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Original Article

Relationship between alcohol consumption and age at menopause: The Korea National Health and Nutrition Examination Survey



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ARTICLE INFO ABSTRACT Article history: Objective: We used data from the 2011–2014 Korean National Health and Nutrition Examination Surveys Accepted 5 May 2017 (KNHANES) to investigate whether the age at menopause is related to alcohol consumption in South Korean women. Keywords: Materials and methods: This was a cross-sectional study of the data for 940 women who became Alcohol menopausal within the 3 years preceding the KNHANES. KNHANES Results: The numbers of nondrinkers, mild to moderate drinkers, and heavy drinkers in this group were Menopause 345 (34.7%), 573 (62.2%), and 22 (3%). Body mass index (BMI), smoking, and exercise were adjusted in model 1 and age was additionally adjusted in model 2. The mean ages at menopause were 51.6 \pm 0.2, 50.8 ± 0.1 , and 50.4 ± 0.5 years (p = 0.0025) in model 1 and 51.7 ± 0.2 , 51.1 ± 0.1 , and 50.1 ± 0.5 years (p = 0.0018) in model 2 for nondrinkers, mild to moderate drinkers, and heavy drinkers, respectively. BMI, smoking, exercise, educational level, income, duration of menopause, age at menarche, age at first delivery, and gravidity were adjusted in model 3, and the respective mean ages at menopause were 51.3 \pm 0.2, 50.7 \pm 0.2, and 50.1 \pm 0.8 years (p = 0.0402). The population was classified into groups using the Alcohol Use Disorders Identification Test (AUDIT) scores of <5 (n = 778), <10 (n = 108), and ≥ 10 score (n = 54). The mean ages at menopause according to AUDIT score were 51.3 \pm 0.1, 50.5 \pm 0.3, and 50.4 ± 0.4 years (p = 0.0222, model 1), 51.4 ± 0.1 , 50.8 ± 0.3 , and 50.8 ± 0.3 years (p = 0.0261, model 2), and 51.1 \pm 0.1, 50.6 \pm 0.4, and 49.5 \pm 0.6 years (p = 0.0241, model 3) respectively. Conclusion: In Korean women, alcohol consumption was associated with younger age at menopause. A higher AUDIT score was also related to younger age at menopause. © 2017 Taiwan Association of Obstetrics & Gynecology. Publishing services by Elsevier B.V. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Introduction

Natural menopause is commonly defined as the time when a woman has experienced 12 consecutive months of amenorrhea that is not related to any surgical or drug treatment [1-3]. The average age at natural menopause has consistently been estimated at between 50 and 51 years [2,4,5]. Menopause increases the risk of many chronic health problems. An early decline in estrogen production can translate into a substantially greater risk of osteoporosis, obesity, cardiovascular disease, and earlier onset of

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Alzheimer's disease [6–9]. At the population level, earlier onset of menopause may also lead to greater demand for medical care and an earlier start for hormone therapy. These may increase the financial burden and the risk of breast cancer.

It is thought that genetic factors determine the age at menopause for about 50% of women [10]. However, in addition to genetic factors, many other factors have been investigated in relation to the age of menopause, including obesity, parity, age at menarche, pattern of menstrual cycles, smoking, socioeconomic level, alcohol intake, educational level, diet, marital state, and use of contraceptives [11–13]. The associations between these factors and age at menopause are inconsistent between studies [14].

Information about the potential effects of alcohol is less clear because of the diversity of alcoholic consumption and the difficulty in determining a threshold consumption frequency. Chronic alcohol abuse is one risk factor for osteoporosis, and the World

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Cancer Research Fund/American Institute for Cancer Research has estimated that >40% of postmenopausal breast cancer could be prevented by reductions in alcohol, excess body weight, and physical inactivity [15,16]. Increased alcohol consumption is reported to have a broad range of detrimental systemic effects. However, there are few studies of the association between age at menopause and alcohol consumption. In this study, we used the data from Korean National Health and Nutrition Examination Surveys (KNHANES) to examine whether there is a relationship between alcohol consumption and age at menopause in Korean women.

Materials and methods

This study was based on data collected during the 2011-2014 KNHANES, which has been conducted since 1998 by the Division of Chronic Disease Surveillance under the Korea Centers for Disease Control and Prevention. KNHANES is a population-based crosssectional survey designed to assess the health-related behavior, health condition, and nutritional state of Koreans (http://knhanes. cdc.go.kr/) [17]. A field survey team that included doctors and nurse examiners traveled with a mobile examination unit and performed interviews and physical examinations. The survey comprised a health interview, nutritional survey, and health examination survey. The survey collected data by household interviews and by direct standardized physical examinations conducted in specially equipped mobile examination centers. During 2011–2014. 33.552 noninstitutionalized South Korean people participated in KNHANES. Among the 33,552 participants. 18,291 were women and 5799 of these female participants were in the menopausal state. We chose 940 women of the 5560 menopausal women, minus 239 who did not complete the examination surveys, who had become menopausal within the preceding 3 years for blocking the bias from inaccurate memories.

Data regarding age, smoking history, exercise, place of residence, marital status, occupation, educational level, household income, number of pregnancies, duration of menopause, age at menarche, and age at first and last delivery were collected during the health interview. During the physical examination, height, weight, and waist circumference were measured. Standing height was measured with the subject facing directly forward with the shoes off, feet together, arms by the sides, and the heels, buttocks, and upper back in contact with the well. Waist circumference was measured to the nearest 0.1 cm at the midpoint between the iliac crest and the costal margin at the end of a normal expiration. Body mass index (BMI) was calculated as weight (kg) divided by height squared (m²). Written informed consent was obtained from all participants before the survey, and approval for this study was obtained from the Institutional Review Board of the Catholic University of Korea, Bucheon, Korea, Menopause was defined by health interview as having no menstruation during the past 12 months. Smoking history was categorized into the two groups: current or ex-smoker and nonsmoker.

The subjects were classified into three groups according to the amount of alcohol consumed per day in the month before the interview: nondrinkers, mild to moderate drinkers (<30 g/day), and heavy drinkers (\geq 30 g/day). The population was classified into three levels according to the score on the Alcohol Use Disorders Identification Test (AUDIT): 0–4, 5–9, \geq 10. High-risk drinking was defined as drinking \geq 5 cups or glasses of beer, wine, or hard liquor during one session. Individuals with a household income in the lowest quartile were designated as the low-income group. The educational level was classified as low if the respondent did not finish education beyond middle school (i.e., beyond ninth grade). Regular exercise was defined as strenuous physical activity

performed for at least 20 min at a time at least three times per week. Data regarding gravidity was only collected during 2011–2013.

Statistical analyses were performed using the SAS survey procedure (ver. 9.3; SAS Institute, Cary, NC) to reflect the complex sampling design and sampling weights of the KNHANES, and to provide nationally representative prevalence estimates. The procedures included unequal probabilities of selection, oversampling, and nonresponse. Participant characteristics were described by using means ± standard error (SE) for continuous variables, and percentages and SE for categorical variables. For each variable, analysis of variance was used to analyze the association with age at menopause. Analysis of covariance was used to examine the association between drinking habit and age at menopause. We first adjusted for BMI, smoking, and exercise (model 1), and then adjusted for age, BMI, smoking, and exercise (model 2), and BMI, smoking, exercise, educational level, income, duration of menopause, age at menarche, age at first delivery, and gravidity (model 3). The *p* values were two-tailed, and p < 0.05 was considered significant.

Results

The mean age of the 940 menopausal women was 52.6 \pm 0.1 vears, and 841 (86.1%) were older than 50 years. Two hundred ninety-nine women (32.3%) had a BMI ≥25 and 425 (44.5%) had a waist circumference \geq 80 cm. All of the women included in this study had experienced menopause within 3 years of the study, and the mean duration of menopause was 1.55 ± 0.04 years. The baseline characteristics of the study population are shown in Table 1. An older age at menopause was related to a waist circumference \geq 80 cm (*p* = 0.0073) and a BMI \geq 25 (*p* = 0.0164) (Table 2). Women who worked had a younger age at menopause compared with those who did not work (p = 0.0235). Women with a middle school or lower educational level (p < 0.0001) had an older age at menopause. The number of pregnancies was related to the age at menopause (p = 0.0093). Age at menopause was not related to smoking, exercise, place of residence, or living with one's spouse.

Greater consumption of alcohol was related to a younger age at menopause (Table 3). A higher AUDIT score was also related to a younger age at menopause. A significant effect of age at menopause classified according to alcohol consumption was found in three models. Model 1 was adjusted for BMI, smoking, and exercise (p = 0.0025), model 2 was adjusted for age, BMI, smoking, and exercise, educational level, income, duration of menopause, age at menorche, age at first delivery, and gravidity (p = 0.0402). The age at menopause did not differ significantly between the high-risk and non-high-risk drinking groups.

Table 1

Baseline characteristics of the study population (n = 940).

Characteristics	Mean or Percentage \pm SE
Age (y)	52.6 ± 0.1
BMI (kg/m ²)	23.9 ± 0.1
Waist circumference (cm)	79.6 ± 0.4
Age at menarche (y)	15.4 ± 0.1
Age at first delivery (y)	25 ± 0.1
Age at menopause (y)	51.1 ± 0.1
Duration of menopause (y)	1.55 ± 0.04
0 (%)	19.2 (1.6)
1 (%)	29.2 (1.8)
2 (%)	29.4 (1.7)
3 (%)	22.2 (1.7)

BMI = body mass index.

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