

Secondary Logo



Journal Logo

Articles



Search



Advanced Search

April 2012 - Volume 19 - Issue 4

- Previous Abstract
- Next Abstract

- **Cite**

-

- Copy

- Export to RIS

- Export to EndNote

- **Share**

- Email

- Facebook

- Twitter

- LinkedIn

- **Favorites**

- **Permissions**

- **More**

- Cite

- Permissions

Original Articles

Pomegranate seed oil in women with menopausal symptoms

a prospective randomized, placebo-controlled, double-blinded trial

Auerbach, Leo MD¹; Rakus, Julia MD¹; Bauer, Clemens MD¹; Gerner, Christopher MD PhD²; Ullmann, Ronald MSc³; Wimmer, Helge MSc⁴; Huber, Johannes MD, PhD¹

Author Information

From the ¹Department of Obstetrics and Gynecology, Medical University of Vienna, Vienna, Austria; ²Department of Medicine I, Medical University of Vienna, Vienna, Austria; ³Syntrion, Calw, Germany; and ⁴Biomedical Science, University of Applied Sciences, Vienna, Austria.

Received June 14, 2011; revised and accepted August 24, 2011.

Funding/support: This study was funded by PEKANA (Kisslegg, Germany).

Clinical trial registration number (EidraCT-Nr.): 2007-003731-23.

Financial disclosure/conflicts of interest: None reported.

Address correspondence to: Leo Auerbach, MD, Department of Obstetrics and Gynecology, Medical University of Vienna, Waehringer Guertel 18-20, 1090 Vienna, Austria. E-mail: leo.auerbach@meduniwien.ac.at

Menopause: April 2012 - Volume 19 - Issue 4 - p 426-432

doi: 10.1097/gme.ob013e3182345b2f

- Buy

Metrics	
Abstract	In Brief

Objective

The aim of this study was to investigate the potential effects of pomegranate seed oil (PGS) on menopausal symptoms.

Methods

The prospective randomized, placebo-controlled, double-blinded trial was completed by 81 postmenopausal women, who received two daily doses of either 30 mg PGS containing 127 µg of steroidal phytoestrogens per dose or a placebo for 12 weeks. The participants reported their number of hot flashes and completed the Menopause Rating Scale II at baseline and at weeks 4, 8, 12, and 24. At baseline and after 12 weeks, hormonal status was determined.

Results

After 12 weeks of treatment, PGS reduced the number of hot flashes per day by 4.3 (38.7%), whereas placebo reduced it by 2.5 (25.6%). Both groups were significant compared with baseline, but the treated group was not significant compared with the placebo group ($P = 0.17$). After 24 weeks, the treated group showed a mean of 7.1 (interquartile range, 4.0) hot flashes per day compared with the placebo group with a mean of 8.8 (interquartile range, 5.0; $P = 0.02$). Although the overall sum score of the Menopause Rating Scale II parameters at week 12 decreased in the treated group from 16.0 to 9.0 at week 12 and in the placebo group from 18.0 to 14.5 ($P = 0.08$), the sum score of the vegetative somatic symptoms subgroup decreased strongly versus placebo ($P < 0.03$), attributable mainly to an improvement in sleeping disorders. PGS did not affect the hormone status, and no adverse effects were reported.

Conclusions

In postmenopausal women, PGS does not significantly reduce hot flashes within a 12-week observation period, but further studies are needed to investigate the long-term effect.

©2012The North American Menopause Society

^Back to Top



Never Miss an Issue

Get new journal Tables of Contents sent right to your email inbox

Browse Journal Content

- Most Popular
- For Authors
- About the Journal
- Past Issues
- Current Issue
- Register on the website
- Subscribe
- Get eTOC Alerts

For Journal Authors

- Submit an article
- How to publish with us

Customer Service

Live Chat

- Activate your journal subscription
- Activate Journal Subscription
- Browse the help center
- Help
- Contact us at:
 - EMAIL:
customerservice@lww.com
 - TEL: (USA):
TEL: (Int'l):
800-638-3030 (within USA)
301-223-2300 (international)
- Privacy Policy (Updated June 1, 2020)
- Legal Disclaimer
- Terms of Use
- Open Access Policy
- Feedback
- Contact Society
- Sitemap
- RSS Feeds

- LWW Journals
- Copyright © 2022
- The North American Menopause Society