Menopause and diabetes

Diabetes mellitus is a common endocrine disorder characterized by insulin deficiency and/or resistance (type 2) and resulting in hyperglycemia.

Diabetes in women
- Both type 1 and type 2 diabetes carry an increased risk of cardiovascular disease.
- Type 1 diabetes, which may start in childhood, is associated with an increased risk of premature ovarian failure and osteoporosis.
- The risk of type 2 diabetes increases at midlife in women.
- Risk factors for type 2 diabetes include advancing age, increased total and central adiposity, and decreased physical activity.
- A healthy diet, regular physical activity, maintaining a normal body weight and stopping smoking may prevent or delay the onset of type 2 diabetes.
- Gestational diabetes occurs in pregnancy and may increase the risk of developing type 2 diabetes and cardiovascular disease in later life.

Menopausal hormone therapy and diabetes
- Neither systemic nor topical menopausal therapy is contraindicated.
- Therapy should be individualized, taking into account age, metabolic, cardiovascular risk factors and lifestyle interventions such as weight loss.
- Weight loss may reverse type 2 diabetes.
- Oral estrogens may be preferred in women with low to moderate cardiovascular risk, as they may improve insulin resistance.
- The effect of progestogens on insulin resistance varies with the type and route of administration.
- Micronized progesterone, transdermal norethisterone or oral dydrogesterone may be preferred.

About 422 million people worldwide have diabetes and 1.5 million deaths are directly attributed to diabetes each year.

Further information
- EMAS CareOnline 2020 https://emas-online.org/emas-careonline
- Menopause and diabetes: EMAS clinical guide 2018 https://doi.org/10.1016/j.maturitas.2018.08.009