



ALL ABOUT OESTROGEN IN HRT

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Hormone replacement therapy (HRT) essentially replaces the hormones a woman is no longer producing in abundance. This is the most effective treatment for menopause and perimenopausal symptoms. One of the key components of HRT is oestrogen, this hormone is predominantly produced by the ovaries, and falling levels of oestrogen has wide-reaching effects from hot flushes and sweats, to joints pains, skin changes and vaginal dryness.

WHAT ARE THE BENEFITS OF OESTROGEN?

Most women notice an improvement in their wellbeing after a relatively short period of time (2-3 months), but it can take longer for things to return to normal. In addition to improving symptoms, HRT also reduces the risk of some chronic health issues including cardiovascular (heart disease), diabetes and osteoporosis (fragile bones which can break more easily). Women who take HRT have a lower risk of bowel cancer. In the majority of women who use HRT before the age of 60, the risks of HRT are outweighed by the benefits.

HOW IS OESTROGEN GIVEN?

Oestrogen can be replaced either through the skin as a patch, gel or spray (transdermal), or in a tablet or implant. Transdermal oestrogen is given in a form identical to the oestrogen which women naturally produce (estradiol), this is known as 'body-identical' oestrogen. Most products use oestrogen derived from plants. Oestrogen is also used vaginally in pessaries, tablets or creams to improve vaginal symptoms.

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SIDE EFFECTS OF HRT

Side effects are not common but include nausea, tender breasts and bleeding. Usually, these resolve after a few months, so it is important to allow time for your body to adjust to using the hormones and keep going!

If side effects do not settle or worsen, please discuss these with your menopause specialist or GP as some simple adjustments to your dose or regimen can often resolve these fairly easily.

WHAT ARE THE RISKS OF HRT?

Blood clots

Oestrogen given in an oral (tablet) form increases the risk of blood clotting, however using oestrogen through the skin does not increase this risk. Therefore, in women with a previously history of blood clots or other conditions which increase the risk of blood clots or strokes, using an oestrogen preparation through the skin (gel/patch/spray) is preferred.

Breast cancer

Using oestrogen and progestogen (combined HRT) is associated with a small increased risk of developing breast cancer. This is much lower than the risk of breast cancer associated with obesity or other lifestyle choices (smoking/alcohol). In addition, the use of micronized progesterone as part of combined HRT, does not increase breast cancer risk in the short term and there is a lower risk in women using this form of progestogen in the longer term.

HOW TO I USE MY HRT?

Patches

The best place to apply your patch is your buttock (where your trouser pocket would be). Try to massage the patch with your hand for 30 seconds, this warms the adhesive, so the patch adheres really well and reduces the risk of the patch becoming loose or falling off with exercise or bathing. If you have some sticky residue on removing the patch, the easiest way to remove this is with surgical spirit or baby oil.

Gel

Gels (sachet/pump) should be applied to the inner or outer thigh or upper outer arm. Try to smear the gel on the skin and allow it to absorb (otherwise it can take a while to rub in) and avoid washing your hands until they are also dry. This maximises the gel being absorbed effectively. Avoid contact with others in your family while the gel is wet on your skin and if you can wait until

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it is touch dry before dressing this again optimises how much you absorb.

Spray

The spray should be applied to the inner forearm (between the wrist and elbow). It is really important each spray doesn't overlap with another so ensure you use a different area of forearm with each dose, if needed using both forearms. The spray dries in a couple of minutes but try and avoid bathing for at least 60 minute to ensure all the oestrogen has absorbed.

I CAN'T GET HOLD OF MY HRT - WHAT SHOULD I DO?

HRT shortages have been a huge source of frustration and worry for many women in the UK. There has been a rise in demand for HRT, particularly transdermal products and, coupled with supply not rising accordingly, has meant many women are struggling to source certain products. The table below provides a useful conversion if you do need to change products temporarily until your preferred product is available again. Do take this to your GP if needed if they are unsure about what to issue.

	Ultra-low	Low	Medium	High
Patch (mcg)	Half x 25	25	50	75-100
Gel-pump	½ pump	1 pump	2 pumps	3-4 pumps
Gel-sachet	½ x 0.5mg sachet	0.5mg	1mg	1.5-2mg
Spray		1-2 sprays	2-3 sprays	>3 sprays

The absorption of transdermal oestrogen varies in women so although this is a guide, do liaise with your health care professional if your symptoms change when you use a new preparation.

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