### SEXUAL MEDICINE

## The Women's EMPOWER Survey: Women's Knowledge and Awareness of Treatment Options for Vulvar and Vaginal Atrophy Remains Inadequate



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#### **ABSTRACT**

**Introduction:** Postmenopausal women's knowledge about vulvar and vaginal atrophy (VVA) and available treatment options has historically been inadequate. Recent direct-to-consumer marketing and educational efforts would have been expected to increase awareness and treatment options.

**Aim:** To compare results of the Women's EMPOWER survey with other available VVA surveys to assess progress in women's understanding and approaches to treatment of VVA.

**Methods:** The Women's EMPOWER survey, an internet-based survey of US women with VVA symptoms, assessed women's awareness of VVA and their behaviors and attitudes associated with symptom treatment.

Main Outcome Measures: These survey results were compared with previously published results of the Revealing Vaginal Effects at Mid-Life (REVEAL), Women's Voices in Menopause (WVM), Vaginal Health: Insight, Views, & Attitudes (VIVA), Clarifying Vaginal Atrophy's Impact on Sex and Relationship (CLOSER), and Real Women's Views of Treatment Options for Menopausal Vaginal Changes (REVIVE) surveys.

Results: Results of the Women's EMPOWER survey were consistent with those of past VVA surveys and showed that postmenopausal women generally failed to recognize VVA and its chronic, progressive process and that they were reluctant to discuss vaginal or sexual symptoms with their health care professionals (HCPs). However, women indicated a strong desire for accurate medical information about VVA from their health care professionals and a willingness to learn if HCPs would initiate the conversation. Most women believed that vaginal symptoms are a normal part of aging and they just need to cope with the symptoms. In the United States, women were most concerned with safety-related issues, including increased risk of breast cancer, side effects, and systemic absorption.

Conclusion: The Women's EMPOWER survey demonstrates and reinforces that even with multimedia marketing and educational strategies in the years after other major VVA surveys, minimal progress has been made toward increasing women's awareness of, knowledge about, or understanding of VVA. Based on these data, a focus on initiating discussions and education with postmenopausal women so that they better comprehend VVA as a chronic progressive medical condition (not just aging), the symptoms associated with VVA, and the benefit-risk profile regarding treatment options is warranted. Krychman M, Graham S, Bernick B, et al. The Women's EMPOWER Survey: Women's Knowledge and Awareness of Treatment Options for Vulvar and Vaginal Atrophy Remains Inadequate. J Sex Med 2017;14:425–433.

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Key Words: Attitudes; Knowledge; Menopause; Review; Survey; Vulvar and Vaginal Atrophy

#### INTRODUCTION

During the menopause transition, loss of estrogen results in the thinning, drying, and loss of elasticity and pliability of the vaginal mucosal epithelium, resulting in vulvar and vaginal atrophy (VVA), a component of the genitourinary syndrome of menopause. Women with VVA can experience vulvar, vaginal, and clitoral symptoms, including dryness, irritation, and itching; sexually related problems, including dyspareunia; and recurrent urinary tract infections and dysuria. <sup>2–5</sup> In the United States

Received October 25, 2016. Accepted January 16, 2017.

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http://dx.doi.org/10.1016/j.jsxm.2017.01.011

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alone, 70 million women at least 40 years old were estimated to be living in 2015<sup>6</sup> and up to two thirds of them would be likely to experience menopausal-related VVA.<sup>7,8</sup>

Postmenopausal women's knowledge about VVA, symptoms, and available treatment options has historically been low, as reported from several surveys. 3,4,9–14 Barriers to treatment include the reluctance to speak with health care professionals (HCPs) about vaginal symptoms, safety concerns of hormone therapies (HT), inconvenience of treatment methods, and inadequate symptom relief from currently available treatments. 13,14 In recent years, there has been an increase in direct-to-consumer marketing and educational efforts in the hopes of increasing women's understanding of VVA and awareness of treatment options. 15–17

#### **AIM**

The aim of this study was to compare the results of the Women's EMPOWER survey, which surveyed women with at least one VVA symptom, with previously published surveys related to VVA to assess any progress in women's understanding and approaches to treatment of VVA.

#### **METHODS**

The Women's EMPOWER survey, an internet-based survey of US women at least 45 years old with symptoms of VVA, assessed women's awareness of VVA and their behaviors and attitudes associated with treatment of symptoms (Table 1). Details of the survey are described in our companion article. Briefly, the Women's EMPOWER survey was designed and administered by Rose Research (Boca Raton, FL, USA) and was commissioned by TherapeuticsMD (Boca Raton, FL, USA). The survey was sent to women participating in the Lightspeed Global Market Insite (Boca Raton, FL, USA) panels, an institutional review board—approved panel source, which is expressly used for conducting marketing research. Participants signed a formal confidentiality agreement and are protected by the Rose Research privacy policy. 18

The results of the Women's EMPOWER survey were compared with those of the most recent major surveys (Table 1) in evaluating knowledge, behavior, and attitudes associated with VVA. 18 These surveys, which were sponsored by pharmaceutical companies, include Revealing Vaginal Effects at Mid-Life (REVEAL), Women's Voices in the Menopause (WVM), Vaginal Health: Insight, Views, & Attitudes (VIVA; international [INT]<sup>4</sup> and US<sup>10</sup> surveys), Clarifying Vaginal Atrophy's Impact on Sex and Relationship (CLOSER; European Union [EU]<sup>11</sup> and North American [NA]<sup>12</sup> surveys), and Real Women's Views of Treatment Options for Menopausal Vaginal Changes (REVIVE; US<sup>13</sup> and EU<sup>14</sup> surveys) surveys. Because different surveys covered different topics and questions on similar topics were asked differently among surveys, comparisons between the Women's EMPOWER survey and the other surveys were performed as practically as possible and whenever possible.

#### MAIN OUTCOME MEASURES

Results from the Women's EMPOWER survey were descriptively compared and contrasted with the results of other surveys that evaluated women's perception, attitudes, and knowledge of VVA symptoms and available treatments.

#### **RESULTS**

#### Prevalence of Vulvar and Vaginal Symptoms

In the US and international surveys of postmenopausal women, vulvar and vaginal symptoms occurred in 39% to 51% of women 3,4,9,10 and 55% to 62% of women who experienced vaginal symptoms had moderate-to-severe symptoms. 3,4,10,18 Across surveys of those who reported VVA symptoms, the most commonly reported menopause-related vulvar and vaginal symptoms were vaginal dryness, dyspareunia, and vaginal itching or irritation (Figure 1). 4,10,13,14,18 In the Women's EMPOWER survey, 77% of respondents had vaginal itching or irritation, which is higher than that reported in the VIVA and REVIVE surveys (26%-37%). Other reported vaginal symptoms included soreness, burning, and pain when touching the vagina. 4,11 In the REVIVE-US13 and Women's EMPOWER<sup>18</sup> surveys, vaginal itching or irritation was the first symptom to occur and vaginal dryness was the last vaginal symptom to occur.

# Many Women Were Not Aware That Their Symptoms Were Associated With Menopause or VVA

Approximately 40% of women associated vaginal symptoms with menopause (Figure 2A), 4,10,13,14 although in the REVEAL, 82% and 57% of women were aware that vaginal dryness and dyspareunia were menopausal symptoms, respectively.9 Furthermore, women in the EU were more aware of this than women in the US as reported by the REVIVE surveys. 13,14 Much fewer, but slightly more, women in the Women's EMPOWER survey reported being aware that VVA was a medical condition than women in the VIVA surveys (19% vs 4–10%; Figure 2B). 4,10,18 In contrast, 38% to 53% (Figure 2B) of women in the REVIVE surveys were specifically aware of VVA, and although all had symptoms of VVA, only 9% to 16% of women surveyed recalled receiving a formal VVA diagnosis. 13,14 In the VIVA surveys, 43% of US10 and 63% of international<sup>4</sup> women failed to recognize that vaginal discomfort is a chronic condition requiring treatment of the underlying cause.

## Most HCPs Do Not Initiate Dialogue With Their Patients on VVA Symptoms

In the Women's EMPOWER survey, less than half the women (44%) had discussed their vaginal symptoms with their HCP (Figure 3).<sup>18</sup> This is somewhat lower than what has been reported in other surveys, where 54% to 67% of women spoke to

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