Why is hypoestrogenism in young women so important?

Meczekalski Blazej [1]

Hypoestrogenism in young women can be a consequence of primary ovarian insufficiency or secondary to hypothalamo-pituitary hypofunction. Functional hypothalamic amenorrhea (FHA) is one of the most common causes of secondary amenorrhea in young women. FHA results from the aberrations in pulsatile gonadotropin-releasing hormone (GnRH) secretion, which in turn causes impairment of gonadotropins (follicle stimulating hormone [FSH] and luteinizing hormone [LH]). Final consequences are complex hormonal changes manifested by profound hypoestrogenism.

Women health in this disorder is disturbed in several aspects including skeletal system, cardiovascular system and mental problems. Patients manifest decrease of bone mass density, which is related to increase in fracture risk. Therefore osteopenia and osteoporosis are the main long-term complications of hypoestrogenism in young women. Cardiovascular complications include endothelial dysfunction and abnormal changes in lipid profile. Appropriate estradiol levels are essential for central nervous function. Therefore, patients with hypoestrogenism presents significantly higher depression and anxiety and also sexual problems compared to healthy subjects.

Young women with hypoestrogenism should be carefully diagnosed and properly managed to prevent short and long-term medical consequences.