



AUSTRALASIAN MENOPAUSE SOCIETY

Annual Report 2017



AUSTRALASIAN
MENOPAUSE
SOCIETY

NEW DIRECTIONS IN WOMEN'S HEALTH

AMS Mission

*To improve the quality of
life of women during and
after the menopause.*

AMS Objectives

- Disseminating evidence-based information on menopause and women's midlife health to health professionals and the public;
- Educating doctors and other healthcare professionals in clinical care, and understanding of midlife women's health in our community;
- Encouraging the application of evidence-based information and knowledge in midlife women's health and healthy ageing, as clinical best practice; and
- Translating research into evidence-based clinical practice excellence and advocacy.

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Who we are

The AMS was established in 1987 and became a company limited by guarantee in 2013. At 30 June 2017, the AMS had 490 members compared with 475 at the same time in 2016. The AMS is governed by a Board of 10 Directors who are appointed by AMS members and the Board. All Board positions are voluntary and only expenses are remunerated.

The AMS brings together doctors, nurses, allied health professionals, researchers and community workers who want to participate in communication and scientific discussions for the advancement of knowledge about the menopause and women's midlife health.

AMS Action Plan

All of the work and decisions made by AMS are underpinned by the directions of the AMS Action Plan which include:

1. A strong identity for AMS
2. Education priority area for growth
3. Responsible financial management
4. Internal and external engagement
5. Excellence in internal operations and governance

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President's Report

Bronwyn Stuckey

AMS Board: Each state/territory of Australia, and New Zealand is represented by a member of the AMS Board. I would encourage members to feel that your state/territory Board member is accessible to you and is your voice on the Board for your educational needs. The Board is here to serve the AMS membership and to facilitate dissemination of knowledge to the wider community of health practitioners in women's health.



I would like to thank everyone on the Board for their sterling work in their respective Subcommittees and on the Board in general. A special thank-you to our Board members, Anna Fenton, Deb Bateson and Martha Hickey who retired at the 2016 AGM. Also thank-you to Geraldine Edgley who resigned from the Board in May 2017 due to her many competing priorities.

I would like to welcome those Board members who have joined us this year. I am sure we will have a collegial and fruitful collaboration in pursuing the aims of the AMS.

Michele Kwik has joined the Board as the representative for NSW and as a member of the Education Subcommittee. Michele is a gynaecologist who has clinical interests both in menopause and in fertility. She, therefore, has special interest and expertise in primary ovarian insufficiency and women who require fertility preservation prior to cancer therapy.

Sylvia Rosevear has joined us as the second New Zealand representative on the Board, thereby strengthening our ties across the Tasman. Sylvia is an obstetrician and gynaecologist who is interested in the maintenance and optimisation of middle aged health. She has completed a Diploma in Exercise and Sports Medicine in recognition of the therapeutic efficacy of exercise in health promotion.

Lastly, Sonia Davison, whom we know well as our *Changes* editor has joined the Board formally. Sonia is an endocrinologist with a long-term interest in women's health, mood, and sexuality. She has been a regular speaker at our meetings and Menopause Essentials Updates, and has represented the AMS at other national and international meetings.

Changes

We have made a change to *Changes* in that we have moved from a quarterly publication to a more frequent electronic publication – *eChanges*. The content of *eChanges* is specifically written and chosen as news that is relevant to you as an AMS member. It includes new Information Sheets, case studies, member profiles and information relevant to the Australian and New Zealand prescribing environment. It is distinct from the eNews Bulletins which contain general news from around the world.

Executive Director: We could not do what we are doing without Vicki Doherty, our Executive Director. Vicki has a background in health research, public health and education, and has worked in government and non-government member-based organisations. Vicki is ably supported by Georgina Ponce de Leon. Vicki has been proactive in pursuing new avenues for us to widen our educational reach. Both Vicki and Georgina have obtained accreditation so that AMS can offer RACGP QI&CPD points for our educational meetings.

Board Subcommittees: The Chairs of the Board Subcommittees will present their reports. Our efficiency as a Board and as a Society in delivering our objectives is better because of these subcommittees. Sue Jenner is the Chair of the Education Subcommittee. As such, she has a strict agenda for us all to produce and update our referenced and highly sought-after Information Sheets. Karen Magraith is in charge of the Menopause Essentials Update workshops which have been touring as a satellite to other women's health meetings and as a Pre-Congress session. Georgina Hale is Chair of the Website Subcommittee and has over-seen the renovation of the website. Amanda Vincent is the Treasurer, keeping an eye on our solvency.

Media: The interest in menopause management is increasing in the media in a positive sense and AMS wants to be the preferred voice for the latest news and information. There has been a lot of good news surrounding the management of the menopause this year and media outlets have been open to reporting it.

Annual Scientific Meetings: The AMS Congress in Fremantle last year was a huge success. Many thanks to Sonia Davison for arranging the excellent scientific program and also thank-you to Jenny Rogers and Lucy Williams for their work on the Local Organising Committee.

The AMS Congress comes to Sydney this year. I would like to thank Sheila O'Neil and her Local Organising Committee for their enthusiasm and Deb Bateson as Chair of the Scientific Committee for putting together an interesting up-to-date scientific program. Next year will be in Brisbane with Linda Spinks being Chair of the Local Organising Committee. With the support of the AMS, Melbourne was chosen as the city for the International Menopause Society meeting in 2020.

New international and regional guidelines are providing health practitioners with more confidence in managing menopause. New research into non-hormonal therapies promises better solutions for those women who want to avoid MHT. New epidemiological studies are clearing the murky air left by the WHI. I am passing the Presidency into the capable hands of Amanda Vincent in a year of optimism. I would like to express my heartfelt thanks to those who have supported me as President for the last two years.

New international and regional guidelines are providing health practitioners with more confidence in managing menopause...



Executive Director's Report

Vicki Doherty

2016-17 has again been another busy year for AMS. The AMS Board has been extremely productive in reviewing, developing and delivering evidence-based advice, education and resources for health professionals on menopause and women's midlife health. The AMS has also had an eventful year focusing on governance and strategic planning.



The rise in interest from the media, requests to participate in working groups to develop resources and invitations to endorse position statements and guidelines is indicative of AMS increasingly being recognized a leading voice for women's healthcare at midlife. AMS also continues to field calls and emails from members of the public who are struggling to find advice about how to manage their menopausal symptoms. The "Find an AMS Doctor" service on the AMS is often a blessing for such women, knowing that they can find a GP or specialist who is going to understand and assist them to manage their symptoms from an evidence-based perspective. Further the decision by the AMS Board to develop information sheets for consumers will assist AMS members and their patients to navigate this frequently challenging time in a woman's life.

One of the key highlights of 2016-17 was the launch of the new AMS website. The website has a fresh, modern look with optimized navigation and improved security. AMS also stepped into the modern world and launched its own Facebook and LinkedIn pages. I encourage members to follow us on Facebook and LinkedIn, and for members to provide AMS with your social media handles so we can follow you too!

As you will read in this report, AMS continued to provide clinical education through its Menopause Essentials Update, the 21st Annual AMS Congress in 2016-17 as well as other informal face-to-face education forums. For the first time, the AMS Congress was filmed and has been made available for members to view on the AMS website. Case commentaries were also introduced to Changes magazine that included questions, answers and references to assist with diagnosis and treatment options.

The Education Subcommittee has another busy year developing and updating information sheets. As previously mentioned, this has also included developing a suite of consumer sheets for AMS members to provide to their patients.

AMS produced a healthy profit in 2016-17 through good investment returns and tightening our purse strings. This profit will provide AMS with more flexibility to educate health professionals both face-to-face and online.

AMS continued to partner with the Australian Society for Psychosocial Obstetrics and Gynaecology (ASPOG), Monash University, Cancer Australia, Healthed and the International Menopause Society (IMS). Further in 2016-17, AMS partnered with the

Royal Australian and New Zealand College of Obstetrics and Gynaecology (RANZCOG), Endocrine Society of Australia (ESA), Australian and New Zealand Bone Mineral Society (ANZBMS), the North American Menopause Society (NAMS) as well as the European Menopause and Andropause Society (EMAS).

In 2016-17, AMS reviewed and updated a number of policies and procedures to improve governance and efficiencies, including the AMS Constitution and upskilling staff to undertake roles historically provided by external contractors.

I would like to thank the AMS Board for their support, hard work and for inspiring me every day through their commitment to improving women's health. Also thank you to Georgina Ponce de Leon for her assistance in running the AMS office in such a calm and friendly way. Lastly, I would like to thank all AMS members for their support of AMS and dedication to assisting women through menopause and beyond. Please feel free to contact me to discuss any needs or ideas you may have to improve your membership experience.

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Treasurer's Report

Amanda Vincent

Audited financial statements cannot be finalised until the final statement from Crestone is provided to AMS in mid-October.

According to the draft audited financial statements, the AMS made a profit of \$140,448 in 2016-17 compared with a loss of \$10,040 in 2015-16. There was an increase in income of around \$78,000, which was largely due to the movement in the value of investments and distributions from trusts (see Statement of Profit and Loss and Other Comprehensive Income). Expenses were also reduced by around \$72,000 (20%) due to a number of targeted initiatives to reduce costs, including reducing the use of external contractors for AMS operations and reducing Board expenses. AMS also engaged alternative suppliers that were more cost effective.

Membership income and Congress income remained steady compared with 2015-16. Salaries and staffing on-costs also remained steady compared with 2015-16 (see Detailed Profit and Loss Statement).

Total equity increased by 7.2% from \$1,933,918 in 2015-16 to \$2,074,366 in 2016-17 (see Statement of Financial Position as at 30 June 2017). There was also an increase in cash at year ended 30 June 2017 of \$9,417 compared with year ended 20 June 2016 (see Statement of Cash Flows).

Draft Balance Sheet as at 30 June 2017

	2017 (\$)	2016 (\$)
Assets		
Current Assets		
Cash assets	279,905	270,448
Receivables	8,000	-
Current tax assets	1,643	1,106
Total Current Assets	331,476	271,594
Non-Current Assets		
Other financial assets	1,795,539	1,666,093
Total non-current assets	1,795,539	1,666,093
Total Assets	2,127,015	1,937,687
Liabilities		
Current Liabilities		
Payables	2,242	(517)
Current tax liabilities	8,157	4,287
Provisions	13,590	-
Other	28,659	-
Total Current Liabilities	52,649	3,770
Total Liabilities	52,649	3,770
Net Assets	2,074,366	1,933,918
Equity		
Retained profits	2,074,366	1,933,918
Total Equity	2,074,366	1,933,918

Draft Profit and Loss Statement at 30 June 2017

	2017 (\$)	2016 (\$)
Income		
Membership income	69,356	68,125
Sponsorship income	-	23,935
Investment income ¹	209,467	98,426
Seminar income		1,552
Other income (Congress profit)	128,408	137,155
Total Income	407,233	329,193
Expenses		
Financial management and fees ²	35,059	45,372
Education ³	10,673	50,310
Board expenses	13,778	38,177
Salaries and superannuation	152,558	157,905
Website and computer	10,140	15,544
Operations ⁴	23,495	20,732
Travel and accommodation	-	11,192
Other expenses	21,081	-
Total expenses	266,784	339,233
Profit (Loss) before income tax	140,448	(10,040)

1. Includes Dividends, Distribution from trusts, Interest received, Movement in value of investments, Refund of franking credits
2. Includes Accounting fees, Audit fees, Bank fees and charges, Bookkeeping fees, Financial management fees
3. Includes Education, Awards and Congress
4. Includes Insurance, Legal fees, Postage, Printing & stationery, Publications, Rent on land & buildings, Storage, Subscriptions and Telephone & internet

Draft Cash Flow Statement for year ended 30 June 2017

Cash Flows From Operating Activities	
Receipts from customers	218,425
Payments to suppliers and employees	-261,279
Net movement in income tax provision	-
Net movement in GST liability	537
Net cash provided by operating activities	-43,391
Cash Flows From Investing Activities	
Interest received	7,532
Investments	45,276
Net cash provided by investing activities	52,808
Cash Flows From Financing Activities	
Net cash from financing activities	-
Net increase (decrease) in cash held	9,417
Cash at Start of Year	270,488
Cash at Year End	279,905

AMS Clinical Education

Significant expenditure and income relates to education and dissemination of knowledge related to menopause, which are key aims of the AMS. The AMS Congress held in Fremantle November 2016 generated an income of \$128,408. The AMS Board has been committed to our Menopause Essential Updates reaching as many health professionals as possible, so agreed to keep registration fees below cost. The cost of AMS to provide this education has heavily relied on sponsorship. The AMS understands that there are alternative methods of providing education, and as such, continues to examine the viability of these programs and ways in which to deliver them in a cost-effective manner.

Ethical Investment Policy

In 2016-17, the AMS Board implemented an Ethical Investment Policy. The objective of this policy was to recognize that the AMS is a non-profit organization established to benefit its members and enhance the health of the community benefit. Therefore, investments held by the AMS should not be in potential conflict with either its aims nor jeopardize the health of the community. The policy provides a negative screen to avoid all

investment exposure, whether direct equity holdings or debt like securities in specifically stated companies or organizations whose securities are listed within specifically outlined Global Industry Classification Standard (GICS) sectors as per industry standard applied indices from Standard and Poors. Sectors that were removed included: Healthcare Equipment and Supplies, Health Care Technology, Biotechnology, Pharmaceuticals, Life Sciences Tools & Services, Brewers, Distillers and Vintners, Aerospace and Defence, Casinos and Gaming and Tobacco.

In addition, the AMS wanted to negatively screen the following companies that may either be in direct conflict or could reasonably be perceived to have a conflict with the stated aims of the AMS and should be avoided for all investments: Australian Pharmaceutical Industries, Healthscope Ltd, Mayne Pharma, Sonic Health Care, Sigma Pharmaceuticals and Virtus Health Ltd.

Investment Portfolio Assessment

Crestone (formerly UBS) has managed the AMS's investment portfolio since early 2015. In June 2017, the AMS Board agreed to seek independent advice to evaluate the fees and performance of the portfolio.

Chair, Education Subcommittee Report

Susan Jenner

Education is a core role for AMS and the Subcommittee has been involved in a variety of areas.

Menopause Essentials Update

In 2016-17, the AMS ran the Menopause Essentials Update (MEU) workshop in two locations, reaching 147 delegates. This series of four lectures is designed to upskill doctors with the latest on diagnosing and managing the various aspects of menopause. Participants consistently evaluate the MEU highly and we are pursuing opportunities to run the half day MEU alongside other meetings next year. Dr Karen Magraith has been the coordinator for the MEU workshops, helping to tie together speakers, talks, venues and CPD requirements.

One MEU was run in conjunction with the Australian Society for Psychosocial Obstetrics and Gynaecology (ASPOG) in Hobart in July 2016 and the other was held in November 2016 in Fremantle as the AMS Pre-Congress Meeting.

AMS Annual Congress, Fremantle

A highly successful Congress was run in Fremantle in November 2016 – the theme was *Menopause-Riding the Wave*, with plenaries on bone health, metabolism, media and the mind. Dr Sonia Davison headed up the Scientific Program Committee. The Local Organizing Committee included Dr Jenny Rogers, Dr Lucy Williams, Clin A/Prof Amanda Vincent and was chaired by Prof Bronwyn Stuckey.

Information Sheets

Another core function is writing and updating the AMS Information Sheets. These are targeted at doctors, and we are now referencing them and have added key points boxes. The Board has plans for some new topics, in addition to ensuring the current sheets remain up to date. Eight sheets received a major overhaul during the year, and a new sheet on Bleeding problems was developed. My thanks to all who contributed by being the primary author, or providing useful editorial comment.

- AMS guide to MHT/HRT equivalent doses- Australia only

- AMS guide to MHT/HRT equivalent doses- New Zealand only
- Bioidentical hormones for menopausal symptoms
- Complementary and herbal therapies for hot flushes
- Oestrogen-only MHT
- Non-hormonal treatment options for menopausal symptoms
- SERMS – their role in menopause management
- Early menopause due to chemotherapy and radiotherapy
- Bleeding – perimenopause, postmenopausal and breakthrough bleeding on MHT/HRT (new sheet)



Information sheets – for consumers

The AMS recognizes that members want to give their patients information that they understand to assist them to make informed choices about their treatment options. While many consumers read and use the information sheets the AMS produces, these sheets are targeted at health professionals with good health literacy. In 2016-17, the AMS engaged a medical writer to assist us to produce information sheets with a literacy level targeted at the general community. We hope that these sheets assist our members to educate and empower their patients to make informed choices to manage their symptoms. Two sheets are now available:

- Menopause- what are the symptoms?
- Non-hormonal treatment options for menopausal symptoms

Healthed

In late 2016, AMS continued to provide speakers for Healthed's Women's and Children's Health Updates in Adelaide and Perth. Speakers presented a 30-minute talk on the latest in menopause management at five meetings in 2016 to nearly 4,000 delegates. AMS was also provided trade displays at the Updates to help distribute AMS resources and engage with existing and recruit new members.

I would like to thank all the members of the Board for their help, and especially the Education Sub-committee members Karen Magraith, Deb Bateson, Martha Hickey, Janice Brown, Sonia Davison, Michele Kwik and Sylvia Rosevear.

AMS in 2016-17

1. A strong identity for AMS

AMS is recognized as a leading voice for women's healthcare at midlife

AMS is a trusted source for information and advice on the menopause and women's midlife health. In December 2016, Cancer Australia released their clinical practice guideline Management of menopausal symptoms in women with a history of breast cancer. AMS was invited to participate in the Working Group to develop this guideline and was represented by AMS Board Members Professor Martha Hickey and Clinical Associate Professor Amanda Vincent. AMS also endorsed this guideline.

In 2016, the Endocrinology Society of Australia (ESA) and the Australian and New Zealand Bone Mineral Society also invited AMS to participate in a Working Group to develop a Position Statement on for Bone Health Management for Women Receiving Endocrine Therapy for Hormone Receptor-Positive Breast Cancer. Clinical Associate Professor Amanda Vincent is representing AMS in this Working Group. The ESA also requested AMS support its bid for the International Congress of Endocrinology to be held in Brisbane in 2022.

In May 2017, the North American Menopause Society (NAMS) also invited AMS to endorse its 2017 Hormone Therapy Position Statement.

In 2016-17, the AMS has continued to partner with Monash University and provide in-kind support on an NHMRC Partnership Grant "Early Menopause: Implementation Research using the Experiences and Perspectives of Women and Health Professionals to Translate Evidence into Practice". AMS has assisted with recruitment of health professionals and women through targeted emails and social media. The project is exploring women's and health professional's experiences, attitudes and knowledge about Early Menopause (EM), which has a major influence on quality of life and limits compliance with cancer therapies in many of our cancer survivors. This partnership will identify the long-term health implications of EM and will be of direct relevance to AMS members who provide clinical care to women with EM. Online resources and tools for women with EM and health professionals will be developed to address a clinical gap identified and prioritized by AMS members. Notably, this project will have long term, sustainable outcomes that will directly impact the care and wellbeing of patients and provide evidence based resources for health professionals.

These invitations to participate in developing guidelines, assist with research and endorse positions statements and guidelines are indicative of how AMS is recognized not only through Australasia, but internationally as a leading voice for women's healthcare in midlife.

The AMS provides a monthly eNews Bulletin to its members and a truncated version for other health professionals. The Bulletins contain summaries of newly published journal articles, recently developed resources, information about relevant conferences, access to the International Menopause Society's Our Menopause World and access to NAMS and the European Menopause and Andropause Society resources, including webinars. These Bulletins reach around 1,000 contacts with more and more subscribers each year.

In 2016-17, three editions of *Changes* were produced under the supervision of Editor, Sonia Davison. Regular case commentaries were introduced to *Changes* in June 2016 and other articles included recently developed guidelines and resources, news about new products and supply issues, new AMS Information Sheets, member profiles and details about upcoming conferences.

In February 2017, the AMS Board made the decision to change the quarterly magazine *Changes*, to a more frequent *eChanges* in recognition of changing technology and to ensure relevant information is provided to members in a timely way. *eChanges* is available on the website for members only and as a PDF for those members who prefer to print it out to read.

Although AMS contact details are not readily accessible by the public, the AMS receives calls and emails requesting information on menopause by many women and their families who do not know where to turn. Women were also referred to contact AMS by other organizations such as BeyondBlue and Relationships Australia for advice, indicating the gap in available and reliable resources. In 2016-17, there were 79 calls or emails (more than 1.5 per week) from the public to AMS requesting advice about:

- General menopause symptom management;
- Using bioidenticals;
- Mental health issues and menopause
- Oestrogen implants;
- Treatment options following a hysterectomy.

The majority of consumer enquiries were directed to the Find an AMS Doctor Service on the AMS website and in some instances, AMS Board Members assisted in providing support to these women.

AMS Website

The new AMS website was launched in April 2017. The new website was developed to optimise flow navigation, increase security and provide a fresh, modern look. Feedback from AMS members and in general has been very positive. The new website now includes a map of members listed in the Find a Doctor Service to assist the community to find an AMS member doctor close to where they live.

In 2016-17, there was over 267,000 visits to the AMS website with nearly 595,000 page views. There was a slight decrease (6%) in website visits and page views (3%) compared to 2015-16. This decrease was expected with the launch of the new and the removal of old webpages.

The highest hitting webpage is the AMS Home Page followed by (in order):

- Information sheets
 - Non-hormonal treatment options for menopausal symptoms
 - Complementary and herbal therapies for hot flushes
 - AMS guide to equivalent HRT – MHT doses
- Find a Doctor

The Find a Doctor searches had close to 57,000 visits, with the state of NSW having the highest number of searches.

The consumer targeted videos were introduced in January 2015. In 2016-17, there were almost 21,000 views of the videos in the last 12 months. The most played video was Menopause – what are the symptoms?

AMS in the media

In 2016-17, AMS provided a number of media releases about World Menopause Day and a number of relevant journal articles. The media requested a number of interviews with AMS Board Members for print and radio. Bronwyn Stuckey provided interviews about menopause for radio stations 2SM and 2UB, for the publications Sydney Morning Herald, Huffington Post, House of Wellness and Yours magazine, as well as media company AAP. Michele Kwik was interviewed for The Australian Journal of Pharmacy on urinary incontinence. Past-president Rod Baber was also interviewed by 2UE – Talking Lifestyle.

The New Zealand Division of AMS worked closely with a journalist from North and South magazine (readership of 247,000) for an article covering all aspects of menopause and its management.

Social Media

In 2016-17, AMS launched its Facebook page and LinkedIn account and the number of views, likes and followers has been steadily increasing. A Facebook campaign was trialled using an article in the Huffington Post on 'Everything you need to know about menopause', for which the AMS President, Prof Bronwyn Stuckey was interviewed. The campaign ran for one week and targeted women from 35 years to over 65 years in Australia and New Zealand and cost \$68. The article reached 10,351 people (i.e. appeared in their Facebook feed) and there were 617 engagements. Of these engagements, 610 people clicked on the link back to the AMS Facebook page to view the article, there were 2 page likes and 1 comment. Fifty-six percent of the engagements were from New Zealand and 44% from Australia.

2. Education priority area for growth

AMS provides clinical education

This report on education is to be read in conjunction with Susan Jenner's Chair, Education Sub-Committee Report.

In 2016-17, the AMS continued to be an RACGP Accredited Activity Provider to accredit education by the AMS under the RACGP QI&CPD Program. The AMS also successfully applied to accredit its education activities through the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) CPD Program, Australian College of Rural and Remote Medicine (ACCRM) PDP. Fellows of the Royal Australian College of Physicians (RACP) were also eligible to claim CPD points via MyCPD for AMS clinical education.

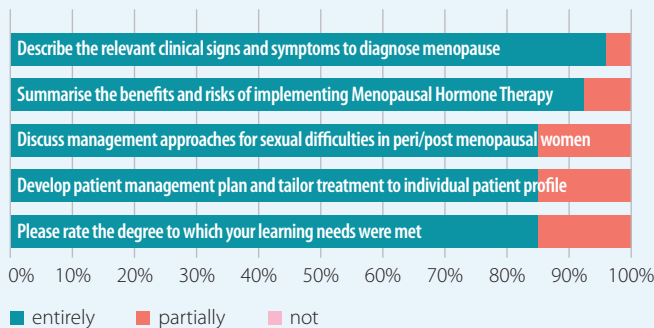
Menopause Essentials Update

The AMS presented two Menopause Essential Update (MEU) workshops in 2016-17. The first workshop was held in conjunction with the Australian Society for Psychosocial Obstetrics and Gynaecology (ASPOG) in Hobart in July 2017. Professor Bronwyn Stuckey and Dr Jane Elliott presented the three-hour workshop which was chaired by Drs Karen Magraith and Jan Batt.

Thirty-eight (38) delegates registered for the Hobart MEU and 33 attended (excluding speakers, chair, AMS Secretariat and sponsors.). Delegates were requested to complete paper based evaluations prior to leaving the MEU. The response rate of the evaluations was 81% (N=32) compared with 35% in Alice Springs and 67% in Byron Bay in 2015 using Survey Monkey.

The evaluation results were very positive as indicated in Figure 1 below.

Figure 1: Rate program learning outcomes and personal learning needs were met



Twenty-four (85%) delegates agreed that the workshop will change how they evaluate and manage menopausal symptoms, while three (2%) delegates were uncertain if the workshop would change their practice.

General feedback from the delegates was overwhelmingly positive:

"Attended the session to understand current medical practices in management of menopause. The outcomes were met."

"It was a very sensible down to earth update"

"Excellent"

"Great day"

"Very interesting"

"Great Update, learnt more things here than with books"

"Great to get an overview of management"

For one delegate the workshop was reaffirming:

"I was already fairly confident but good to have confirmation"

One delegate suggested more information be provided on longer term use of HRT:

"Great tips on when to start HRT but no further info after 5 years of using it"

Another delegate endorsed the AMS Information Sheets:

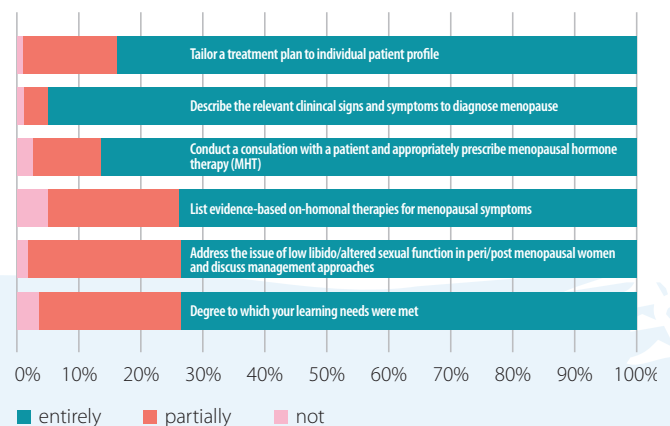
"Will use the AMS Info Sheets from now on"

The second MEU was provided as part of the AMS Pre-Congress meeting in Fremantle in December 2016. Drs Karen Magraith and Susan Jenner chaired the workshop. Clinical A/Prof Amanda Vincent, Dr Jane Elliott, Prof Martha Hickey and Dr Sonia Davison presented the three-hour workshop.

One hundred and nine (109) delegates attended the Fremantle MEU and the evaluation response rate was 71% (N=77). The majority of delegates heard about the MEU through the AMS website (44%). Other delegates heard about the MEU through direct email (35%) or through word of mouth (19%).

Most program learning outcomes and personal learning needs of delegates were entirely met (see Figure 2 below).

Figure 2: Rate learning objectives and personal learning needs were met



Sixty (78%) delegates agreed that the workshop will change how they evaluate and manage menopausal symptoms, while twelve (16%) delegates were uncertain if the workshop would change their practice.

General feedback from the delegates was positive:

"Low libido lecture was great, thanks!"

"Dr Elliott's talk"

"Sonia's dynamic talk, excellent!"

"Great basics/essentials"

"Info re testosterone"

"New info on micronized progesterone"

"Practical tips on how to do HRT and evidence base on testosterone treatment"

Some of the delegates' recommendations included:

"Less statistical data and more practical advice/tips for treatment or use in GP"

"Longer discussion on different HRT's on the market"

"Drug dosages would be helpful and more specific info for NZ as some products are not available there"

"NZ comments on available and funded HRT options"

New Zealand Menopause Clinical Education

Dr Janice Brown has been presenting a truncated version of the MEU at monthly GP peer review education in Auckland. Janice has also been providing education sessions for GP registrars on menopause and women's midlife health. In 2016-17, AMS Past-president, Dr Anna Fenton also provided distance education in rural Canterbury to practice nurses.

20th AMS Congress, Fremantle

The 20th AMS Congress was held at The Esplanade Hotel, Fremantle from 18-10 November 2016. The Local Organizing Committee (LOC) included Bronwyn Stuckey (Chair), Jenny Rogers, Lucy Williams, Amanda Vincent and Sonia Davison chaired the Scientific Program Committee.

The theme of the Congress was 'Menopause: Riding the wave' and the international key note speaker was Dr Mike McClung from the Oregon Osteoporosis Centre, Portland, USA. Other speakers included Peter Ebeling, Lawrie Beilin and Joe Proietto. All but two of the presentations were filmed and made immediately available to Congress delegates via armchairmedical.tv and to all AMS members via the AMS website in May 2017.

A total of 248 delegates registered for the Congress and an additional 10 delegates cancelled their registration. Nine registered delegates did not attend the Congress. The majority of delegates were from Western Australia (35%), followed by NSW/ACT (17%) and Victoria (16%). The total number of delegates not including sponsors, exhibitors and invited speakers was 182. A total of 110 evaluations were completed indicating a 60% response rate. Sixty-five of the respondents were AMS members.

There were 19 learning objectives and on average, 67% and 32% of respondents had their learning needs entirely and partially met respectively. There were 18 speakers and on average, 79% and 20% respondents assessed them as excellent or good respectively.

General feedback from the delegates was overwhelmingly positive:

"Overall a fantastic meeting – valuable learning and very useful meeting colleagues"

"Excellent speakers"

"Excellent. Well prepared. Balanced views – evidence based. Great venue"

"Venue terrific. Speakers good with lots of information relevant to GPs"

"Fascinating range of topics covered. Great program!"

Some delegates requested that copies of the slides be made available:

"Would love the speakers slides to be made available"

"I would love the slides in paper form of the talks"

Scholarships and Awards

Six scholarships covering the Congress registration fee plus a 12-month AMS membership subscription were awarded to students and doctors in training.

Dr Jennifer Marino won the Barbara Gross Award for her presentation Sexual inactivity among female cancer survivors. The winner of the Jean Hailes Prize was Ladan Yeganeh for her presentation Attitudes of health professionals towards menopausal hormone therapy.

Dr Anna Fenton's publication *"Time trends in breast cancer and menopause hormone therapy"* published in *Climacteric* 2016;19(1):42-8 was judged the winner of the Australasian Menopause Society Scientific Award.

Community Forum

As Jean Hailes was unable to provide a Community Forum in Fremantle, the AMS Board agreed to trial providing one which was titled Menopause and Healthy Bones. The Forum was designed for two hours. Jane Elliott presented on bone health, Bronwyn Stuckey presented on menopause and Jennifer Rogers presented on exercise. Although the event was advertised as widely as possible without incurring additional costs, the event was not well attended. Participants on the day were however very grateful for the opportunity to learn and discuss their concerns about menopause and midlife health.

The AMS was also invited by Healthed to present at their Women's and Children's Health Update 2016. Speakers presented a 30-minute talk on the latest in menopause management at five meetings to nearly 4,000 delegates.

AMS develops and maintains evidence-based resources

In 2016-17, the AMS developed and updated nine Information Sheets including:

- AMS guide to MHT/HRT equivalent doses- Australia only
- AMS guide to MHT/HRT equivalent doses- New Zealand only
- Bioidentical hormones for menopausal symptoms
- Complementary and herbal therapies for hot flushes
- Oestrogen-only MHT
- Non-hormonal treatment options for menopausal symptoms
- SERMS – their role in menopause management
- Early menopause due to chemotherapy and radiotherapy
- Bleeding – perimenopausal, postmenopausal and breakthrough bleeding on MHT/HRT

The AMS also engaged a medical writer to develop information sheets with a reading scale targeted at the general community. In 2016-17, a number of consumer sheets were prepared and feedback sought via a focus group of women attending a Melbourne menopause clinic. The sheets incorporated suggestions from the focus group about the information and layout. Two consumer sheets were finalized in 2016-17 and were titled:

- Menopause- what are the symptoms?
- Non-hormonal treatment options for menopausal symptoms

3. Responsible financial management

AMS manages finances responsibly

The AMS made a profit of around \$140,000 in 2016-17 compared with a loss of \$10,000 in 2015-16. The increase in profit was due to the movement in the value of investments and distributions from trusts, as well as a 20% decrease in expenditure.

The AMS implemented an Ethical Investment Policy in recognition that the AMS is a non-profit organization established to benefit its members and enhance the health of the community benefit. Therefore, investments held by the AMS should not be in potential conflict with either its aims nor jeopardize the health of the community.

In June 2017, the AMS Board agreed to seek independent advice to evaluate the fees and performance of the portfolio. This advice will assist AMS to ensure that its investment objectives are being met efficiently.

Please refer to the Treasurer's Report and Financial Statements in this report for more information.

4. Internal and external engagement

AMS engages with members and other health professionals

AMS encourages feedback from members via its newsletter, *Changes* and *eChanges* magazines. The AMS HP newsletter is distributed to around 1,000 health professionals. The AMS Congress and the Menopause Essentials Update provides the best opportunity to engage with members and other health professionals face to face. The AMS also agreed in 2016-17 to undertake a member survey to ensure that members' needs are being met.

The AMS promotes its education through the Primary Health Networks in Australia and the RACGP, RANZCOG, ACCRM and Primary Health Organizations in New Zealand.

The AMS was invited to present at Healthed's Women's and Children's Health Conference around Australia in 2016. AMS also provided a trade display at Healthed in 2016-17, which allowed AMS staff to meet with members and recruit new ones.

In 2016-17, AMS partnered with ASPOG to provide a MEU in conjunction with their annual scientific meeting and also undertook planning for another joint meeting in 2017-18. RANZCOG agreed to AMS providing a MEU as part of the Pre-Meeting program of their annual scientific meeting in Auckland in October 2017.

In 2016-17, AMS also officially became an affiliated member of the European Menopause and Andropause Society (EMAS), in addition to having reciprocal arrangements for members with the IMS and NAMS.

5. Excellence in internal operations and governance

AMS values efficient operations and good governance

Strategic Planning

All of the AMS's decisions are underpinned by its mission, objectives and action plan which were finalized in late 2014. The AMS objectives and action plan are reviewed at each AMS Board Meeting.

In February 2017, the AMS Board engaged a facilitator to assist with a Strategic Planning Day. Past work of the AMS was reviewed by the AMS Board and future priorities were assessed. The Board has split into Working Groups to work on three new strategic areas:

- Sustainability of the organization;
- Marketing and delivery; and
- Partnerships and collaboration.

The AMS plans to revise the current vision and mission as well as develop organizational values. The draft AMS Strategic Plan Towards 2022 will be available to members for feedback in 2017-18.

AMS Membership Subscription

The AMS Board agreed to raise the AMS membership fees by about 10% from 1 December 2016 as fee increases had not been kept in line with inflation for at least five years. The AMS introduced a three-year membership option which was set at the original rate. As at 30 June 2017, 73 members had opted for a three-year membership subscription, representing 20% of renewals since the option was introduced.

AMS Constitution

Changes to the AMS Constitution were agreed to by members at the 2016 Annual General Meeting (AGM). These changes included:

- Reducing the number of directors from 11 to 10;
- To allow for electronic polling of decisions;
- Allowing members to join the AGM and special meetings via technology, e.g. Skype.

AMS Policies

AMS developed and reviewed a number of internal policies including:

- Terms of reference for the Congress Local Organizing Committee;
- AMS Scientific Prize criteria;
- Congress Abstract scoring and Free Communications scoring tools;
- Ethical Investment Policy;
- AMS Membership Policy; and
- AMS Board Inductions Kits and Role Descriptions.

Review of AMS Suppliers

In 2016-17, AMS reviewed a number of suppliers and also upskilled staff to undertake work that was provided by external contractors, including bookkeeping and accrediting AMS clinical education. This internal review resulted savings of around \$30,000 in expenses in 2016-17 compared with 2015-16.

Future Directions

In 2017-18, the AMS plans to implement a number of initiatives as set out under the AMS Action Plan.

1. A strong identity for AMS

- Engage more broadly with the print, tv and radio media by releasing more media releases and providing media passes to AMS clinical education events;
- Develop a social media strategy and timetable for distribution of information;
- Develop and strengthen links with universities, colleges, women's health bodies.

2. Education priority areas for growth

- Deliver at least two Menopause Essentials Update workshops as well as the Annual Congress;
- Develop and publish four Consumer Information Sheets on menopause;
- Review, update and publish four AMS Information Sheets; and
- Develop webinars for the AMS website.

3. Responsible financial management

- Review and explore alternative investment opportunities for the AMS investment portfolio;
- Monitor budgets and expenditure;
- Investigate alternative sponsorship opportunities; and
- Scope other funding opportunities.

4. Internal and external engagement

- Develop and implement a member needs assessment;
- Develop a membership marketing strategy;
- Collaborate with other women's health organizations to promote best practice menopause management; and
- Strengthen relationships with the international community of menopause organizations.

5. Excellence in internal operations and governance

- Hold four AMS Board Meetings;
- Develop new AMS vision, mission and strategic plan; and
- Develop and distribute eNews Bulletins monthly, eChanges magazine and special eNews editions as required.

AMS Board 2016-17



President

Professor Bronwyn Stuckey BA MBBS FRACP
Meetings attended: 5/5



President Elect and Treasurer

Clin Assoc Professor Amanda Vincent
BMed Sci, MBBS PhD, FRACP
Meetings attended: 5/5



Past President

Dr Anna Fenton BHB, MBChB, PhD, FRACP
(retired 19/11/16)
Meetings attended: 2/3



Professor Martha Hickey, BA (Hons); MSc (Clin Psych) MBChB, FRANZCOG, MD
(retired 19/11/16)
Meetings attended: 0/3



Dr Geraldine Edgley MBBS MSc (Sexual Health)
(resigned 3/5/17)
Meetings attended: 1/4



AMS Changes Editor

Dr Sonia Davison MBBS FRACP PhD
(appointed 27/2/17)
Meetings attended: 0/1

Regional appointments



VIC/TAS

Dr Karen Magraith BMBS FRACGP
(reappointed 19/11/16)
Meetings attended: 4/5



Dr Sylvia Rosevear BA MB ChB MD FRCOG
FRANZCOG: Director to 2019
(appointed 22/6/17)
Meetings attended: 0/0



NZ

Dr Janice Brown MBChB FRNZCGP
PGDipObstMedGyn NZ CertFP
Meetings attended: 4/5



SA/NT

Dr Susan Jenner BMBS, FRACGP
Meetings attended: 5/5



NSW

Dr Michele Kwik BSc(med) MBBS MPhil(med)
FRANZCOG CREI: NSW/ACT Director
(appointed 19/11/16)
Meetings attended: 2/2



QLD

Dr Georgina Hale MBBS, FRACP, PhD
Meetings attended: 4/5



Clin Assoc Professor Deborah Bateson
MA (Oxon), MSc (LSHTM), MB,BS
(retired 19/11/16)
Meetings attended: 2/3



WA

Dr Jennifer Rogers MBBS (UWA),
Dip Obs (RANZCOG)
Meetings attended: 4/5



Snapshots from the 2016 AMS Congress



Jane Carver, Clare Holberton and Rosa O'Kane



Left (L to R) Mike McClung, Alastair MacLennan and Peter Ebeling AO



AMS Board Meeting, Fremantle - (L to R) Bronwyn Stuckey, Deborah Bateson, Amanda Vincent, Jenny Rogers, Karen Magraith, Geraldine Edgley, Janice Brown, Sue Jenner, Georgina Hale (absent: Martha Hickey and Anna Fenton)



**AUSTRALASIAN
MENOPAUSE
SOCIETY**
NEW DIRECTIONS IN WOMEN'S HEALTH

AUSTRALASIAN MENOPAUSE SOCIETY LIMITED

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Lawrie Beilin AO and Bronwyn Stuckey

