

Making an informed choice

Understanding the benefits and safety profiles of different Hormone Replacement Therapy (HRT)

Women can experience vastly different symptoms throughout the menopause, so it's important that treatment is tailored to reflect individual needs and changing symptoms. Not all HRT treatments are the same; it's essential that you understand both the short and long-term benefits and safety profiles of each to ensure that you maintain the best possible health and quality of life at every stage of the menopause.

Comparing rates of Coronary Heart Disease in women currently taking HRT, to the UK Average¹

The baseline risk of coronary heart disease for women around menopausal age varies from one woman to another according to the presence of cardiovascular risk factors.

1,000 women



Difference in Coronary Heart Disease incidence per 1,000 menopausal women aged 50-59 over 7.5 years, based on randomised controlled trial estimate



HRT with oestrogen and progestogen is associated with *little or no increase* in the risk of coronary heart disease*

HRT with oestrogen alone is associated with *no, or reduced, risk* of coronary heart disease



Variance of **1.1%**

Comparing rates of stroke in women currently taking HRT, to the UK Average¹

The baseline risk of stroke for women around menopausal age varies from one woman to another, according to the presence of cardiovascular risk factors, however the base-line risk of stroke in women under 60 years is very low.

1,000 women



Difference in stroke incidence per 1,000 menopausal women aged 50-59 over 7.5 years, based on randomised controlled trial estimate



HRT tablets (but not patches or gels) slightly raise the risk of stroke. However, it is important to remember that the risk of stroke in women under 60 is very low.



Variance of **less than 1%**

* Please note, the risk varies depending on the type of progestogen, oestrogen dose and route of administration involved – please ask your GP for more details on the treatment options available

Comparing rates of breast cancer in women currently taking HRT, to the UK Average¹

The baseline risk of breast cancer for women around menopausal age in the UK varies from one woman to another.

1,000 women



HRT with oestrogen alone is associated with *little or no* increase in the risk of breast cancer

HRT with oestrogen and progestogen can be associated with an increase in the risk of breast cancer. Any increase in the risk of breast cancer is related to treatment duration and reduces after stopping HRT.

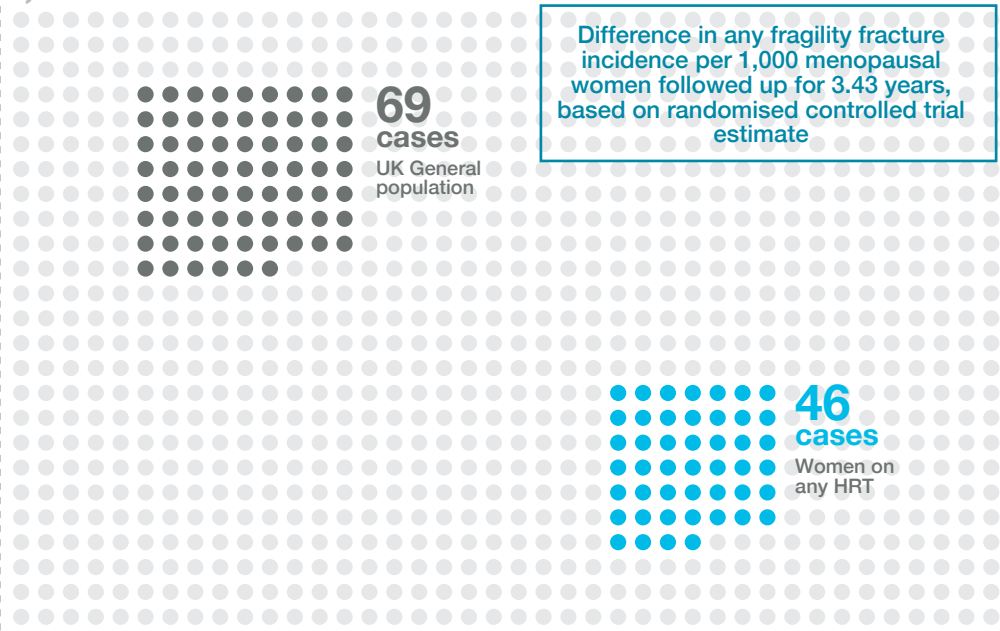


Variance of **less than 1%**

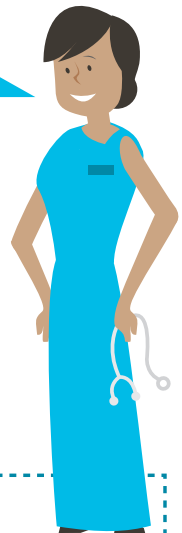
Comparing rates of fragility fractures in women currently taking HRT, to the UK Average¹

The baseline risk of fragility fracture for women around menopausal age in the UK is low and varies from one woman to another.

1,000 women



HRT can be good for bone health; your *risk of fragility fracture is decreased* while taking HRT. This benefit is *maintained during treatment*, but *decreases once treatment stops*. The benefit may continue for longer in women who take HRT for longer



Variance of **more than 2%**

* Please note, the risk varies depending on the type of progestogen, oestrogen dose and route of administration involved – please ask your GP for more details on the treatment options available

References

1. NICE full guidance on Menopause Diagnosis and Management. November 2015. Available at: <http://www.nice.org.uk/guidance/ng23/resources/menopause-diagnosis-and-management-1837330217413> p.24

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard. By reporting side effects you can help provide more information on the safety of these medicines.

This educational resource is to be used by healthcare professionals to share with their patients

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