



The HRT Controversy

What is HRT and why are some people concerned about using it?

In the last 20 years, there has been some negative reporting about using HRT for menopause symptoms and the role it might play in developing Breast Cancer. Sadly, the worries this information created made many sufferers afraid to consider HRT even when their symptoms were extreme. It was a dark time for menopausal patients and it was a difficult time for doctors caring for menopausal patients too as most of that information was not presented in an accurate way and caused enormous, unnecessary fear. It might be helpful to know where all this furore came from.

What was the medical trial that created HRT fear?

HRT had been popular in the USA and Europe from the early 1970s and users derived great benefit from it. The situation changed in 2002, when an editorial from an American study was published in the Journal of the American Medical Association (JAMA). The JAMA editorial suggested that there was a link between using HRT and finding breast cancer. The study was called the **Women's Health Initiative (WHI)** and it was commissioned by the US government to look at many different aspects of the health of older women. They were particularly keen to see what factors affected heart disease and cancer. The ladies who were included in the study were almost all over 55 (most were in their early 60s) and they were all offered one of a selection of daily tablets to take. This was the largest randomised controlled trial of its kind, so the information was promising to be very reliable.

Some ladies in the WHI study were offered real HRT – the brand chosen was called “Prempro”. Prempro was never available in Ireland - it was a popular American HRT of the day. It was made up of an equine estrogen hormone (made from the urine of pregnant horses) and a strong, synthetic progestagen that is manufactured under the name “Provera”.

Some ladies in the study were taking plain equine estrogen “Premarin”, some were taking the ‘Prempro’ combination of equine estrogen and provera and some were offered an identical pill that had no hormones in it at all (the “placebo”). In the first 5 years of the study, there was no difference in breast cancer rates in the three groups at all but after 5 years went by, a slight increase was noticed in the number of breast cancers found in the women on the combination of estrogen and progestagen – no increases were seen at all in the group on the plain estrogen or in the placebo group.

The extra numbers of breast cancers diagnosed in the estrogen + provera group were small.



Normally the number of women who are diagnosed with breast cancer on a screening mammogram (this is for women in their 50s) is about 23 ladies for every 1000 mammograms done. The WHI study found an additional 4 ladies - a total of 27 breast cancers when they did the 1000 mammograms on the ladies who were taking the equine estrogen and the provera for over 5 years. See the **“WHI information Pictograph” in document 6.**

This increase in detection was so small that it was not statistically significant. Moreover, there was **no suggestion that the HRT was creating new cancers.**

The extra breast cancers diagnosis made in that group was about the same extra number of breast cancers that are diagnosed in women who drink an average of two glasses of wine a day and was actually much lower than the extra number of breast cancers found in women who are overweight (47 cancers for every 1000 mammograms).

The WHI study did not suggest or prove that HRT caused breast cancers, only that there was a slight association in some older women over time.

Why then all the concern about HRT and Breast Cancer?

Sadly, things took an unfortunate turn after that JAMA editorial was released as it was written in a very alarming tone (they continue to receive much criticism for this even today). The popular papers then picked up their story and we were seeing terrifying headlines saying ‘HRT causes breast cancer’ on TV, online and in the papers -without any actual science to support this. It was so sad for Irish patients during those years. Hundreds of Irish women, as well as millions of women in the US and Europe, stopped their HRT abruptly. Some were fine, but some got their symptoms back overnight and suffered greatly. Many were too terrified to seek help. Even when they did ask for advice, they didn’t know who to believe. No matter how much some doctors tried to reassure patients about the facts on HRT and breast cancer there were just as many other doctors who hadn’t read all the information and were still warning patients to avoid HRT!

This still happens today with less experienced doctors, gynaecologists and other healthcare providers.

HRT today

Things stayed this way for decades until finally in 2015 an update from the UK slowly started to repair the damage of the previous 15 years. In Britain, there is a government agency known as the **National Institute for Health and Care Excellence (NICE).**



They are in charge of making recommendations and writing guidelines for doctors and nurses in the UK. In November 2015, they published a review of Menopause Care and HRT which confirmed what menopause doctors had been saying all along. That is, if your patient is suffering and needs HRT to control troublesome menopause symptoms, you should feel confident to prescribe appropriate HRT and you should support them in their choice. NICE pointed out that most people who need HRT are young (well under the age of the women in the WHI study) and are probably only going to stay on HRT for a few years. This has slowly started a growing confidence among many doctors about menopause care and HRT and we have thankfully noticed an increasing number of patients willing to talk about their symptoms and seek advice.