Menopausal hormone therapy (MHT)

Menopausal hormone therapy (MHT) is a prescription medicine that effectively reduces hot flushes and night sweats and may improve vaginal dryness.

What is menopause?

Menopause is a normal life event. It happens when your ovaries stop producing eggs. This causes changes in your hormones. If you're still having periods, they usually become irregular and then stop.

Most people go through menopause around age 50. When it happens before you're 40, it's called premature ovarian insufficiency. When it happens before you're 45, it's called early menopause.

Premature or early menopause can happen naturally or because of surgery or cancer treatments.

Menopause usually happens gradually. The time leading up to menopause is called perimenopause or menopause transition.

Perimenopause starts when you first notice changes in your menstrual cycle or symptoms such as hot flushes or night sweats and lasts until a year after your last period.

You usually don't need blood tests to diagnose menopause. However, if you're under 45 and thought to be going through menopause, doctors might suggest a blood test.

Symptoms

Menopausal symptoms can include hot flushes, night sweats and vaginal dryness.

Nights sweats can disturb sleep, which can affect your mood and ability to concentrate during the day.

Vaginal dryness can lead to pain or discomfort during sexual activity.

Everyone experiences menopause differently.

Some people also report:

- low mood or feeling sad
- palpitations - when your heart feels like it's racing
- brain fog – finding it hard to think clearly, concentrate or focus.

Symptoms usually start during perimenopause. They last for about 4 to 7 years and often decrease over time. Some people have few or no symptoms, some have mild symptoms, and others have severe symptoms - like hot flushes that affect their daily activities or make it hard to sleep.

We can't predict who will get symptoms, how severe they might be or how long they will last.

Most people choose not to take prescription medicine for their symptoms.

But if hot flushes or night sweats are severe or affect your daily life, medicines like menopausal hormone therapy (MHT) are very effective.

Other prescription medicines for hot flushes and drug-free treatments are also available, but MHT is the most effective.

What are the types of menopausal hormone therapy (MHT)?

Menopausal hormone therapy, previously called hormone replacement therapy (HRT or HT), is a medicine that contains:

- oestrogen alone - used by people who don't have a uterus (for example, after a hysterectomy)
- oestrogen and progesterone together - called combined MHT – is used by people who still have their uterus.

Oestrogen

Oestrogen is a hormone made by the ovaries. After menopause, the body makes much less oestrogen. This may cause:

- hot flushes
- night sweats
- vaginal dryness and discomfort during sex.

Lower oestrogen levels can also make bones thinner. This increases the risk of osteoporosis, a condition where bones become fragile and break more easily.

MHT treats hot flushes and night sweats and may help with vaginal dryness. It also prevents osteoporosis.

Progesterone

Progesterone is a hormone made by the ovaries before menopause, but not after menopause.

Progesterone is not used on its own in MHT. It's combined with oestrogen for people who have a uterus. This helps protect the lining of the uterus.

The progesterone used in MHT may be:

- micronised progesterone, which is identical to the progesterone the body makes before menopause
- progestin, a synthetic type of progesterone that acts in a similar way.

After menopause, progesterone alone doesn't have any health benefits. If you have had a hysterectomy and are taking oestrogen, you don't need to take progesterone.

Note: You might also see the word 'progestogen' used in MHT.

This is a broad term that includes both natural progesterone and synthetic progestins.

How do you take menopausal hormone therapy?

MHT can be taken in a few different ways:

- you can take it by mouth as tablets or capsules
- you can use it on your skin as a patch, gel or spray.

Hormone implants (under the skin) are no longer used because they can cause very high hormone levels and are difficult to remove.

Local oestrogen for vaginal dryness

Local (or vaginal) oestrogen helps relieve vaginal dryness. You can use vaginal oestrogen on its own without needing progestogen. Only a small amount of oestrogen is absorbed from the vagina.

Local oestrogens are available as:

- small tablets (pessaries) placed inside the vagina
- vaginal creams.

Who can use menopausal hormone therapy?

MHT can be very effective if hot flushes or night sweats are affecting your daily life or making it hard to sleep. It's usually recommended for people under 60 or within 10 years of menopause.

MHT is generally safe for people age 50 to

60 years. However, there is very limited information about use during perimenopause or with longer term use.

MHT also helps reduce the risk of osteoporosis and fractures (broken bones). However, it hasn't been shown to prevent other long-term health conditions, such as heart disease or dementia, and it doesn't change your overall lifespan.

People with premature menopause are often advised to take MHT to prevent osteoporosis.

You should avoid MHT if you have:

- a personal history of breast cancer
- a history or high risk of blood clots
- a history of heart disease or stroke
- untreated high blood pressure - MHT can potentially start once your blood pressure is under control
- unexplained vaginal bleeding.

If you still have periods (perimenopausal), MHT may cause irregular bleeding. Using an intrauterine progestogen, like Mirena, can help. This is a small T-shaped device with progestogen in its stem. A doctor or nurse places it inside your uterus during a simple procedure.

Any unusual bleeding should be checked before starting MHT. This may require a hospital referral. Your doctor will discuss this with you if it's needed.

If MHT isn't right for you, there are other effective non-hormonal treatments for menopausal symptoms. Read our fact sheet on treating hot flushes for more information.

Most people handle MHT well. But if you have side effects like bloating or sore breasts, talk to your doctor.

What are the benefits and risks of menopausal hormone therapy?

Like any prescription medicine, MHT has both benefits and risks. They can vary from person to person, so it's important to talk with your doctor about them.

Benefits

MHT is very effective for treating hot flushes and night sweats that affect your sleep and ability to do your daily activities. Reducing these symptoms can improve your quality of life.

It also helps protect bones from osteoporosis and reduces the risk of broken bones while you are taking it.

Risks

The risks of MHT may depend on your health and medical history. They also vary between types of MHT.

Risks include:

Blood clots

Taking MHT (oestrogen alone or combined MHT) raises your risk of blood clots in the legs (deep venous thrombosis or DVT) and lungs (pulmonary embolus or PE).

Higher doses of oestrogen increase the risk of deep venous thrombosis and pulmonary embolus. Oral tablets may increase the risk more than patches or gel.

Stroke

MHT may increase the risk of stroke, though this risk is very small and may depend on your age.

Endometrial cancer

Oestrogen alone increases the risk of endometrial cancer, but adding progestogen prevents this.

Breast cancer

Combined MHT increases the risk of breast cancer. This risk increases the longer you use it.

- After 5 years of use, 1 in 50 people develop breast cancer.
- After 10 years of use, 1 in 25 people develop breast cancer.
- It is not known whether micronised progesterone has less effect on breast cancer risk compared with synthetic progestins. The evidence is still limited and more studies are needed.

Talk to your doctor to understand your own risks and benefits of MHT.

When should you stop taking menopausal hormone therapy?

Deciding when to stop MHT is different for everyone, so talk with your doctor about what's best for you.

If you stop MHT, your symptoms might come back. We don't know if gradually reducing MHT or stopping it suddenly makes a difference.

Most people can keep using vaginal oestrogen - it doesn't need to be stopped.

Do you need an interpreter?

You can ask for an interpreter if you need one.

Family Violence Support

1800 Respect National Helpline

You can get help if you have experienced sexual assault, domestic or family violence and abuse.
You can call any time of day or night.
1800 737 732
1800respect.org.au

For more information

The Women's fact sheets

- Menopause
  thewomens.org.au/health-information/fact-sheets#menopause
- Treating hot flushes with non-hormonal medicines
  thewomens.org.au/health-information/fact-sheets#treating-hot-flushes-an-alternative-to-hormonal-replacement-therapy

Menopause - Better Health Channel
betterhealth.vic.gov.au/health/ConditionsAndTreatments/menopause
Menopause - Jean Hailes for Women's Health
jeanhailes.org.au/health-a-z/menopause
My Meno Plan mymenoplan.org
Queer Menopause queermenopause.com

Shared decision making

The best decisions about your care happen when you and your healthcare team make them together. Your team should give you clear information, explain your options and listen to your questions and concerns.

Before your appointment, write down your questions and take them with you. To begin with, try these 3 questions:

- What are my options? (including wait and watch)
- What are the possible benefits and harms of those options?
- How likely are each of those benefits and harms to happen to me?

For more information, visit the Ask Share Know website.
https://askshareknow.org.au