Oestrogen, Progesterone and Testosterone are female hormones produced from the ovary in reproductive life. In HRT the Oestrogen (and Testosterone where needed) will make you feel better. Progestogens are needed (if you have a womb), to protect the lining of the womb. There are different forms available.

Your doctor will explain what they think is the right combination of hormones for you, what route they recommend and how to take them. Most HRT is not contraceptive.

Replacement of missing hormones under the age of 50 does not change risk.

**BENEFITS and CONCERNS of HRT**

1. **Symptom relief** Not all women have all symptoms, but they can be severe.

|  |  |
| --- | --- |
| Hot flushes / Night sweats | Anxiety / depression / low mood |
| Poor sleep / Insomnia | Loss of energy |
| Poor memory / poor concentration  | Loss of sexual interest |
| Pains in the muscles | Difficulty in decision making |
| Pains in the joints | Loss of self confidence |
| Dryness of the hair / skin / nails / eyes | Headaches |
| Dryness of the vulva-vagina | Itchy skin |

1. **Osteoporosis**

Bone density can deteriorate rapidly after the menopause. The risk of a fragility fracture in women age 50-60 is low and varies according to an individual woman’s risk factors. Fracture risk is reduced whilst on HRT. Oestrogen can prevent and treat the thin fragile bones of osteoporosis.

|  |  |  |
| --- | --- | --- |
| **For 100 women aged 63** | **No HRT** | **E/P HRT 5yrs** |
| Hip fracture | 0.8 (8 in 1000) | 0.5 (5 in 1000) |
| Vertebral fracture | 0.7 (7 in 1000) | 0.5 (5 in 1000) |

1. **Dementia / Alzheimer’s disease**

The effect of HRT on the risk of dementia is uncertain, but there are some studies that suggest HRT helps prevention.

1. **Muscle mass and Strength**

There is some evidence that HRT improves muscle mass and strength

1. **Colon Cancer**

HRT is thought to be protective against cancer of the colon, although a woman’s risk will be due to her individual risk factors combined.

**6 Venous Thrombo-embolic disease**

The chance of a serious blood clot is much higher in smokers, older women, pregnant or obese women and those with a blood clotting disorder. Women on the combined pill or Oral oestrogen HRT have a slightly increased risk, but NOT those on non-oral HRT.

**7 Ovarian Cancer**

It is though there may be an extra 1:1000 chance of developing ovarian cancer with use of combined HRT, but this needs further study.

**8 Breast Cancer**

The risk of developing breast cancer age 50-60 varies with individual risk factors. HRT with Oestrogen alone does not change the risk to an individual. HRT with Oestrogen and Progestogen can increase the risk. Additional risk is related to duration of treatment. Stopping HRT reduces this risk back to the general population risk after 5 years.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **For 1000 women aged 50-59** | **No HRT – General population risk** | **E only HRT use for 7.5 years** | **E/P HRT use for 7.5 years** |
| 1 | Risk of Breast cancer | 15 in 1000 | 4-5 fewer | 5-8 more |
| 2 | Risk of blood clot (VTE) | 3 in 1000 | 1 more | 4-6 more |
| 3 | Risk of Stroke | 3 in 1000 | 0-3 more | 4-6 more |
| 4 | Risk CVS disease |  | 6 fewer | 5 more |
| 5 | Risk of Ovarian Cancer | 2 in 1000 |  | 1 more |
| 6 | Risk fragility fracture |  | 15-25 fewer | 15-25 fewer |

**9 Cardiovascular Disease**

There is NOT thought to be an increased risk of cardiovascular disease or dying from cardiovascular disease when taking HRT up to the age of 60, and it may be beneficial.

Having cardiovascular risk factors is not a contraindication to HRT. The risk for a woman of having cardiovascular disease is a combination of her individual risk factors. HRT with Oestrogen alone is associated with no or decreased risk of cardiovascular disease. HRT with Oestrogen and Progestogen is associated with little or no increase in the risk of cardiovascular disease.

The risk to the body from smoking, excess alcohol or obesity is much higher than that of HRT, although these risks are cumulative.

**10 Stroke** Taking oral (but not transdermal) oestrogen is associated with a small increase in the risk of stroke, although the background risk of stroke in women under 60 is very low.

**11** **Diabetes**

HRT is not associated with any increased risk of developing type 2 Diabetes. Diabetes is not a contraindication to taking HRT.

**Further information:**

**http://www.nice.org.uk/guidance/ng23/informationforpublic**

[www.menopausematters.co.uk](http://www.menopausematters.co.uk)

[www.the-bms.org.uk](http://www.the-bms.org.uk) (British Menopause Society)

[www.daisynetwork.org.uk](http://www.daisynetwork.org.uk) (Premature Ovarian Dysfunction)

[www.pms.org.uk](http://www.pms.org.uk) (National Association of Premenstrual Syndrome)

[www.nos.org.uk](http://www.nos.org.uk) (National Osteoporosis Society)