

IN BRIEF

REPRODUCTION

A regimen of bazedoxifene and conjugated estrogens can reduce hot flashes by 80% in postmenopausal women with vasomotor symptoms, Pinkerton *et al.* report. The team randomly assigned 332 healthy postmenopausal women (aged 40–65 years) with moderate to severe hot flashes to treatment with bazedoxifene 20 mg plus either 0.45 mg or 0.625 mg of conjugated estrogens, or placebo once daily for 12 weeks. Bazedoxifene plus conjugated estrogens 0.625 mg achieved the greatest reduction in hot flashes (80% versus 74% for bazedoxifene plus conjugated estrogens 0.45 mg and 51% for the placebo group). Safety profiles were similar for all treatment regimens.

Original article Pinkerton, J.V. *et al.* Relief of vasomotor symptoms with the tissue-selective estrogen complex containing bazedoxifene/conjugated estrogens: a randomized, controlled trial. *Menopause* doi:10.1097/gme.0b013e3181a7df0d

CANCER

Melanoma-associated antigen expression is associated with thyroid cancer progression and could serve as a prognostic marker, a new study has found. Cheng and colleagues analyzed a tissue microarray of samples from 375 patients with thyroid cancer; immunohistochemistry was used to localize melanoma-associated antigen in the tissue samples. Expression of the antigen was weak in the cytoplasm and strong in the nucleus in normal thyroid tissue. Cytoplasmic expression of melanoma-associated antigen increased with increasing tumor size and number of lymph node metastases, but was negatively associated with the percentage of p53-positive nuclei.

Original article Cheng, M. *et al.* Expression of the melanoma-associated antigen is associated with progression of human thyroid cancer. *Endocr. Relat. Cancer* **16**, 455–466 (2009).

REPRODUCTION

In multiple pregnancies, the rates of stillbirth and neonatal mortality are up to eightfold of those for singleton pregnancies. Previous studies have indicated that progesterone can prevent preterm births in high-risk singleton pregnancies; Norman *et al.*, therefore, investigated whether progesterone might prevent preterm births in twin pregnancies. A total of 500 women with twin pregnancy were randomly assigned to receive either progesterone gel (90 mg) or placebo gel to apply to the vagina daily for 10 weeks starting at 24 weeks of gestation. Progesterone failed to delay delivery; rates of delivery or intrauterine death before 34 weeks were 24.7% in the progesterone group and 19.4% in the placebo group.

Original article Norman, J.E. *et al.* Progesterone for the prevention of preterm birth in twin pregnancy (STOPPIT): a randomised, double-blind, placebo-controlled study and meta-analysis. *Lancet* **373**, 2034–2040 (2009).