

Publication

Association of hormone therapy and incident gout: population-based case-control study

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)**ID** 3418783**Author(s)** Bruderer, Saskia G.; Bodmer, Michael; Jick, Susan S.; Meier, Christoph R.**Author(s) at UniBasel** [Meier, Christoph R.](#) ; [Bruderer, Saskia](#) ; [Bodmer, Michael](#) ;**Year** 2015**Title** Association of hormone therapy and incident gout: population-based case-control study**Journal** Menopause**Volume** 22**Number** 12**Pages / Article-Number** 1335-1342

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This study aims to assess the odds of developing incident gout in association with the use of postmenopausal estrogen-progestogen therapy, according to type, timing, duration, and route of administration of estrogen-progestogen therapy.; We conducted a retrospective population-based case-control analysis using the United Kingdom-based Clinical Practice Research Datalink. We identified women (aged 45 y or older) who had a first-time diagnosis of gout recorded between 1990 and 2010. We matched one female control with each case on age, general practice, calendar time, and years of active history in the database. We used multivariate conditional logistic regression to calculate odds ratios (ORs) with 95% CIs (adjusted for confounders).; The adjusted OR for gout with current use of oral formulations of opposed estrogens (estrogen-progestogen) was 0.69 (95% CI, 0.56-0.86) compared with never use. Current use was associated with a decreased OR for gout in women without renal failure (adjusted OR, 0.71; 95% CI, 0.57-0.87) and hypertension (adjusted OR, 0.62; 95% CI, 0.44-0.87) compared with never use. Tibolone was associated with a decreased OR for gout (adjusted OR, 0.77; 95% CI, 0.63-0.95) compared with never use. Estrogens alone did not alter the OR for gout.; Current use of oral opposed estrogens, but not unopposed estrogens, is associated with a decreased OR for incident gout in women without renal failure and is more pronounced in women with hypertension. Use of tibolone is associated with a decreased OR for incident gout. The decreased OR for gout may be related to the progestogen component rather than the estrogen component.

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