

## **MENOPAUSE & HORMONE REPLACEMENT THERAPY**

### **Menopause**

Menopause occurs to all women, usually around the age of 50 (45-55 years old). This leads to the ovaries stopping releasing eggs each month, and therefore loss of monthly menstrual periods, as well as stopping production of the female hormones, oestrogen and progesterone.

Around the time of menopause, menstrual periods become more or less frequent. Periods may also be shorter in duration. There may also be symptoms of menopause, such as hot flushes. The onset of menopause may be difficult to detect if a hysterectomy has been done.

Some women have minimal symptoms of menopause, but some can have very significant symptoms impacting on their quality of life. Symptoms of menopause include:

- Hot flushes
- Night sweats
- Mood disorders, eg. Depression
- Vaginal dryness
- Insomnia
- Difficulty concentrating

### **Non-medical treatments of menopause**

#### **HOT FLUSHES & NIGHT SWEATS**

- Quit smoking
- Do not have temperature set high (eg. Above 19 degrees) on heaters/ central heating
- Avoid hot drinks
- Use water aerosol spray/ cold washcloth during hot flushes

#### **VAGINAL DRYNESS**

- Always use lubricants before sexual intercourse eg. KY jelly
- Use a vaginal moisturiser

#### **SLEEP PROBLEMS**

- Try not to sleep during the day
- Try to maintain a regular sleep routine
- Try to ensure good “sleep hygiene” eg. Don’t watch TV before bed, don’t drink caffeinated drinks such as Coke, tea or coffee, after 3pm

#### **DEPRESSION**

- Exercise, as this helps with mood
- Seek social support from other women

## Hormone Replacement Therapy

Hormone Replacement Therapy (HRT) refers to the administration of female hormones (oestrogen only if previous hysterectomy has been done or oestrogen + progesterone if the women still has a uterus).

Oestrogen replacement is available in patch or tablet form. Progesterone replacement is in tablet form.

“Bioidentical hormones” are available over the internet in tablets/ creams/ patches. The type and amount of active hormones in these preparations is not regulated and quality is unknown. They are not scientifically proven, particularly the assertion that they result in fewer side effects.

### PROS AND CONS OF HRT

Most of the concern regarding long-term use of HRT came from results of the Womens Health Initiative (WHI) trial, which was designed to look at the influence of HRT on the risk of heart attacks and strokes in women after menopause.

The WHI trial found a higher risk of breast cancer, heart attack, blood clots and strokes in older postmenopausal women taking combination oestrogen + progesterone. This risk did not increase until HRT had been used for over 5 years after menopause.

In women on oestrogen only HRT, there was a small increased risk of strokes and blood clots, but there was no increased risk of heart attacks or breast cancer.

#### Pros

- Improvement in symptoms of menopause
- Improvement in bone density/ prevention of bone loss
- some experts think that oestrogen treatment might be helpful for preventing dementia if you take it in the early years after menopause (although this is not proven); taking it many years after menopause seems to be harmful
- Oestrogen may be a helpful tool in women who develop depression after menopause (in combination with other therapies)
- Improving sleep

#### Cons

- The risk of having a heart attack related to use of hormone therapy appears to depend on your age. There is NO increased risk of heart attacks related to hormone therapy in women who became menopausal less than 10 years before starting hormones **or** Were 50 to 59 years when they took hormone therapy. Women who become menopausal more than 10 years ago or over age 60 years were at increased risk of having a heart attack related to hormone therapy.
- There is a small increased risk of breast cancer in women who took combined oestrogen-progestin therapy, but not in women who took oestrogen alone. Experts think that it takes about 10 years or more of oestrogen use (alone) before the risk goes up, but only 5 to 6 years if you take both hormones. After that, the risk will continue to go higher if you keep taking oestrogen.
- In women on oestrogen only HRT, there was a small increased risk of strokes and blood clots,

but there was no increased risk of heart attacks or breast cancer.

Hormone therapy is not recommended for women with the following:

- Current or past history of breast cancer
- Coronary heart disease
- A previous blood clot, heart attack, or stroke
- Women at high risk for these complications