

**Dr. Stanley Birge, dementia expert, offers evidence that estrogen replacement started promptly at the onset of menopause prevents dementia.
 (“WHIMS” is the dementia study within the Women’s Health Initiative)**

Comment. Can we reconcile the results from WHIMS with the consistent and compelling observational studies of the past decade that have demonstrated a dramatic reduction in the risk of Alzheimer’s disease (AD) in women who have used postmenopausal hormone therapy (HT)? From these observational studies, we have learned that it is the past user, the woman who initiates HT at the time of the menopausal transition, who experiences a slowing of the rate of age-related cognitive decline and a reduction in her risk of developing AD. In the Cache County Study, [Zandi *JAMA* 2002] past users of HT for more than 10 years experienced an 83% reduction in their risk of AD. In contrast, current users? women who initiated HT after age 60 and continued for 3 to 10 years? experienced a 112% increase in their risk of AD. This compares with the 105% increase observed in WHIMS in women initiating HT after age 65. Once again, observational studies reliably predict the results of clinical trials. WHIMS and ongoing and future clinical trials will not be able to answer the question of whether HT can reduce the risk of AD because the window of opportunity to have a significant impact on a woman’s lifetime risk of AD may be limited to the menopausal transition. Unfortunately, as we continue to debate this question, the opportunity for millions of perimenopausal women to prevent the development of this devastating disorder in their lifetime may be lost.

Stanley J. Birge, MD
Associate Professor of Medicine
Director, Older Adult Health Center
Washington University School of Medicine
St. Louis, MO

Comment: Dementia due to Alzheimer’s disease (AD) and other disorders is an