

MRI

SUMMER 2008

THE MRI *voice*

Prevention • Clinical Care • Research • Education

Menopause Care Like Never Before

A NEW MENOPAUSE PROGRAM

The Center for Human Reproduction (CHR) is pleased to announce the establishment of the **Menopause Research Institute (MRI)** as a new, and independent, division of CHR. The establishment of **MRI**, within the framework of CHR, represents a logical continuation of CHR's clinical and research activities.

CHR has a worldwide reputation as a leader and innovator in the treatment of the aging ovary. Research performed at CHR, has led to the utilization of dehydroepiandrosterone (DHEA) in women with, either physiologically, or prematurely, aging ovaries. Concomitantly, CHR has spearheaded the concept of stimulating ovaries, during infertility treatment, not based on the chronological age of a patient, but based on her ovarian age. Combined, these developments have resulted in significantly improving pregnancy chances for women with aging ovaries.

Our Patients' Idea

Due to CHR's special expertise, the Center has been attracting patients with aging ovaries from all over the world. In helping them to conceive, we, however, noticed that their clinical needs often went beyond the fertility treatments, they had originally consulted us

for. Whether they conceived, or not, sooner or later, many amongst them, would contact us with classical concerns and complaints of early menopause.

Long before we, ourselves, imagined offering menopause care at CHR, patients pointed out to us that the treatment of menopause-related problems represents a logical continuum of care to treating women with aging ovaries. They intuitively recognized that the reproductive endocrinologist may, at times, be the best suited expert to help them transition into early menopause.

A New Framework

Though we agreed that reproductive endocrinologists were well qualified to address these issues, we were aware that our practice lacked a formal framework to offer the needed services to a new group of patients, and with the same high service level, to which we had become accustomed to at CHR's fertility services.

The establishment of **MRI** now creates such a framework. As the name of this new Institute clearly spells out, our intent is not only to offer state-of-the-art perimenopausal and menopausal clinical care but to advance knowledge in this area of medicine, as has been our practice in the fertility arena for over two

decades. Data from many studies, primarily published through the *Women's Health Initiative*, have caused considerable confusion about the treatment of menopause. This, therefore, appears, more than ever before, an opportune time to step in and offer a structured clinical, *holistic* approach to women in need of such services.

Our Clinical Approach

At **MRI** we offer comprehensive evaluations, followed by treatments, as women struggle with their transitions into menopause.



In an all-encompassing effort, **MRI** has been positioned as a central repository for information, diagnosis and treatment on all aspects and approaches towards menopause, whether allopathic or homeopathic in nature or involving other alternative treatment approaches. In other words, **MRI** is a one-stop medical center for the middle-aged woman in need of comprehensive advice on how to safely, and comfortably, transition out of the repro-

ductive years into the next rewarding phase of her life, **menopause.**

As in the area of reproductive medicine, our clinical approaches towards menopausal women will be innovative and consider the latest research. Based on the information we have gathered through CHR's own investigations of the aging ovary in our fertility practice, we are convinced that our ability to carefully formulate individualized treatment plans, based on individual risk profiles, family histories, symptoms and lifestyle demands is rather unique. Our approach is *holistic* and does not, as is so frequently the case, focus only on medical interventions.

We also recognize the fact that, especially during the early stages of the transition into menopause, when symptoms and lifestyle changes can appear almost overwhelming, patients require quick and easy access to care. We, therefore, have, in addition to our regular program, established a so-called **Concierge Service**, which, on an unlimited basis, guarantees subscribers in need instant access to a **MRI** physician, 24 hours a day, seven days a week, including on holidays.

As the former Chairman of the Hormone Trial Advisory Committee for the *Women's Health Initiative*, nobody appears better

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???? F.A.Q's ?????

What is MRI's purpose?

MRI's principle purpose is to apply and develop menopausal treatments for women, which facilitate a smooth transition from normal reproductive life, through perimenopause, into true menopause, while maximizing physical health and a feeling of well being.

What makes MRI different?

At MRI, we don't believe in standardized care. We recognized a long time ago that menopause requires individualization. However, even more importantly, the successful treatment of menopause cannot be static. As hormonal levels change, as women advance through the different stages of ovarian aging, so do the needs of their bodies. Menopause care, therefore, requires regular adjustments to those changing needs.

What is MRI's stance on Alternative Medicine?:

MRI is an allopathic medical facility. We, however, also recognize the validity of many alternative treatments and fully support their use within the holistic framework of our practice. We also recognize the limitations of traditional medicine in satisfying, at times, the needs of the menopausal woman. We, therefore, listen carefully to a wide variety of informative sources in an attempt to serve our patients to a maximal degree. To do so, we have established an Advisory Board, composed of interested, and educated, lay people and alternative health care experts, with special knowledge in the area of menopause care. This board will advise us on an ongoing basis about what may be relevant to MRI's work, outside of the traditional allopathic treatment framework.

Do I still need to visit my gynecologist?

We are not a replacement for your gynecologist. Indeed, even though our physicians are gynecologists by specialty, they are sub-specialists within Ob/Gyn, with special expertise in hormonal, metabolic and reproductive matters. The care and advice they offer, therefore, does not substitute for your routine gynecologic needs. For that reason, we strongly recommend and encourage that patients maintain relationships with their gynecologists, and our physicians routinely cooperate closely with patients primary physicians.



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suiting to spearhead such an effort than **David Barad, M.D.**, who will be serving as the Medical and Research Director of MRI. Dr. Barad is uniquely qualified for these new responsibilities, not only because of his affiliation with the *Women's Health Initiative*, but also because of his extraordinary level of knowledge in epidemiology and study design. In addition to being an Associate Clinical Professor of Obstetrics and Gynecology (and former Chief of the Division of Reproductive Endocrinology and Infertility) at Albert Einstein College of Medicine, he also holds an appointment as Associate Clinical Professor in the Department of Epidemiology and Social Medicine and a Master of Science degree in medical statistics. His complete curriculum vitae can be viewed at the Center for Human Reproduction's website. Just follow the link: http://www.centerforhumanreprod.com/about_physicians.html#barad

Do You Want to Become a MRI - Affiliate?

We have coined the term *Affiliate* to describe professionals in various areas of expertise who are not, per se, part of MRI but have established a close working relationship with MRI. We do not wish to represent in any way that our *Affiliates* are superior to other professionals in their respective areas of expertise. There are undoubtedly many other highly qualified individuals in the community

who have so far not chosen to become MRI-affiliates. What an affiliation with MRI, however, does indicate, is a special interest of these *Affiliates* in menopause and its very specific treatment challenges. And, any such special interest, of course, over time, will then, indeed, lead to special expertise.

We, therefore, welcome inquiries from health care professionals in all related medical specialties

who wish to become *Affiliates* of MRI. We welcome close clinical, as well as research relationships with colleagues of all medical specialties. Our menopause care programs are comprehensive and include all-encompassing services to females.

Such inquiries should be directed to Valerie at 212.434.7055 or http://www.menopauserearchinstitute.com/md_affiliate.html

where you will be able to fill out the MRI Affiliate Survey and have your name added to the Menopause Affiliate List posted on the website.

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