Overview of Menopause and HRT

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What is the menopause?

Menopause actually means your last menstrual period. It is often difficult to know when this is for many women, especially if you are having more scanty and irregular periods.

We often use the term perimenopause, which describes the time when you have menopausal symptoms before your periods actually stop all together. Some women continue to have regular periods even though they experience numerous symptoms of the menopause.

Women are said to have gone through their menopause (so be postmenopausal) when they have not had a period at all for one year. The average age of the menopause in the UK is 51 years. It is common to have some menopausal symptoms when you are in your late 40s.

Your menopause is described as being early if it occurs before the age of 45 and it is called Premature Ovarian Insufficiency (POI) if it occurs before the age of 40 years. Women who have an early menopause or POI absolutely need to take hormone replacement therapy (HRT) as there are absolutely no risks of taking HRT at a younger age. POI will not be discussed in this leaflet.

What causes the menopause?

The menopause occurs when your ovaries stop producing eggs and make less oestrogen (the main female hormone). This is usually a result of being older and is a normal process. However, there are some reasons that you can experience an early menopause which include:

- If you have surgery. If you have your ovaries removed in an operation then it is very likely you will experience menopausal symptoms straight away, which can often be very severe. It is important that you discuss the option of HRT to your doctor before having an operation. If you have had a hysterectomy (removal of your womb) then your ovaries are actually more likely to stop working properly earlier than they would do otherwise.
- If you have radiotherapy to your pelvic area as a treatment for some types of cancer.
- Some chemotherapy drugs that treat some types of cancer can lead to an early menopause occurring.
- An early menopause can run in some families. So it can be worthwhile asking your mother how old she was when her periods stopped.

What are the common symptoms of the menopause?

The menopause is a natural event. Every woman will go through it at some point. Some women have very few or even no symptoms and their periods simply stop happening. However, for the majority of women it is not so straightforward and around 80% of all women experience several symptoms. Around 25% of these women have very severe symptoms.

The symptoms you may experience vary between different women. These symptoms often have a very negative impact on your life and can really affect your relationships with your partner, family and work colleagues.

Some women notice that their periods gradually become lighter and more irregular. However others will find that their periods become more frequent and heavier.

Commonly known symptoms include:
- Hot flushes
- Night sweats
- Mood swings
- Tiredness
- Lack of libido
- Poor sleep
- Poor concentration

There are other symptoms which can often occur but many women do not realise these are due to the changes in their hormone levels.

Less commonly known symptoms include:
- Heavy periods
- Joint pains
- Hair and skin changes (such as dry or itchy skin)
- Depression, anxiety and irritability
- Poor memory
- Panic attacks
- Worsening PMS (premenstrual syndrome)
- Vaginal dryness, itching or soreness
- Pain during sexual intercourse
- Urinary symptoms such as increased frequency passing urine

Some women only experience symptoms for a few months. For many other women their symptoms may last a few years. However, for around a third of women symptoms can last for more than ten years!

Commonwealth

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There is a wealth of information available to you on the Internet, in books and in articles on this subject. However, much of it is out of date, inaccurate and / or misleading! My website contains some really useful facts and information.
What are the health risks from the menopause?

If these symptoms are not enough, there are actual health risks when you go through the menopause.

Osteoporosis

In our bodies there are cells which are constantly laying down new bone and other cells which are reabsorbing older, worn-out bone. As we get older this balance changes so more bone is removed than laid down. This can lead to thinning of the bones, which is known as osteoporosis. Osteoporosis is much more common after the menopause as oestrogen works to keep the bones strong, so as oestrogen levels fall the bone loss becomes more rapid.

Having osteoporosis increases your risk of fracturing (breaking) a bone. This can obviously be painful but also lead to other problems. Some women with osteoporosis have small fractures in the bones of their spine, which can be very painful. Fracturing your hip can really affect your future quality of life and many people lose their independence after a hip fracture.

Cardiovascular disease

Cardiovascular disease means disease of your heart and blood vessels so includes heart attacks and strokes. Your risk of cardiovascular disease increases after the menopause as oestrogen is very important at keeping your blood vessels healthy.

Testing for the menopause

For most women over the age of 45 years who have typical symptoms of the menopause do not need any tests to make the diagnosis. You may be advised to have blood tests such as your cholesterol level or other hormone levels or a DEXA scan which is used to diagnose osteoporosis.

It is important that you keep up to date with regular smears and breast screening.

Hormone replacement therapy (HRT)

HRT is only one type of treatment for the menopause. It is the most effective treatment available to improve your symptoms and it can also work to reduce your risk of osteoporosis and cardiovascular disease.

It is a real shame as over the past ten years or so, HRT has been given a negative press so many women are scared and worried about taking it. The negative reports are largely due to a large trial that was reported in 2002 (called the Women’s Health Initiative (WHI) Study) which has since been shown to be flawed. It actually studied women who are much older (in their 60's) and they were given types of HRT that we do not even prescribe nowadays. Interesting, the authors of this study have recently apologised in a mainstream medical journal (NEJM) as they admitted that people misinterpreting the results of their study is one of the main reasons that women are unnecessarily worried about taking HRT.

For the majority of women under the age of 60 years, the benefits of HRT really do outweigh any risks. This means that it is safe to take HRT and taking HRT can provide you with positive effects to your health, especially your bones and heart.

What is HRT?

HRT is treatment that contains hormones. The type of hormones you need and the doses you are given vary between each woman. So it is not a “one type fits all” prescription. All types of HRT contain an oestrogen hormone. This replaces the oestrogen that your ovaries no longer make after the menopause.

HRT is available as tablets, skin patches or gels. There are several brands for each of these types of HRT.

If you still have your womb (so have not had a hysterectomy) then you will also need to take a type of progesterone which is usually given as a tablet. This is because if you just take oestrogen then the lining of your womb (uterus) builds up. This can increase your risk of developing cancer of the uterus. There is no risk of cancer of your uterus when you also take the progesterone. In some HRT products, the oestrogen and progesterone are combined in the same tablet.

If you are still having periods when you take HRT then the type of HRT you will be given will lead to you having regular periods. If it has been more than a year since your last period or you have been taking HRT for a year then the type of HRT can be changed to one that you will not have periods.

Testosterone is another hormone that women produce. Although it is also the male hormone, women produce it in lower amounts and it is an important hormone. Lower levels occur during the menopause and can cause symptoms such as poor concentration, low energy and reduced libido (sex drive). Testosterone is usually given as a gel which you use every day. Your menopause doctor will be able to talk to you about this in more detail.
Benefits of HRT

HRT works really well to ease the symptoms of the menopause. HRT is a safe and effective treatment for most healthy women with symptoms, who are going through the menopause at the average age in the UK (about 51 years). It has benefits and risks, which are discussed below. The benefits and risks of HRT will vary according to your age and any other health problems you may have. You will have the opportunity to discuss any potential risks of HRT to you in detail in the menopause clinic.

Taking HRT reduces your future risk of osteoporosis. Even the low dose types of HRT provides bone protection to women. Starting HRT when you are less than 60 years of age also reduces your risk of developing cardiovascular disease.

Risks of HRT

The risks of HRT depend on the type of HRT you are given and also other factors such as your age and your general health. This is why it is so important to have an individualised consultation in which you can discuss your actual risks. HRT can increase your risk of developing certain problems but this increase in risk is very small in most cases.

Women who take some types HRT as tablets have a small increased risk of developing a clot in their veins or a stroke. You are more likely to develop a clot or have a stroke if you have other risk factors for these conditions. These include being obese, having a clot or stroke in the past or being a smoker.

This risk of clot or stroke is not present for women who use patches or gel rather than tablets of HRT. So women who have an increased risk of clots or stroke are usually given these types of HRT.

Many women worry about breast cancer when taking HRT. Some types of HRT do not increase the risk of breast cancer whereas others may increase the risk. This increased risk is very small, around one extra cases of breast cancer in one thousand women for each year of taking HRT. This increased risk is similar to drinking a couple of glasses of wine each night. It is important to know that there have never been any studies showing that taking HRT increases the risk of death from breast cancer.

Women who take combined HRT have an increased risk of having an abnormal mammogram, as HRT increases the density of your breast tissue. This is not the same as increasing the risk of breast cancer.

There is no increased risk (and probably a reduced risk) of breast cancer if you have had a hysterectomy in the past and are just taking oestrogen without progesterone.

In addition, there is no increased risk of breast cancer in women who take HRT under the age of 51 years.

Side effects of HRT

Side effects are problems that are not serious but may occur in some women. Side effects with HRT are uncommon but if they do occur then they usually happen within the first few months of taking HRT and then settle with time as your body adjusts to taking the hormones.

In the first few weeks you may develop a slight feeling of sickness (nausea), some breast discomfort or leg cramps. HRT skin patches may occasionally cause irritation of the skin in some women.

A change to a different brand or type of HRT may help if side effects occur. Various oestrogens and progestogens are used in the different brands. If you have a side effect with one brand, it may not occur with a different one. Changing the delivery method of HRT (for example, from a tablet to a patch) may also help if you experience side effects.

Other details about HRT

- There are more benefits to your health from starting HRT early
- You do not have to wait for your symptoms to become severe before considering taking HRT
- There is no maximum length of time you can take HRT for
- HRT is not a contraceptive
- HRT does not work by “delaying your menopause”
- If you have menopausal symptoms after stopping HRT then these are symptoms you would otherwise experience if you had never taken HRT
- HRT is beneficial for most women
- Taking HRT can give you your life back!

The benefits of HRT have to be balanced against any risks. You have to decide what is right for you, with advice from the menopause clinic, depending on your individual circumstances.
Dr Louise R Newson  
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Louise qualified from Manchester University in 1994 and is a GP and menopause expert in Solihull, West Midlands, as well as a writer for numerous medical publications. She compiles and updates patient information leaflets for the multiple award winning website Patient.info. These are on various clinical subjects providing up-to-date information with links to recent references and guidelines.

Louise works as a medical editor for GP magazine and has authored several books on evidence-based medicine for general. She is an Editor for the British Journal of Family Medicine (BJFM) and Geriatric Medicine journal. She commissions articles for the BJFM’s regular Women’s Health supplement. She is an Editor and Reviewer for various e-learning courses and educational modules for the RCGP. She writes regular articles for GPonline.com, MIMS Learning, Independent Nurse and Practice Nursing. Louise also writes articles and courses for www.OnMedica.net.

She has a keen interest on the menopause and HRT. She feels passionately about trying to improve awareness of safe prescribing of HRT to healthcare professionals and women and has written many articles, editorials and given local and national presentations on this subject. She is the West Midlands lead for the Primary Care Women’s Health Forum. She runs a menopause clinic in Solihull and she is a member of the International Menopause Society and the British Menopause Society.

Louise has contributed to healthcare articles in many different newspapers and magazines including: The Guardian, Daily Mail, Pregnancy and Birth, Country Life, Prima Baby, Now, Reveal and Heat. She writes a regular healthcare column for a Warwickshire and Cotswolds magazine, The Edge.

She has also been involved in television and radio work; she has given live interviews for BBC News 24 and has presented on programmes for “Health Livetime” for Granada. She has been interviewed on health matters on radio stations including Radio 4’s Woman’s Hour and BBC 5 live. Louise has participated in Embarrassing Bodies Live from the Clinic as one of their regular GPs in addition to being Maverick TV’s medical consultant for this show and also “Born Naughty” which was a series looking into children’s behaviours.

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