Menopause and HRT

From NICE Menopause CKS/NG23 (2015), Joint position statement on menopause management BMS/RCOG (Post Reproductive Health, 2022;0(0)1), BMS guidelines (2020) and BNF (2021)



2022,0	U(U)1), ЫVIS g	uidelines (2020) and BNF (2021)				
		Symptoms (due to falling oestroge	n levels)			
 Hot flushes, n 	-	 Vaginal dryness. 	Loss of libido.			
Menstrual irre		Urinary problems.	Mood changes.			
Sleep disturbance.		 Joint and muscle pains. 	Cognitive disturbance.			
		Diagnosis and investigation	ns			
 Investigate an Consider diffe Arrange FSH if: <45y: 2 result: >50y and ame 	iy abnormal bl rentials if sym s >30 IU/L 4–8 enorrhoeic and	ptoms atypical (e.g. alcohol, drugs, thyroid, a w apart is suggestive of early menopause, or	nxiety, tumours).			
		Treatment options				
		 Hormone replacement therapy (H First line for: Vasomotor symptoms. Low mood. Beneficial for: Sexual function. Urogenital atrophy. Musculoskeletal symptoms. Bone mineral density. traindications to HRT: refer to menoper opertogen-dependent tumour. 	 CBT for low mood and anxiety. Isoflavones (soy) and black cohosh may help flushes but preparations vary in content/safety. Evidence supports the use of SSRIs and SNRIs in women who can't have/don't want HRT. Counsel regarding side-effects. 			
Untreated en Undiagnosed Uncontrolled	dometrial hy vaginal bleec hypertensior	perplasia. ling.	 Current or recurrent VTE (unless anticoagulated). Thrombophillic disorder. Liver disease (with abnormal LFTs). 			
	Cou	nselling about HRT risks (note contrain	ndications above)			
Condition		Risk				
Breast cancer	 Lifestyle factors (obesity, excess alcohol) may have greater impact on breast cancer risk than HRT. Small increased risk: risk greater with combined HRT than oestrogen-only. HRT is <i>unlikely</i> to increase risk of breast cancer in women <50y, and risk of exposure from HRT should be counted from aged 50y – which is average age of natural menopause. 					
VTE	 Micronised progesterone and dydrogesterone may be safest progestogens. HRT increases VTE risk, but individual risk depends on other risk factors, and risk generally low in early post-menopause years. Oral preparations carry higher risk. Transdermal oestrogen appears safer as it avoids first-pass liver metabolism and doesn't activate clotting factors (yet to be confirmed by RCTs). 					

• Micronised progesterone appears to be the safest progestogen but more data is needed.

CVD is the commonest cause of death in postmenopausal women.

Stroke (CVA)

Ovarian cancer

evidence).

inferred).

- **Cardiovascular** HRT does not increase the risk of cardiovascular disease in women <65y.
- disease (CVD)
 HRT may be cardioprotective in younger postmenopausal women (<10y from LMP), but evidence not strong enough to recommend as primary prevention of CVD.</td>

 Oral HRT increases the risk of stroke; transdermal preparations appear safer (observational

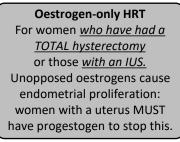
Risk of CVA depends on other cardiovascular risk factors but is generally low in this age group. Slight increased risk (suggested from epidemiological studies, although causation cannot be

Menopause and HRT: which HRT?

From NICE Menopause CKS/NG23 (2015), British Menopause Society guidelines (2020) and BNF (2021)



Types of HRT

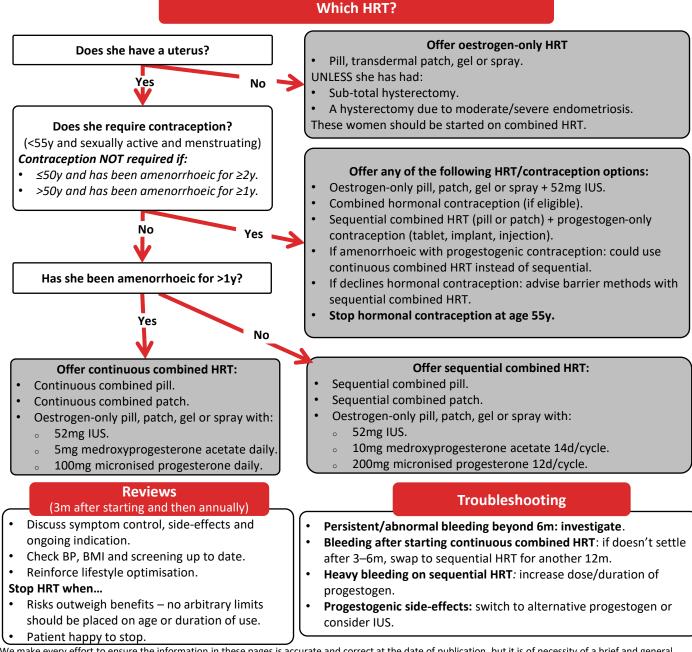


Sequential combined HRT For <u>peri-menopausal women</u> (some endogenous hormone production will lead to irregular bleeding on a continuous regime). Daily oestrogen with <u>sequential</u> progestogen (usually in last 12–14d of pack/month) to trigger a bleed.

Continuous combined HRT For <u>postmenopausal women</u> (>12m since LMP).

Contains <u>daily</u> oestrogen and progestogen.

Swap from sequential combined to continuous combined: after >1y of sequential HRT or age >54y.



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HRT: formulations (from MIMS 2022)

Oral: usually cheapest. **Transdermal:** lower VTE/CVA risk so use preferentially if >60y, overweight or migraines. **If urogenital symptoms predominate:** consider using vaginal oestrogens instead.



	1	364	uential combined			1	
Route	Oestrogen	Progestogen		Name		Cost (28d)	
Dral	Oestradiol 1–2mg	Dydrogesterone 10)mg (14 tabs)	Femoston		£5.39	
	Oestradiol valerate 2mg (70 tabs)	Medroxyprogesterone acetate 20mg (14 tabs) + 7d placebo		Tridestra (long-cycle preparation)		£6.83	
	Oestradiol valerate 2mg	Norethisterone 1mg (12 tabs)		Clinorette		£3.08	
	Oestradiol 1mg			Novofem		£3.81	
	Oestradiol 1–2mg			Elleste Duet		£3.07	
	Oestradiol 1mg (10 tabs) 2mg (12 tabs)	Norethisterone 1mg (10 tabs)		Trisequens (phasic preparation)		£3.70	
atch	Oestradiol 50mcg/24h			Evorel Sequi		£11.09	
	Oestradiol 50mcg/24h	Levonorgestrel 10mcg per 24h (1 patch/w for 14d)		FemSeven Sequi		£13.18	
		Cont	inuous combined			-	
oute	Oestrogen	Progestogen		Name		Cost (28d)	
Oral	Conjugated equine oestrogen 300mcg	Medroxyprogesterone acetate 1.5mg		Premique Low Dose		£2.17	
	Oestradiol 0.5–1mg	Dydrogesterone 2.5–5.0mg		Femoston Conti		£8.14	
	Oestradiol 1–2mg	Medroxyprogesterone acetate 2.5–5.0mg		Indivina		£6.86	
	Oestradiol 1mg	Norethisterone 0.5mg		Kliovance		£4.40	
	Oestradiol 2mg	Norethisterone 1mg		Elleste Duet Conti		£5.67	
				Kliofem		£3.81	
	Oestradiol 1mg	Progesterone 100mg		Bijuve		£8.14	
atch	Oestradiol 50mcg/24h	Norethisterone 170mcg per 24h (2 patches/w)		Evorel Conti		£13.00	
	Oestradiol 50mcg/24h		vonorgestrel 7mcg per 24h (1 patch/w)		Femseven Conti		
	<u>.</u>					£15.48	
		rogen-only (or	nly if no uterus/Mirena in	place)	I		
Route	Oestrogen		Name	Cost (28d)			
Oral	Conjugated equine oestrogen 300mcg/6			£2.02/£1.34/£1.19			
	Oestradiol 2mg		Bedol		£1.69		
	Oestradiol 1–2mg		Elleste Solo		£1.69		
			Progynova		£2.43		
		Zumenon	enon		£2.30		
Patch	Oestradiol 40/80mcg per 24h		Elleste Solo MX £5.19/£		£5.19/£5.99	19/£5.99	
	Oestradiol 25/50/75/100mcg per 24h	Estraderm MX £5.50/£5		£5.50/£5.51/£6.42	5.51/£6.42/£6.66		
			Evorel		£3.42/£3.88/£4.12/£4.28		
	Oestradiol 25/37.5/50/75/100mcg per 2	4h	Estradot £5.99		£5.99/£6.00/£6.02	5.99/£6.00/£6.02/£7.00/£7.27	
	Oestradiol 50/75/100mcg per 24h		Femseven £6.0		£6.04/£6.98/£7.28	6.04/£6.98/£7.28	
	Oestradiol 50/100mcg per 24h	Progynova TS £6.30/£6.90		£6.30/£6.90			
iel	Oestradiol gel (0.06%) 2–4 pumps (1.5–3	Oestragel 80g pump Approx. £		Approx. £4.20–£8.4	x. £4.20–£8.40		
	Oestradiol gel (0.1%) 0.5–1.5mg per 24h			Approx. £5.08–£5.85			
Spray	Oestradiol 1.53mg/metred dose 1–3 spr	Lenzetto 8.1ml (56 actuations)		Approx. £3.45–£6.90			
. ,	<u> </u>	, ,	be used with oestrogen-	only HPT if	has utorus)		
loute	Progestogen	Dose	- be used with bestrogen-	Name	has atterus	Cost (28d)	
Dral	Medroxyprogesterone acetate	10mg daily for 14d/cycle (sequential) or 5mg		Climanor		5mg = £3.27	
		continuously (continuous combined)				5	
Dral/vag		200mg for 10–12d/cycle (sequential) or 100mg		Utrogestan		100mg = £4.	
(can be used vaginally: off-licence)		continuously (continuous combined)		Mirena, Levosert or Benilexa		200mg = £4.	
ntraute	rine Levonorgestrel 52mcg	20mcg/24h		iviirena, Levos	ert or Benilexa	Approx £1.0	
			r HRT preparations				
loute	Content Dose			Name Livial		Cost (28d)	
Dral	Tibolone (gonadomimetic)	2.5mg				£10.36	

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