



Hormone Replacement Therapy (HRT)

One of the most well-known medical treatments for perimenopause is Hormone Replacement Therapy or HRT. HRT is a medication containing copies of the hormones that your body naturally produces - called oestrogen and progesterone - but which begin to decrease as you approach menopause.

How does HRT work?

A fall in oestrogen can have the most impact on your body and mind. Low levels of oestrogen can cause many of your perimenopausal symptoms, so it is the most important hormone to replace first. You can take oestrogen in tablets, or apply it onto your skin as a gel, patches or a spray.

During a normal menstrual cycle, the natural balance of oestrogen and progesterone keeps your womb lining healthy. If you have a womb and take oestrogen as part of HRT, you also need to take progesterone to protect your womb lining and reduce your risk of developing womb lining (endometrial) cancer. You can take progesterone with your oestrogen as a patch or tablet. It can also be given separately as a tablet or as a hormone-releasing contraceptive coil (that can be put in your womb by your GP or local coil service).

It is important not to increase your oestrogen dose without checking with your doctor, to ensure that your progesterone dose is correct. If you are experiencing vaginal pain or dryness, you can use oestrogen in the form of a pessary or a cream that you put in your vagina. If you only use vaginal oestrogen, you do not need to take additional progesterone as the dose is too low to affect the lining of your womb.

What are the benefits of HRT?

HRT should improve symptoms caused by low oestrogen.

Some women describe feeling more like themselves again once they start taking it; they might have better mood and sleep, fewer aches and hot flushes, they may want and enjoy sex more, and feel brighter and more alert. Oestrogen also protects your bones, reducing the risk that you will break one.

If HRT is started within 10 years of the menopause, there may be other benefits, such as helping reduce your risk of heart attacks and colon cancer.

What are the side effects and risks of HRT?

Most people don't experience side effects from taking HRT as their body is already making some of the same hormones. Vaginal bleeding or spotting is the most common side effect. This normally settles within the first 3 months of taking HRT. Other less common side effects are like those that you may have experienced with periods such as bloating, breast tenderness, or nausea. If you do experience side effects, changing the dose of HRT can be helpful.

The HRT doesn't work

For some people, HRT doesn't reduce their symptoms. This might be because their dose of HRT is too low, their bodies are not absorbing the medication, or their symptoms are due to conditions other than the perimenopause. If HRT is not working, you should go back to your doctor to find out why.

Cancer

HRT can slightly increase the risk of breast cancer. If you've had breast cancer, you'll usually be advised not to take HRT. Your individual risk of developing breast cancer depends on underlying risk factors, such as your family history, body weight and your drinking and smoking habits.

The increased risk is low: there are around 5 extra cases of breast cancer in every 1,000 women who take combined HRT for 5 years. The risk increases the longer you take it, and the older you are. It falls again after you stop taking it.

There is a smaller increase in the risk of breast cancer from oestrogen-only HRT, which you can take if you've had a hysterectomy to remove your womb.

There are also lifestyle changes that can reduce the risk of breast cancer.

Clots

HRT tablets (but not patches or gels) are linked with a higher risk of developing a blood clot.

If you are already at higher risk of blood clots (for example, you are obese) and you are considering HRT, you may be offered patches or gel rather than tablets.

If you have a strong family history of blood clots or if there's another reason why you are at high risk of blood clots, you may be referred to a haematologist (a doctor who specialises in blood conditions) before considering HRT.

How long do I take HRT for?

Doctors used to say that women should take the smallest amount of HRT for the shortest amount of time. This is changing and it seems that it is safe to be on HRT for many years, especially if it is helping with how you feel. Most women will stop their HRT after a while, and this can be done by slowly going to lower doses and checking for further symptoms.



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