

# Information about Hormone Therapy or HT

**Results from an American study called the Women's Health Initiative (WHI) and some other studies have provided important new information for women about HT.**

## What is HT?

HT is a hormone medicine which decreases or stops hot flushes and night sweats which some women have at menopause. HT comes in pills, implants, creams and gels, or patches applied to the skin.

HT consists of either estrogen and progestogen (combined therapy) or estrogen only. Women who have had a hysterectomy (removal of the uterus) who wish to use HT can use estrogen only. Women with a uterus who wish to use HT are advised to use combined therapy as estrogen only can cause cancer in the endometrium (lining of the uterus). When progestogen is added, the endometrium is protected.

## Menopause

Menopause is a natural process that occurs in all women, usually at around 40-55 years of age. At menopause, a woman's own estrogen levels fall and menstruation stops. The main symptoms of menopause are hot flushes and night sweats.

Symptoms vary between women from mild to severe although some women have no symptoms at all. In some women the symptoms last for less than one or two years, but other women have them longer. Some women also experience vaginal dryness.

Although a number of psychological symptoms such as depression, anxiety, forgetfulness and loss of interest in sex are often blamed on menopause, there is no evidence that these are especially part of menopause. These symptoms can occur in men and women and people of all ages. Severe hot flushes and night sweats can disrupt sleep causing tiredness and irritability. Vaginal dryness can cause discomfort and pain during sex. Managing these symptoms will usually help with these problems.

## How long is it safe to use HT?

There is no completely safe length of time for using HT. Some risks of taking HT start as soon as it is used, eg. blood clots. Other risks appear at 1-2 years.

## How to come off HT

The only way to know that your symptoms have gone is to stop the HT and this can be done yearly.

There is no best way to stop HT. You can stop immediately or do this gradually by cutting down the dose over a period of some months. Hot flushes may occur during this withdrawal but they may be less intense and may not last for long. Some women have more trouble coming off HT and may want to talk to their doctor about going on using HT or another alternative.



POSITIVE SEXUAL HEALTH

**Family Planning**

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## HT AND CHANGE IN RISK FOR WOMEN AGED 50-79 YEARS

	Number of harmful/ beneficial events in 10,000 women in 1 year NOT USING HT	Extra or fewer harmful events in 10,000 women in 1 year USING COMBINED HT	Extra or fewer harmful events in 10,000 women in 1 year USING ESTROGEN ALONE
Breast cancer	30	8 more	no change
Stroke	21	8 more	12 more
Clots in leg and lungs	8	18 more	7 more
Dementia/Alzheimers in women 65 or older	22	23 more	no change
Colorectal cancer	16	6 fewer	no change
Hip fractures	15	5 fewer	6 fewer

Women in the WHI studies were 50-79 years old (mean age 63 years). Most women who use HT for symptoms are much younger and the table below gives the excess risk for these women.

## HT AND CHANGE IN RISK FOR WOMEN AGED 50-59 YEARS

	Extra numbers of harmful events in 10,000 women in 1 year USING COMBINED HT	Extra numbers of harmful events in 10,000 women in 1 year USING ESTROGEN ALONE
Breast cancer	5 more	no change
Stroke	2 more	3 more
Clots in leg and lungs	11 more	4 more

### Breast cancer and mammography

Combined HT increases the risk of breast cancer and the risk increases the longer it is taken. Mammography may be less effective in women using combined HT which can increase the density of breast tissue making mammograms hard to read. The cancers found in women using combined HT are larger and more advanced than those in women not using HT.

The increased risk of breast cancer may appear within 1-2 years of starting HT.

Evidence from the WHI study has not found an increase in breast cancer for women using estrogen only but other studies have shown an increase with longer duration of use.

### What happens when HT is stopped?

About 2.5 years after stopping hormones, the increased risk of stroke and clots in the legs and lungs disappears as does the decrease in risk of hip fractures. When combined HT is stopped the risk of breast cancer decreases but does not disappear completely and there may be a small increase in breast cancer deaths. In addition there is a small increase in risk of dying from a certain type of lung cancer even 6 years after combined HT is stopped. Estrogen only use had no effect on the risk of this type of lung cancer.

### Vaginal dryness and urinary symptoms

Some women have vaginal dryness after menopause which is uncomfortable and can make sex painful. Vaginal estrogen cream increases vaginal moisture and is safe to use in low doses that minimise absorption into the blood stream. This is only available with a prescription. Vaginal estrogen can also help decrease recurrent urinary tract infections and symptoms of irritable bladder.

Another effective treatment for vaginal dryness is Replens, which is a non-hormonal moisturiser. It does not require a prescription.

### Who should use HT?

If you have hot flushes and/or night sweats that are interrupting your daily life you may want to use HT for a few years. Your doctor will check that you have no contraindications for using hormones.

## For women on HT

If you are on HT you need to review your use with your doctor if you have not already done so. Things to discuss with your doctor:

- Why you are using HT
- How long you have been on it
- Risks and benefits of HT
- Other options

## Hormone Therapy

- Should not be used long-term because the risks outweigh the benefits
- Increases the risk of blood clots and strokes for women using combined and estrogen only HT
- Increases the risk of breast cancer for women using combined HT
- Increases the risk of dementia in older women using combined HT
- Should not be used to prevent or treat heart disease, dementia or stroke
- Is effective for controlling hot flushes and night sweats
- Does not improve mental ability or memory
- Women with a uterus should use combined therapy which contains both estrogen and progesterone.

## Other information about HT

- HT increases the risk of gall bladder disease

There is no clear evidence that HT:

- Prevents skin ageing or wrinkles
- Improves sex drive.

## Alternatives for hot flushes

The remedies below are often suggested for hot flushes and night sweats. There is little information about the safety of these alternatives, especially when used long-term.

**Black cohosh** (*cimifuga racemosa*) is a herb that is available from herbalists, health food shops and some pharmacies. A recent large Cochrane review study found that it is not helpful for hot flushes. Long-term safety has not been studied.

**Phytoestrogens** are plant hormones that are found in some foods and in supplements. Phytoestrogens are estrogens and they are not necessarily safe just because they come from plants. There is some evidence that foods containing phytoestrogens or phytoestrogen supplements may help with hot flushes, though not all studies show this effect. Long-term safety has not been studied.

**Natural progesterone cream** is widely advertised for menopausal symptoms, but there is actually little evidence that it helps. There are only 2 studies showing that it helps with hot flushes. Other studies did not show this. It can only be obtained on a doctor's prescription.

## To keep healthy at mid-life:

- Exercise regularly
- Reduce stress
- Eat a varied, low-fat diet
- Stop smoking
- Drink alcohol only in moderation
- Have regular cervical smears from 20 years and mammograms after 45 years. These strategies will help reduce the risk of heart disease, bone fractures, and some cancers.

## For more information

**TALK** to your doctor or health care provider

**CONTACT** Women's Health Action, a women's community group, for the pamphlets:

*Help with Hot Flushes, Heart Health for Women at Mid-life and After* and *Move It or Lose It: A Guide to Exercise for Women at Mid-life and After*.

Phone 09 520 5295 or write to PO BOX 9947, Newmarket, Auckland, or email [info@womens-health.org.nz](mailto:info@womens-health.org.nz).

**LOOK** at the following web sites:

[www.womens-health.org.nz](http://www.womens-health.org.nz) for links to the WHI and other websites  
[www.whi.org](http://www.whi.org) the WHI study web site, including updates on the study  
[www.nhlbi.nih.gov/health/women/index.htm](http://www.nhlbi.nih.gov/health/women/index.htm) for facts about HT, FAQs and additional resources

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