

The American College of Obstetricians and Gynecologists WOMEN'S HEALTH CARE PHYSICIANS

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ACOG Testimony Regarding HB 3064 Perimenopause, Menopause, and Postmenopause Treatments

Chair Nosse, Vice Chairs Nelson and Javadi, and members of the committee,

My name is Julia Barnes, MD, FACOG, and I am a physician licensed in obstetrics and gynecology. On behalf of myself, my patients, and the 712 practicing ob-gyns of the Oregon Section of ACOG, I would like to express our support for HB 3064, regarding insurance coverage for perimenopause, menopause, and postmenopause medication treatments.

The average age of menopause, which is defined as the natural cessation of menstrual periods and is confirmed after a full year without menstrual periods, in the United States is 51, but women reach menopause at different ages, and menopausal symptoms can occur several years before (a period known as perimenopause) and several years after (a period known as postmenopause) the actual cessation of menstruation. Symptoms include hot flashes, night sweats, poor sleep, mood swings and irritability, and vaginal dryness resulting in painful intercourse. Women also frequently have complaints of joint pain, fatigue, and brain fog. These symptoms can be debilitating and significantly affect work and family life. Options for treatment of these symptoms include hormonal replacement in the form of estrogen for those without a uterus or estrogen and progesterone for those with a uterus. Vaginal estrogen can also provide relief from the symptoms of painful intercourse and the thinning of vaginal tissue and may help prevent recurring urinary tract infections. For some women, SSRIs may also be a valuable tool to help with symptoms.

Although there are some women who cannot take hormone replacement therapy (HRT), for most women it is safe and effective. Prescribing HRT

involves a conversation with the patient discussing risks and benefits of HRT and determining what options may be best for them. The benefits of HRT include resolution of hot flashes and night sweats, mood stabilization, and improved vaginal health. Other benefits include improvement in bone health and a decreased risk of colon cancer and cardiovascular disease if started within 10 years of menopause. Risks of HRT include increased chances of breast cancer (primarily with the estrogen and progesterone option), stroke, and blood clots. Balancing the risks and benefits includes a discussion between ob-gyn and patient to determine the best treatment for them. This treatment can be instrumental in providing women resolution of difficult symptoms and allowing them to flourish as they age.

I would ask on behalf of the Oregon Section of ACOG that you support HB 3064 allowing perimenopausal, menopausal, postmenopausal treatment to be covered by insurance.

Thank you for the opportunity to testify.