

Menopause Clinic

Hormone Replacement Therapy
and Breast Cancer



local care:
global impact

Why should I take HRT?

Most women enter the menopause in their late 40s or early 50s. This is when previously regular periods can start to become infrequent and stop. Around this time the majority of women can experience menopausal symptoms such as hot flushes, night sweats, vaginal dryness and mood changes.

For a few women the symptoms will be transient but others find them disruptive to their every day life for up to five years and a small number of women find the symptoms remain severe for many years.

Clinical studies have proved that HRT is effective for the relief of these symptoms. There is good evidence that HRT use defers the loss of bone density and reduces the risk of osteoporosis and fractures.

What type of HRT would I need?

If you are experiencing menopausal symptoms and you are still having periods then you will need to take:-

Sequential HRT

This means you take oestrogen daily with the addition of progestogen for 10 or 12 days in each 28 day cycle.

If you have not had a period for 12 months or age 53/54yrs you can have:- **Continuous Combined Therapy**

This means taking oestrogen and progestogen together daily. Using this method does not reinstate your periods although some spotting or light bleeding is not uncommon in the early months of use.

A drug called Tibolone is another method used to treat symptoms in the same way without causing the return of monthly bleeds.

Hysterectomy

If you have had a hysterectomy (removal of your womb) then you usually will require oestrogen only HRT.

What is the risk of developing breast cancer if I take HRT?

Scientific evidence suggests that a small increased risk of developing breast cancer with HRT differs depending on the type of HRT used.

Combined HRT- (oestrogen + progestogen) probably accounts for 5 extra cases per 1000 women over 7.5 yrs between the ages of 50-59 years. There appears to be no increase in the risk for shorter term use of less than 3 years.

Oestrogen only HRT- the use of oestrogen only therapy is associated with little to no increased risk of breast cancer.

Tibolone- the risk with Tibolone appears to be similar to that of oestrogen and progestogen therapy.

How long should I take HRT?

This is not an easy question to answer and must be made on an individual basis as some women experience symptoms life long. It is recommended that if you take HRT for symptom relief, that continuation of this should be reviewed at regular intervals, yearly intervals and a risk benefit analysis performed.

What causes breast cancer?

Some cancers are strongly linked to one single causative agent for example (smoking and lung cancer). Breast cancer has no known single cause and multiple factors have been identified which may increase women's risk of developing breast cancer during her lifetime these include:-

- Excess body weight when over the age of 50yrs
- Never having had a baby
- Having your first baby over the age of 35yrs
- Not breast feeding
- Increased alcohol intake
- Use of the combined contraceptive pill within the past 10yrs
- Having a mother or sister who has suffered breast cancer under the age of 50 years.

Having a risk factor does not mean that a women will develop breast cancer and even if a risk factor is identified in a women with breast cancer there is no way of proving that this or that hormone replacement therapy (HRT) was the cause.

Hormone replacement therapy and breast cancer

Studies on the use of HRT after the age of 50 suggest there is a small increased risk of breast cancer with the length of time it is used. Other studies would suggest that the risk is only associated with some HRT regimes and not with all forms of HRT.

Premature Menopause

If you have had a premature menopause for any reason and have used HRT before the age of 50 years you can be reassured, because you only need to start to count your risk when you continue HRT beyond the age of 50 years.

Starting HRT in Your 50s

If you start taking HRT at around 50 years of age it would be reasonable to consider whether you still need it after about 3-5 years. Reducing the dose gradually can help you identify whether you have any recurrence of symptoms.

It seems that the older women become the less oestrogen they need for symptom relief and other benefits but as yet there is no known evidence that smaller doses of HRT are safer.

What about breast cancer risk if I stop HRT?

The risk of developing breast cancer associated with taking HRT diminishes when you stop taking the therapy and is no longer evident after five years.

You must remember that the background population risk still remains and you should continue to attend for your mammographic screening when requested.

Further Information

The following web-sites are for information purposes only. Birmingham Women's Foundation Trust is not responsible for the contents.

Further Information

The British Menopause Society

A registered charity dedicated to increasing awareness of post menopausal healthcare issues. www.thebms.org.uk

NHS Cancer Screening Programme

www.cancerscreening.nhs.uk

Breast Cancer Care

Information, practical and emotional support for anyone affected by breast cancer.

www.breastcancercare.org.uk

Women's Health Concern

Accurate and up to date information on women's health issues.

www.womens-health-concern.org

Menopause Matters

Accurate and up to date information about the menopause and its treatment options.

www.menopausematters.co.uk

Birmingham Women's Hospital

Dedicated menopause clinic with twice weekly clinics and a clinical nurse specialist help line.

Help line 0121 626 4522

If you need more advice please contact:

Birmingham Women's NHS Foundation Trust

Mindelsohn Way, Edgbaston,
Birmingham B15 2TG

Telephone: 0121 472 1377