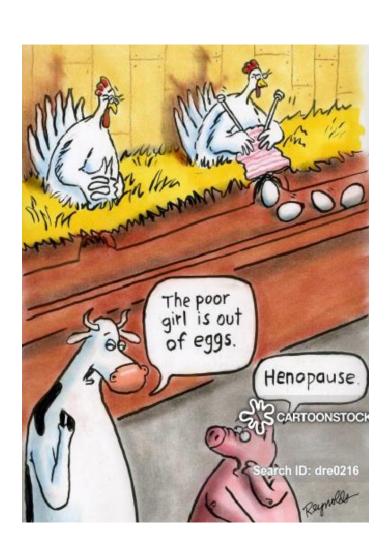
Menopause and HRT

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World Menopause Day
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Let's talk about the Menopause



Literally: End of Periods

Definitions

Menopause

• Final Menstrual Period

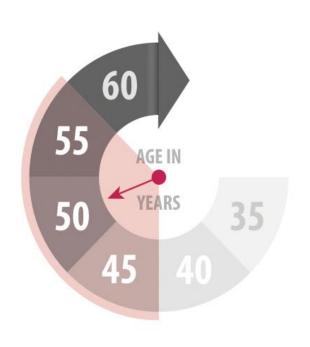
Peri-menopause"The Change"

 Time of symptoms caused by lack of ovarian hormones, starting up to 5 years before and up to 15 years after last period

Postmenopause

• 12 months after last period

Menopause "End of Menstruation"



Average age 51 years

5 in 100 women age of 40-45

1 in 100 women under age 40

(premature ovarian insufficiency)

Surgical or Induced Menopause

- Oophorectomy (ovaries removed)
- Certain types of chemotherapy drugs
- Radiotherapy to pelvic area as a treatment for cancer
- Hysterectomy (womb removed) even if ovaries are conserved, it is common to have an earlier menopause

Premature Ovarian Insufficiency (Premature Menopause)

- Premature Ovarian Insufficiency (POI) affects about:
 - One in every 100 women under the age of 40
 - One in 1,000 women under 30
 - One in 10,000 under 20



Hormones!...

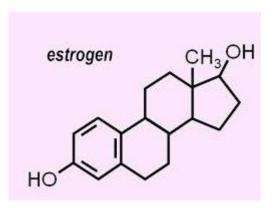
- Main female affected by menopause:
 - Oestrogen
 - Progesterone
 - And Testosterone (not just for men!)

What do these hormones do?

Oestrogen

Progesterone

Testosterone



- Keeps tissues of the body elastic
- Regulates new bone turnover and reduces Osteoporosis
- Keeps heart healthy
- Maintains brainpower
- Stimulates lining of the womb to grow

What do these hormones do?

Oestrogen

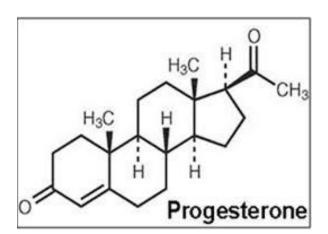
Protects womb lining

Progesterone

Tiredness

Testosterone

Mood swings



Increased appetite

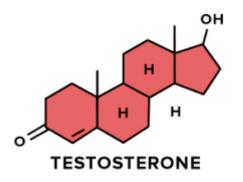
Similar to PMT

What do these hormones do?

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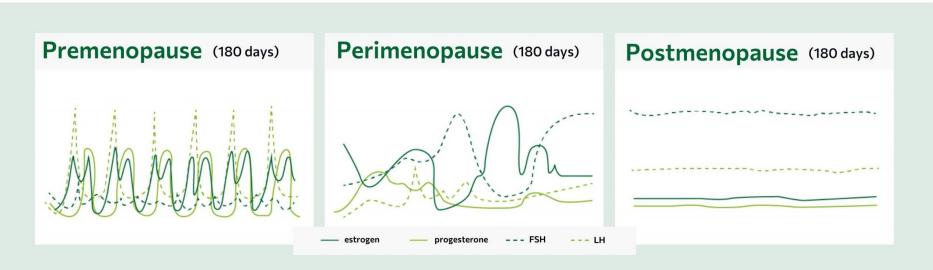


- Helps sex drive
- Helps motivation and optimism, feel brighter and more assertive
- Supports and increases bone density
- Turns fat into muscle
- Helps improve cognitive function

What's happening to a woman's hormones...



HORMONE FLUCTUATIONS DURING MENOPAUSE



Changes in Hormone Level patterns over Six Months - Graph based on data from Dr. Nanette Santoro -> Harvard Women's Health Watch, 1999

Symptoms (average duration 7 years)

3 out 4 women have symptoms

1 out 4 women

have severe debilitating symptoms

Menopause Symptoms...

Many symptoms – both physical and emotional



Physical

- Hot flushes, night sweats
- Changes in periods
- Muscle and joint pains
- Headaches
- Dry skin/hair
- Dry vagina and urinary problems (later)



"Listen Buddy! After the hot flushes I've been having this is like a resort!"

Emotional

- Anxiety
- Sleep disturbance
- "brainfog"
- Depressed mood Tearfulness
- Irritability
- Lack of energy
- Inability to concentrate
- Memory loss



What happens to our bodies?



Heart and circulation



"Thank you for not giving up your seat to me. Standing is good for the cardiovascular system, which is why women outlive men."

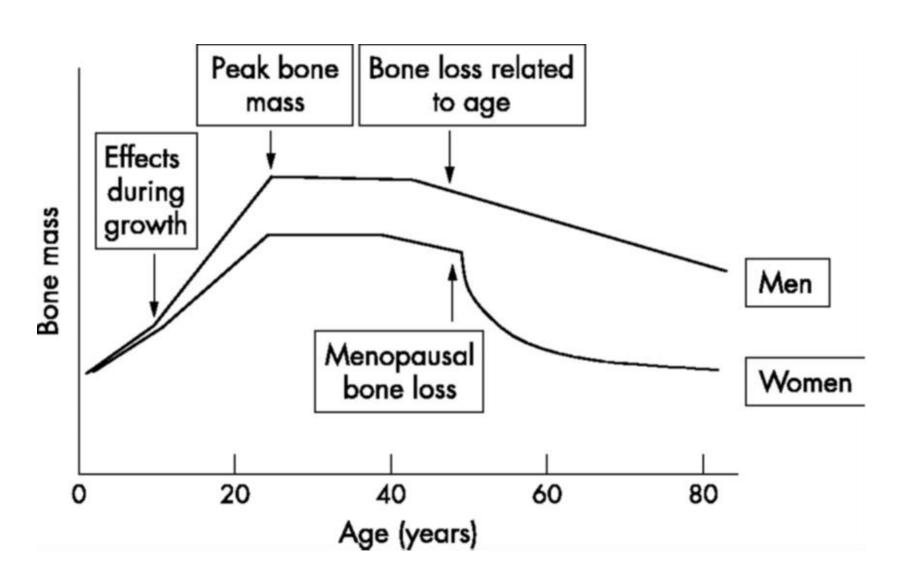
The heart and circulation...

After menopause women catching up with men's risk of heart disease, largest cause of death

How to reduce the risk...

- Aerobic exercise
- Reduce salt intake
- Keep weight in normal range (BMI 18.5 24.9)
- Stop smoking
- Yoga/Meditation to reduce stress hormones

<u>Osteoporosis</u>



The musculoskeletal system – Bones and Muscles

1 in 3 will have fragility fracture,

1 in 6 hip fracture

How to reduce the risk...

- Weight-bearing exercises
- Vitamin D supplements
- Dietary calcium
- Pilates for core strength and flexibility
- Stop smoking

Ageing and frailty

At any age after the menopause, women have <u>fewer healthy years</u> ahead then men, despite longer life expectancy



Brain Function...

Good news!!!

The reduction in mental capability appears to be temporary

Things you can try to help...

- Learn and use foreign language
- Use memory aids lists, apps, stickers
- Don't panic!

HRT

Hormone Replacement Therapy

(also known as **MHT,** Menopausal Hormone Therapy)



"You need strong medicine to relieve your symptoms. I'm prescribing chocolate."

HRT Principles...

- Replaces hormones no longer produced by ovaries
- Partially reverses menopausal changes
- "Postponing" rather than avoiding menopause
- It is safe to **start** HRT for the majority of women under 60 years,
- The right HRT preparation, in the right woman, has very low overall risks and has significant benefits
- Women under 45 years MUST take hormones to protect their hearts, bones and brains

Oestrogen replacement

Most effective way to treat flushes/night sweats (vasomotor symptoms)

The Heart and Circulation

 Continued protection if HRT started early in the menopause, reduction in heart attacks (50%) and reduced risk if death

Evidence of "early harm" if started more than 10 years after final menstrual period

The Bones and Muscles

• HRT = most effective intervention to prevent osteoporosis

Preserves collagen (cartilage)

Partially reverses muscle loss

Emotional Symptoms

HRT = Most effective treatment

NICE guidelines state...

"Offer HRT first line for vasomotor symptoms and low mood"

Remember, if <u>not</u> caused by lack of oestrogen, HRT will <u>not</u> improve mood

Known Risks...

DVT/PE (Blood clot):

Slight increased risk with tablets, no evidence for increased risk with gel/patches/spray

Angina/Heart attack:

Increased when combined HRT started in older women(>60), or with pre-existing heart disease.

'window of opportunity' within 10 years of menopause

• Stroke:

Increased when HRT started in older women (> 60 years) Less with patch/gel/spray

Breast cancer



"I suppose I'll be the one to mention the elephant in the room."

Understanding the risks of breast cancer



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



HRT – The Hormones...

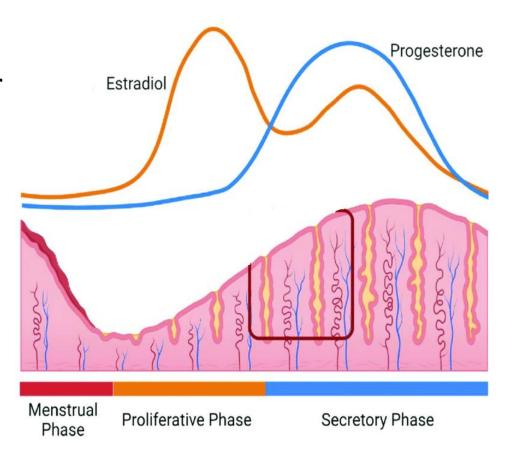
Oestrogen for all the benefits

 Progesterone to protect womb lining from overgrowth/cancer

Womb Lining (endometrium) and bleeding

- Oestrogen stimulates growth/overgrowth/cancer
- Natural Progesterone changes tissue

 High dose Progesterone or Synthetic Progestogens cause flattening



Vaginal Bleeding Risk assessment

- Overall Oestrogen "Burden"
 - Natural (un-ovulatory cycles)
 - Fat tissue
 - External sources (HRT, "herbal HRT")
- Protective Progestogens
 - Combined HRT
 - Mirena
 - Progestogen contraceptives



Understanding USS

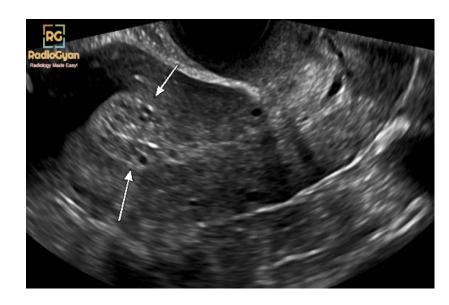
- Cut through view
- Shadow image
- Not a diagnosis, just tool for risk assessment

Science:

Postmenopausal bleeding,

Very low risk if 4mm or less





Hysteroscopy (Telescope)





Types of HRT











For Women with a womb

Oestogen and Progestogen

Less than 12 months from last period

Sequential HRT

- Mimicking menstrual cycle
- Patches
- Tablets
- "Tailor made" combinations

More than 12 month from last period or Minipill

Continuous combined HRT

- "No period"
- Patches
- Tablets
- "Taylor made" combinations



For Women without a womb or with a valid Mirena coil

Oestrogen only replacement

- Patches
- Gel
- Spray
- Tablets

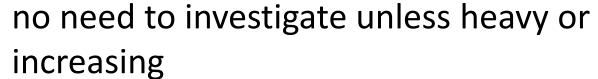
Actual size of Mirena

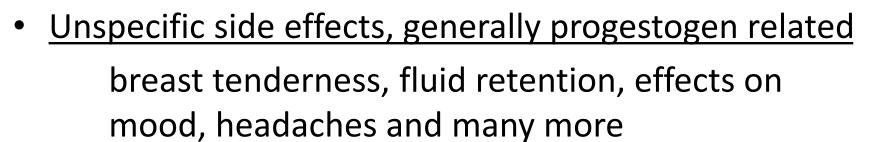


Side effects

Unscheduled bleeding,

common in first 6 months







Principles of Use...

- Lowest dose of Oestrogen to control symptoms
- Transdermal (patches/gel/spray) if any additional risk for stroke or blood clot
- Regular review by GP
- No arbitrary time limit
- Risk/benefit assessment
- Wean off rather than stop

Testosterone supplementation

- Indication: persistent low sex drive (Hypoactive sexual desire disorder, HSDD)
- Insufficient evidence for: low energy, low mood, fatigue or brain fog
- Risks: Skin changes, facial hair growth, increase risk of heart disease



Testosterone supplementation

- No "female preparation" licensed in UK
- Unlicensed use of "male" products
 - 1/8 sachet every day
 - One pump every other day
- Blood test monitoring





"Herbal" HRT

Plant based oestrogens

Effective for symptoms

Unknown safety

No protection of womb lining



Contraception

• If final period before age 50, carry on for 2 years

• If final period after age 50 carry on for 12 months

• If on Mini Pill, Implant, injection, continue to age 55

• If HRT required, use continuous combined

 Valid Mirena for contraception <u>and</u> protection of womb lining

Genitourinary Syndrome of Menopause (late symptoms)

- Vaginal dryness
- Vulval irritation
- Painful intercourse
- Prolapse
- Overactive Bladder
- incontinence
- Recurrent bladder infection



How am I supposed to take a 2 mile walk when I can't go two feet without having to go to the bathroom?

Local Oestrogen for dry vagina and urinary symptoms

- Start at any age
- Use long-term
- No concern about Cancer
- Cream with applicator (Ovestin)
- Oestradiol 10mcg pessaries
- Estring vaginal delivery ring (for women who cannot insert pessary or applicator)







Prescribable alternatives to HRT generally more side effects

- <u>Clonidine</u> Blood pressure drug
- Gabapentin / Pregabalin
- SSRI (Antidepressants)
 (<u>Fluoxetine</u>, <u>Citalopram</u>, <u>Sertraline</u>, <u>Paroxetine</u>)
 adverse effect on sexual function
 do **not use with Tamoxifen**
- Venlafaxine safest with Tamoxifen

Can all cause dependence
CBT better than any of the above

Summary

- Menopause overrated
- HRT optional exercise mandatory
- HRT generally suitable and safe to start in women < 60 years
- HRT first line for flushes and low mood
- HRT best for prevention of osteoporosis
- Preferred route for Oestrogen patch/gel/spray
- No arbitrary time limits
- Local oestrogen for any woman any age (almost)

Any Questions?



Further Information...

- www.womens-health-concern.org
- www.menopausematters.co.uk
- www.managemymenopause.co.uk



