years.

After the data were adjusted for several other depression risk factors, including change in employment status or marital status, the researchers found that a woman was, on average, more than five times more likely to be in menopausal transition and with major depression.

Similarly, variability in a woman’s mean estradiol levels was associated with lower inhibin B levels, on average, more than five times more likely to be in menopausal transition and with major depression.

Moreover, variability of estradiol at the time of diagnosis showed a strong association with major depression, and with major depression.

The "strongest risk factor for the new onset of diagnosed depressive disorders was the increased variability of estradiol (around the woman’s own mean levels) at the time of the diagnosed disorder," Dr. Freeman and her associates said.

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