

## CeMCOR Peri-P participant post #1 **Progesterone is beneficial for Perimenopausal Hot Flushes and Night Sweats**

### ***We did it!***

We completed the first ever perimenopause trial to look at hot flushes and night sweats. We showed that 300 mg of oral micronized progesterone at bedtime is likely to improve night sweats and daytime hot flushes. See this press release by the international Endocrine Society after I presented the results [link to PDF].

Thank you so much for your participation in this important study. Without your willingness to keep the “diary” or “calendar” daily for four months and complete the other questionnaires, we couldn’t have done this study. You have helped a lot of women.

### ***What did we learn?***

The number and intensity of daytime hot flushes and night sweats during sleep decreased over the three months for most women whether they were taking the oral micronized progesterone or the identical placebo (dummy pill). Although the hot flushes and night sweats decreased more on progesterone than on placebo, this result was not quite statistically significant.

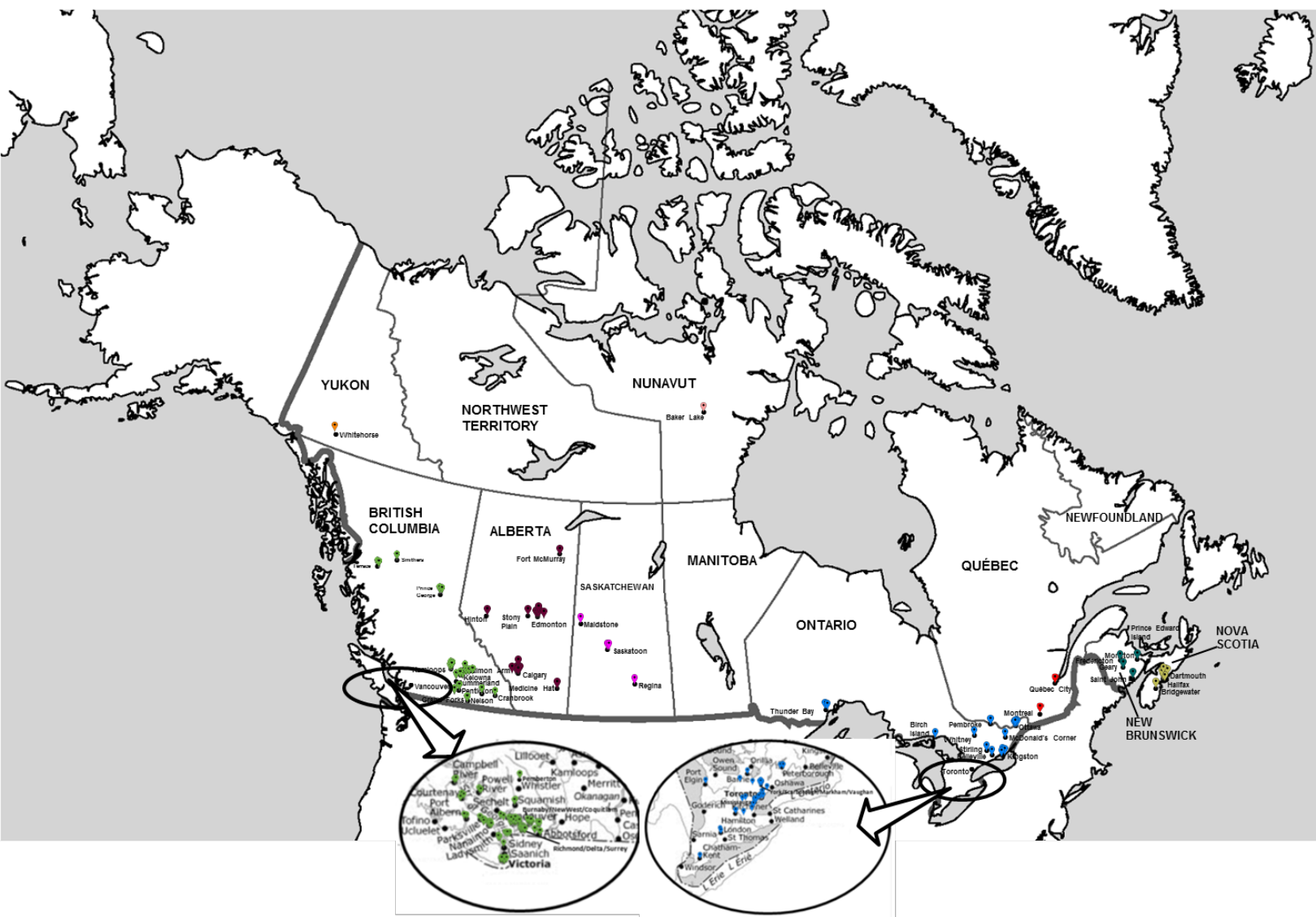
However, at the end of the study we asked you to tell us how you thought overall night sweats changed (better by -5, the same = 0, or worse up to +5). Those of you on progesterone reported that the night sweats decreased to much lower than they decreased for those on placebo. This result was highly significant. You felt that the number of night sweats decreased importantly and their intensity (or sweatiness) decreased highly significantly. Daytime intensity also significantly decreased. Thus progesterone is likely effective especially for perimenopausal night sweats.

### ***Who participated in this study?***

The Canadian Institutes for Health Research funded this study of women in the Metro Vancouver region. However, we couldn’t find enough of you who were able to participate—Andrea and I worked very hard over at least a year. At that time, participating involved getting to Vancouver General Hospital to meet with us three times over four months. Initially also, Health Canada required everyone have a normal mammogram in the last year and a normal physician’s breast exam.

We figured that perimenopausal women were simply too busy to participate during their working day. Therefore we made it possible for women to join working in their own time (without travel, appointments or leaving home—wherever they were in Canada). (Eventually we persuaded Health Canada that only those with a personal or family breast cancer history needed that difficult-to-organize breast screening).

This map shows where all 189 of you participants live:



As you can see—you live in seven of the ten Canadian provinces and in two of three territories—from the Pacific to the Atlantic to the Arctic Ocean.

You are young middle aged women ages 35-58 years with an average of 49.9 years old. Your average weight was in the overweight range, two thirds of you had already skipped at least one period and 93% of you participated remotely. Most participants were white but three percent reported being of Chinese origin; 57% had a university degree. However, the one thing almost all shared was waking at least two nights a week with night sweats. Less than four percent of you smoked.