

HORMONE REPLACEMENT THERAPY (HRT) AND BREAST CANCER

INFORMATION FOR WOMEN

INTRODUCTION

Hormone Replacement Therapy (HRT) has been used for many years and a great deal of research has been done on it.

This leaflet explains what the research tells us about the risk of breast cancer if you take HRT.

All women, whether they are taking HRT or not, should be aware of any changes that occur in their breasts and report them to their healthcare professional. All women in the UK aged between 50 and 70 years are invited to have a mammogram every three years and those aged 71 years and over may have them on request.

THE BENEFITS OF HRT

The main reason women take HRT is because it is extremely effective at relieving the unpleasant symptoms of the menopause such as hot flushes and night sweats which affect quality of life and wellbeing. When taken for a prolonged time HRT is also effective at reducing osteoporosis (thinning of the bones) but it is no longer recommended for this reason alone. There is no good evidence that HRT helps to prevent heart disease and stroke so it should not be used for this reason.

EARLY MENOPAUSE AND HRT

When women have had an early menopause, it is generally accepted that the benefits of HRT far outweigh any risks.

In young women HRT is simply replacing the hormones that the ovaries would normally be producing and therefore use of HRT up to the age of 50 (ie normal age of menopause) is not associated with any additional risk of developing breast cancer compared with the general population. Any small increase in risk of developing breast cancer with HRT use applies only to women taking HRT from age 50 years onwards.

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VAGINAL SYMPTOMS

Many women experience vaginal dryness and discomfort during sex as a result of lack of oestrogen following the menopause. These symptoms will improve with long term use of HRT. Women who do not wish to take HRT can consider using regular local vaginal oestrogen preparations – a cream, pessary or vaginal ring – to improve their symptoms. These deliver a low dose of oestrogen to the vaginal tissues and are not associated with any of the small risks of HRT. Women with breast cancer are usually able to use these preparations but need to discuss this carefully with healthcare professionals.

FAMILY HISTORY OF BREAST CANCER AND HRT

There is very little information about the effect of HRT use in women who have a strong family history of breast cancer.

Breast cancer is a common condition and only a small percentage of women develop the genetic form of the disease.

Women who have a single family member with breast cancer will probably have the same risk of breast cancer as most other women and should consider the general benefits and risks of taking HRT.

If a woman has several affected relatives with breast and/or ovarian cancers then they should seek specialist advice from a healthcare professional.

HRT AND BREAST CANCER - THE RESEARCH

For some time, studies have suggested that slightly more cases of breast cancer are diagnosed overall in women who take HRT and this relates to how long it is used for. This risk is higher for those women who take HRT for long periods after the age of 50, whereas women who use HRT for a short time (ie less than 5 years) probably have very little increase in risk of developing breast cancer.

Most research suggests that women who have had a hysterectomy and are taking oestrogen only HRT have a lower risk of developing breast cancer than those women taking combined oestrogen and progestogen HRT preparations (usually women who have not had hysterectomy).

From one UK study, women aged 50 not using HRT about 32 in every 1000 will develop breast cancer over the next 15 years (that is up to the age of 65).

For those who use HRT the estimated number of extra cancers is shown below.

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Length of time on HRT after the age of 50	Number of extra cancers in HRT users over a 15 year period above the 32 occurring in non-users	
	Oestrogen only HRT	Combined Oestrogen and Progestogen HRT
5 years use	1.5 per 1000 women	6 per 1000 women
10 years use	5 per 1000 women	19 per 1000 women

Research also suggests that 5 years after stopping HRT there is no longer any added risk.

The issue with breast cancer and HRT is complex and if you are still concerned about your personal situation please discuss this with healthcare professionals who will try to give you a balanced view on the benefits and risks of HRT.

FURTHER INFORMATION

Menopause Matters website: http://www.menopausematters.co.uk/

Your GP or hospital can refer you for specialist advice to:

Edinburgh Menopause Clinic Chalmers Centre 2a Chalmers Street Edinburgh EH3 9ES

Tayside Menopause Clinic
Tayside Sexual & Reproductive Health Service
Level 7
South Block
Ninewells Hospital
Dundee DD1 9SY

Menopause Clinic Women's Day Clinic Yellow Zone, Level 4 Aberdeen Royal Infirmary Foresterhill Aberdeen AB25 2ZN

Sandyford Central Clinic 2-6 Sandyford Place Glasgow G3 7NB

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