

# **MENOPAUSE & HRT**

**Joanne McManus MD FRCOG**

**Consultant Gynaecologist & Menopause Specialist**

**Belfast Health & Social Care Trust**

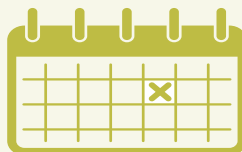
# A woman's relationship with the menopause is complicated...



Three quarters of women\* in the United Kingdom say that the menopause has caused them to change their life and more than half say it has had a negative impact on their lives.\*\*

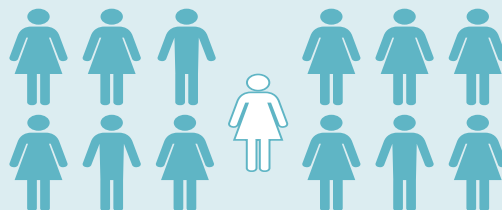
## Work can be a struggle

**45%**  
of women say they feel their menopause symptoms have had a negative impact on their work



**47%**  
who have needed to take a day off work due to menopause symptoms say they wouldn't tell their employer the real reason

## Social lives can take a back seat



Over **33%**  
of women feel less outgoing in social situations

**32%**  
of women feel they are no longer good company

**23%**  
of women feel more isolated

## Sex can be off the menu

**51%** of women say that their menopause had affected their sex lives



**42%**  
of women also say they just didn't feel as sexy since experiencing the menopause

## Partners are left feeling helpless

**38%** of partners say they feel helpless when it comes to supporting their partner through the menopause



**28%**  
of partners say they often end up having arguments "because they don't understand what she is going through"

\* Either currently experiencing menopausal symptoms OR have experienced menopausal symptoms within the last ten years.

\*\* Whose menopause symptoms strongly affected their life.

**About the findings in this infographic:** On behalf of the British Menopause Society, Edelman Intelligence conducted online interviews with 1,000 adults in the UK (698 women and 302 men) who were aged 45+ and either peri-menopausal, menopausal or post-menopausal or partners of those who are in a relationship with a woman who is either peri-menopausal, menopausal or post-menopausal, nationally representative of the online population in terms of regional spread.



www.womens-health-concern.org  
Reg Charity No: 279651  
Company Reg No: 1432023

For further information and support, including our telephone and email advisory service – please visit

[www.womens-health-concern.org](http://www.womens-health-concern.org)



www.thebms.org.uk  
Reg Charity No: 1015144  
Company Reg No: 02759439

October 2017

# What is the Menopause?

## the 'End of Menstruation'

**Menopause** –when periods have stopped  
Ovaries stop producing eggs & hormones

**Post menopausal** – 1 year after last period

**Peri-menopause** = transition phase

“going through the change”

Can last several years

# Peri-menopause

## Emotional rollercoaster



Fluctuating hormone levels

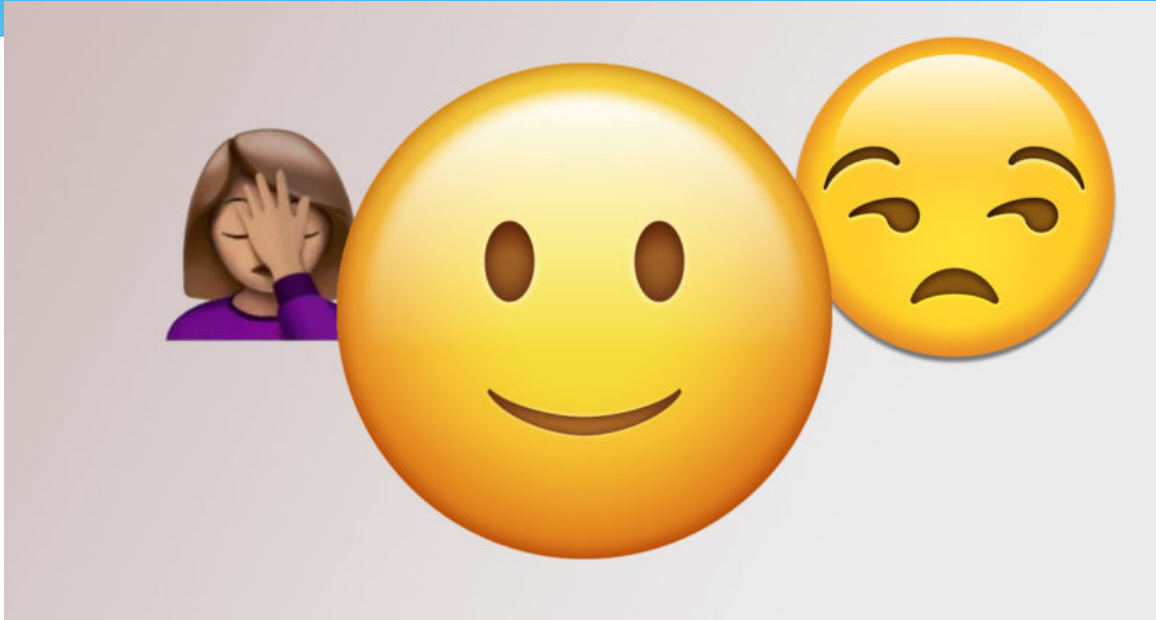
Symptoms come & go

Periods can be heavy, frequent & prolonged before becoming less frequent

# FACTS

- \* Menopause is a normal phase of life
- \* Median age of menopause in UK = 51
- \* Surgical Menopause – when ovaries are removed
- \* Early menopause <45years
- \* Premature menopause - <40years (1%)

# The Good -----**MENOPAUSE**-----The Bad



😊 No more periods

😊 No more PMT

😊 No contraception

😞 End of fertility

😞 Associated with aging

😞 troublesome symptoms

# SYMPTOMS



75% women have flushes  
& sweats  
Severe in 29%

usually last <5years

2-3% of women in 60s still  
have severe sweats

# SYMPTOMS

## *Domino effect*

**HOT FLUSHES**

**NIGHT SWEATS**



**DISTURBED SLEEP**

**VAGINAL DRYNESS**

**FATIGUE**

**LACK OF ENERGY/MOTIVATION**

**POOR CONCENTRATION**

**POOR MEMORY**



**ANXIETY, LOW MOOD**

**LACK OF CONFIDENCE**

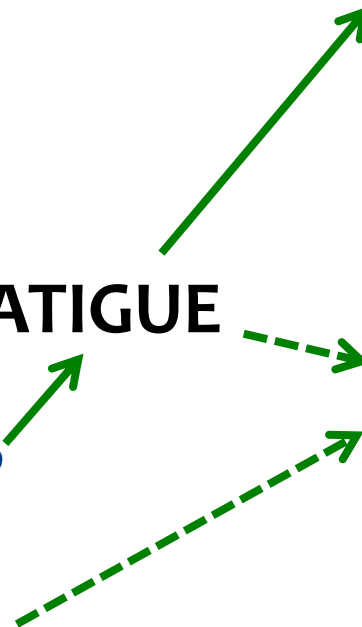


**LOW LIBIDO**

**BLADDER PROBLEMS**

**JOINT PAINS**

**DRY SKIN, HAIR**





# PSYCHOLOGICAL EFFECTS



**IRRITABILITY**

**MOOD SWINGS**

**ANXIETY**

**SLEEPLESSNESS**

**LACK OF CONCENTRATION**

**POOR MEMORY**

**PANIC ATTACKS**

**LOSS OF CONFIDENCE**

# How can menopause affect work?

## Hot flushes

embarrassment in meetings, classroom

May be associated with palpitations & feeling of panic

## Lack of sleep

irritability, poor concentration, more likely to make mistakes

May be wrongly attributed to 'stress'

not being capable of job or promotion

## Poor memory, anxiety

Loss of confidence & self esteem – 'imposter' syndrome

# How can menopause affect work?

## Severity of Symptoms correlate with

- \* feeling less engaged at work
- \* Less job satisfaction
- \* Less commitment to employment
- \* Less likely to apply for promotion
- \* Greater intention to leave work eg. early retirement

# Guidance for women at work

- \* Get information
- \* Seek help – GP
- \* Discuss practical needs with line manager, HR
- \* Avail of Occupational Health - support and work adjustments
- \* Talk with colleagues – remove taboo
- \* Avoid triggers eg. Hot drinks
- \* Lifestyle changes – wt loss, exercise, alcohol reduction
- \* Consider relaxation techniques & CBT

# Hormone Replacement Therapy

*Replaces hormones produced by ovaries*

## HYSTERECTOMY

**OESTROGEN** alone

**TABLET**

**PATCH, GEL**

Transdermal route recommended  
for overweight women BMI>30

## NO HYSTERECTOMY

**OESTROGEN + PROGESTOGEN**  
protects the lining of the womb

**Combined TABLET**

**Combined PATCH**

**Or 'Tailor made'**  
separate oestrogen & progestagen

**Local/ vaginal oestrogen - for vaginal dryness, cystitis**

# Types of Combined HRT

## Last period < 12 mths ago

**Oestrogen** every day

+

**Progestagen** 12-14 days per month

Monthly 'period' / withdrawal bleed

## Last period > 12mths ago

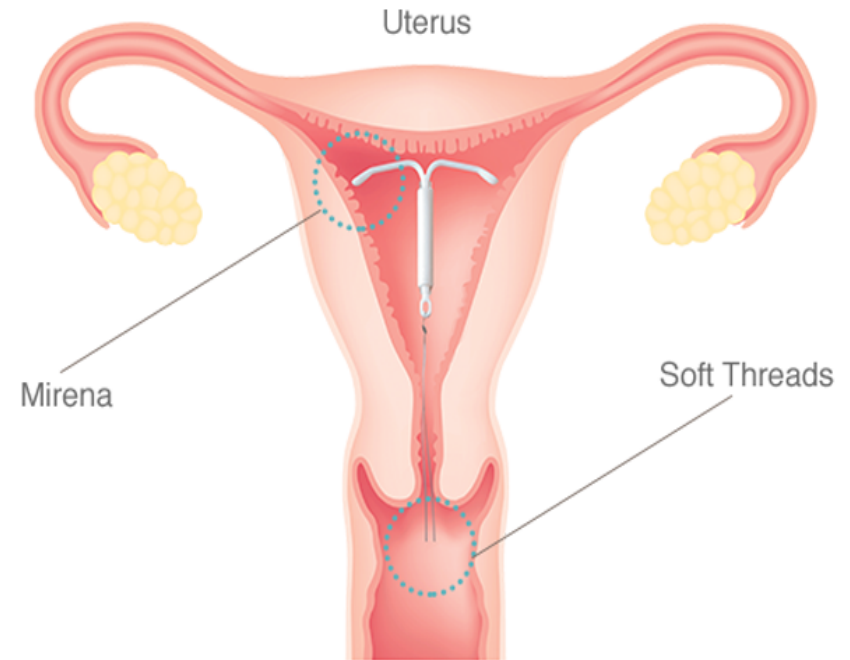
**Oestrogen** combined with low dose of Continuous daily **progestogen**

Designed for NO BLEED

**Period free**

But irregular light bleeding common first 4-6mths

# MIRENA Intra uterine System (IUS)



Contraception/ **Heavy Periods** / progestogen part of HRT  
Can be combined with oestrogen tablet, patch or gel

# Bio-identical/ Body identical HRT

- \* Oestradiol – same as produced by ovaries  
Tablet, patch, gel
- \* Progesterone – ‘**Utrogestan**’ oral capsule
- \* Testosterone gel

***ALL AVAILABLE ON NHS – can be prescribed by GP***



# SUMMARY OF RISKS & BENEFITS



## BENEFITS

**Relief of flushes/sweats,  
low mood  
joint pains &  
sexual difficulties**

**Osteoporosis prevention**

**CORONARY HEART DISEASE**

**NO CHANGE IN RISK**

## RISKS

**BLOOD CLOTS** absolute risk is 12.5/1000 over 5 years in women not using HRT. With **oral HRT, 10 more women per 1000** at risk.

**Risk not increased with HRT patches/gel**

**STROKE** – small increased risk with HRT tablets but not patches/gel

### BREAST CANCER

absolute risk is 22.5/1000 over 7.5 years in women not using HRT. **With combined HRT, 5 more women per 1000** are at risk;  
**No increased risk with oestrogen only**

## A comparison of lifestyle risk factors versus Hormone Replacement Therapy (HRT) treatment.

### Difference in breast cancer incidence per 1,000 women aged 50-59.

Approximate number of women developing breast cancer over the next five years.

NICE Guideline, Menopause:  
Diagnosis and management  
November 2015

#### 23 cases of breast cancer diagnosed in the UK general population



#### An additional four cases in women on combined hormone replacement therapy (HRT)



#### Four fewer cases in women on oestrogen only Hormone Replacement Therapy (HRT)



#### An additional four cases in women on combined hormonal contraceptives (the pill)



#### An additional five cases in women who drink 2 or more units of alcohol per day



#### Three additional cases in women who are current smokers



#### An additional 24 cases in women who are overweight or obese (BMI equal or greater than 30)



#### Seven fewer cases in women who take at least 2½ hours moderate exercise per week



# British Menopause Society

“All women should have access to advice so that they can make informed decisions about diet and lifestyle and treatment options to optimise their menopause transition and postmenopausal health.”

HRT commenced before the age of 60 or within 10 years of the onset of the menopause has a favorable risk/benefit profile and is likely to be associated with a reduction in coronary heart disease & cardiovascular mortality.

*May be a “window of opportunity”*

“Women with premature ovarian failure are at increased risk of cardiovascular disease, osteoporosis & cognitive impairment and should be advised to take HRT until the natural age of the menopause to minimise risks.”

# USEFUL INFORMATION

thebms.org.uk

<https://www.womens-health-concern.org/>

[www.menopause matters.co.uk](http://www.menopause matters.co.uk)

Managemymenopause.co.uk

Menopause-exchange.co.uk

Menopausedoctor.co.uk

[www.daisynetwork.org.uk](http://www.daisynetwork.org.uk) - **PREMATURE MENOPAUSE**



# HRT Myths Uncovered

*Many of the things said about Hormone Replacement Therapy (HRT) have not been true. This is what the science really says.*

## MYTH

## FACT

HRT causes breast cancer

HRT with oestrogen alone is associated with little or no change in the risk of breast cancer. Combined HRT can be associated with a small increased risk however this is related to treatment duration & reduces once HRT is stopped.<sup>1</sup>

HRT has a vascular risk

HRT in any form does not increase the risk of heart attack if started before age 60. HRT as tablets can increase the risk of stroke and DVT though generally the effect is very small. This is avoided by using patches and gels.<sup>1</sup>

HRT causes blood clots

Oral HRT can increase the likelihood of having a blood clot. But being healthy and low risk means that the added effect of HRT is tiny.<sup>1</sup>

HRT is dangerous

HRT will protect the bones<sup>1</sup> and heart,<sup>2</sup> and may help women's memory.<sup>3</sup> This is important if periods stop very early and a factor to consider at the average menopause age.

HRT causes weight gain

There is no evidence that HRT causes weight gain. Women generally have a tendency to gain weight in the middle years, and a healthy diet and exercise are important<sup>1</sup>.

If you need HRT you are beyond getting pregnant

HRT is not a contraceptive and women should continue to use contraception until the age of 55.<sup>1</sup>



## MYTH

HRT only delays  
the inevitable

HRT carries the same  
risks as the pill

Natural methods to treat  
menopausal symptoms  
are safer than HRT

Women stop having sex  
after the menopause

Women need examinations  
to make sure they can  
take or need HRT

You can only have  
HRT for 5 years,  
whatever age you are

## FACT

HRT effectively manages the symptoms of the menopause and lower doses of HRT continue to work when women are older.<sup>1</sup>

They contain similar hormones but those in HRT are less potent and in lower doses, and may be delivered in different ways so the effects are not the same.<sup>1</sup>

Just because it is natural, doesn't mean it is safe – the studies haven't been done.<sup>1</sup>

Some do, but don't need to. Local oestrogen treatments reverse the vaginal changes and restore comfort.<sup>1</sup>

This usually isn't necessary but a woman's blood pressure needs checking.<sup>1</sup>

HRT may be taken for as long as necessary at the lowest effective dose. This is particularly important for younger women, who should not stop before 50 years of age.<sup>4</sup>

For further information,  
please visit Menopause Matters  
& The Daisy Network

1. NICE Guidelines [NG23] 2015  
2. Cochrane et al, Hormone therapy for preventing cardiovascular disease in post-menopausal women (2015), Cochrane Database of Systematic Reviews  
3. V Henderson, Cognitive Changes After Menopause: Influence of Estrogen (2008), Clinical Obstetrics and Gynecology  
4. menopausematters.co.uk/benefit.php



Primary Care  
Women's Health  
Forum

pcwhf.co.uk

## Guidance on menopause and the workplace



“Employers have responsibilities for the health and safety of all their employees, but there are also clear business reasons for proactively managing an age-diverse workforce”



# RECOMMENDATIONS

- \* Introduce a clear menopause policy or guideline
- \* Provide adequate training for employers & line managers
- \* Create an open and transparent environment
- \* Facilitate discussion about troublesome symptoms
- \* Assess each case on its own merits
- \* Consider reasonable adjustments in the workplace



# Reasonable Adjustments

Adapt workplace temperature / ventilation if necessary

? *Move classroom/office*

Provide access to changing facilities, restroom or quiet room

Provide access to cold drinking water

Adopt flexibility with uniforms

Consider flexible working hours - ?*timetable changes*

# Managing Menopause Without HRT

## LIFESTYLE CHANGES

- \* Maintain healthy weight
- \* Exercise- reduce stress, improve bone density
- \* Eliminate triggers –coffee, alcohol
- \* Layer clothes
- \* Cool bedroom

## ‘NATURAL’ REMEDIES

ISOFLAVONES- phytoestrogens

SOY

BLACK COHOSH

## **‘Bio- identical’ hormones**

*Same hormones as HRT*

**UNREGULATED**

NOT safer or better than prescribed HRT

# PREVENTION OF OSTEOPOROSIS

Healthy Balanced Diet

**Adequate Calcium & Vitamin D**

**Weight bearing exercise** – walking, running

**DON'T SMOKE**

Moderate alcohol intake

## Calcium Containing Foods

### DAIRY PRODUCTS

nuts

fish

green leafy vegetables

### Vitamin D

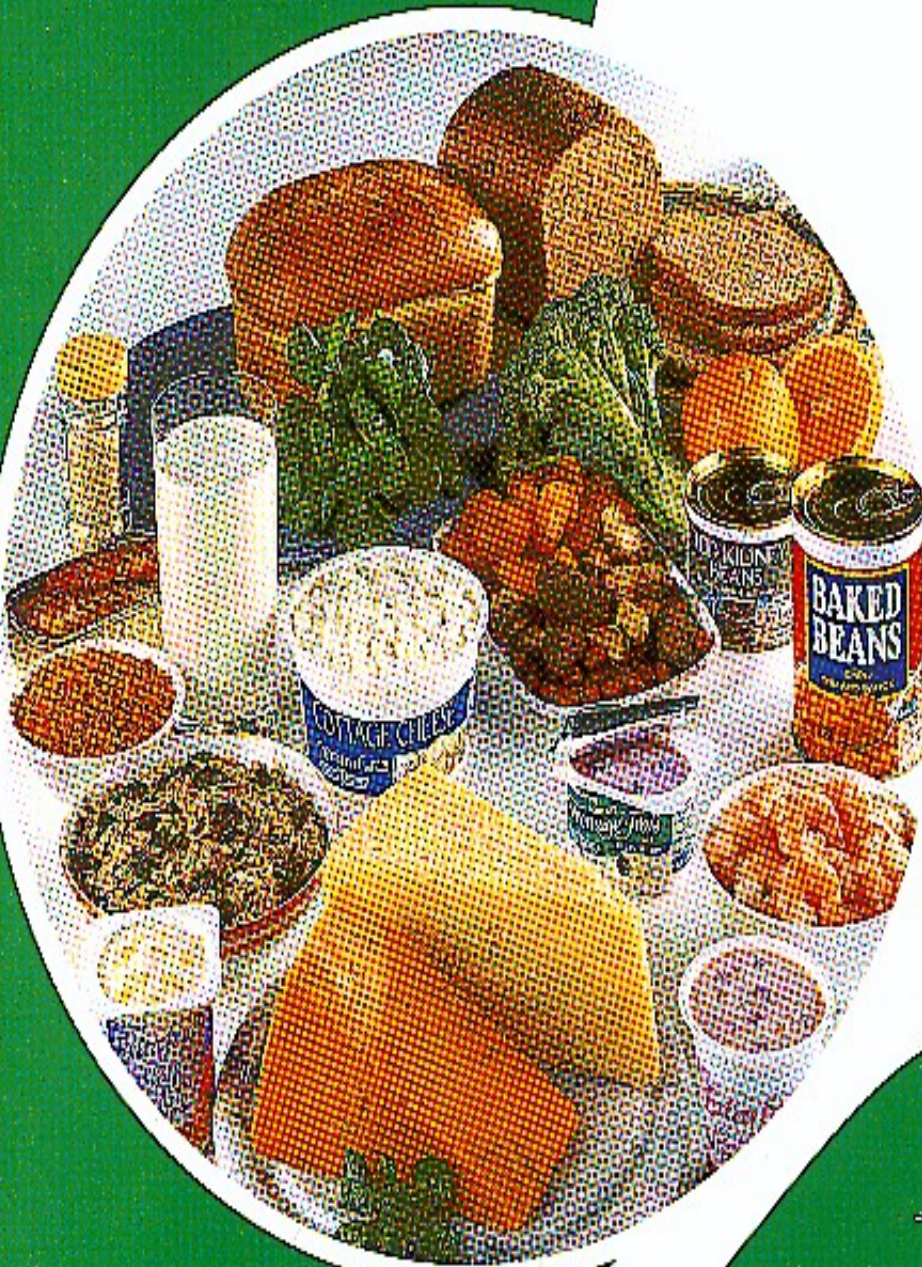
**made by skin in sun**

& contained in:  
fortified margarine

oily fish

eggs

milk



# Belfast Trust HRT CLINIC

**Level 5, Dempsey Building, Mater Hospital, provides:**

- \* Advice and care for women with a **premature menopause < 40years**, and young women requiring oestrogen replacement for other endocrine problems.
- \* Advice and care for women who have **HRT or Menopause related gynae problems** which cannot be managed by their GP.
- \* Accepts referrals from GPs & other consultants from all over N.I