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## Bree Collaborative | Perimenopause and Menopause

June 10th 2026 | 2:30-4PM

Hybrid

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### MEMBERS PRESENT VIRTUALLY

Nicole Saint Clair, MD, FACOG (chair), Regence  
Karin Inderbitzin, RN, BSN, WA HCA  
Annelise Gaaserud, MD, Kaiser Permanente  
Carolyn Halley, MD, Healthpoint  
Asher Strauss, PsyD, Kinwell

Jamie Kowatch, RD, CDCES  
Laura MacPherson, MSN, Molina  
Amy Laurent, MSPH, Microsoft  
Janice Tufte  
Kris Somol, ND, Bastyr University

### STAFF AND MEMBERS OF THE PUBLIC

Beth Bojkov, MPH, RN, Bree Collaborative  
Karie Nicholas, MA, GDip, Bree Collaborative  
Emily Nudelman, DNP, RN, Bree Collaborative  
Denise Rodriguez, Seattle Menopause Doula

Orly Steinberg, MD, Regence

### WELCOME

Beth reviewed the agenda for the day and asked for a motion to approve the minutes from the previous meeting. Beth reviewed comments provided by a workgroup member and revised the minutes in alignment with the group. The revised minutes will be posted on the website.

- Action: Motion to approve revised May minutes
- Outcomes: Revised May minutes approved

### EXECUTIVE ORDER – MENOPAUSE IN THE WORKPLACE

Beth updated the workgroup that the Bree Collaborative had been named in an executive order by the Governor to support the development of resources, policies and workplace accommodations for those experiencing perimenopause and menopause for Washington state agencies. More to come as we work to coordinate with the Governor's office.

### WORKPLAN UPDATE

Beth transitioned the group to reviewing our workplan update. Dr. Saint Clair grounded the group as below, reminding the workgroup:

- To not reinvent the wheel
- Use the available guidelines, research and clinical expertise/judgment to simplify perimenopause and menopause management for all audiences
- Today's goal is to review of draft of guidelines for symptom management and comprehensive midlife health across all identified audiences

### EVIDENCE REVIEW

Beth transitioned the meeting to a brief evidence review of Australasian Menopause Society and other Australian-based organization guidelines for perimenopause and menopause. Discussion as below:

- Australasian Menopause Society guidelines could be useful as a framework, and the group appreciated the clinical algorithms for interpreting how to navigate care for perimenopause and menopause

- Review of several studies reviewing contemporary formulations of MHT, including KEEPS, ELITE, DOPS, E3N Cohort, etc. Comparing oral and transdermal estrogen, progestin types, and identifying differences in associated risks.
- Question arises around minimum standard of care for primary care providers, clear guidelines should help clinicians recognize when to manage cases themselves and when to refer to specialists
- Nonhormonal and Complementary and Alternative Medicines
  - Discussion centered on the North American Menopause Society (NAMS) position statement on non-hormonal treatments for vasomotor symptoms (VMS), with interventions classified into 'Recommended' and 'Not Recommended'.
  - Group members expressed concern that labeling interventions a 'not recommended' could lead to dismissal, advocating for a more nuanced approach
  - Important to acknowledge all interventions carry some risk, research outcomes depend heavily on how the question is framed

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#### **PUBLIC COMMENT AND GOOD OF THE ORDER**

Dr. Saint Clair invited final comments or public comments, and thanked all for attending.

- Denise: many individuals experience perimenopausal symptoms before menstrual irregularity, urging the group to consider support for earlier identification and intervention to prevent unnecessary distress; clinicians should be prepared to validate and address symptoms even when they don't fit traditional definitions to reduce anxiety and improve patient outcomes.

The workgroup's next meeting will be on **Wednesday, July 8<sup>th</sup> from 2:30-4PM PST.**