

# How to use your Hormone Replacement Therapy

**Complex Menopause Service**  
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Hormone Replacement Therapy (HRT), or Menopausal Hormone therapy (MHT), remains the most effective treatment for menopausal symptoms. It usually consists of a small amount of the ovarian hormones' oestrogen and progesterone (and sometimes testosterone), or of medications that resemble these hormones. HRT is mainly used to improve or resolve troublesome menopausal symptoms by reducing hormonal fluctuations during perimenopause, and by giving back a small amount of hormone - or medications that work similarly to ovarian hormones - after menopause.

For most women who require HRT, the benefits generally outweigh the risks when started within 10-years of menopause, or under the age of 60. HRT can be taken in different ways including pills, patches, gels, sprays, implants, and pessaries.

### **Benefits of HRT**

- Resolves or reduces symptoms of peri/ menopause
- Reduces the risk of developing cardiovascular disease
- Reduces the risk of developing osteoporosis
- Continuous combined HRT reduces the risk of developing endometrial cancer

### **Side Effects**

Spotting or irregular vaginal bleeding is the most common side-effect. This is to be expected up to 3-6 months after starting HRT. It tends to settle with time or with changes/ adjustments to regimens. If bleeding persists after this point, more tests may be required to investigate this in more detail.

Individual hormonal side effects can include:

#### **Estrogen Related:**

Breast tenderness | Headaches | Rash | Heartburn | Leg cramps | Anxiety | Nausea

#### **Progesterone Related:**

Bloating | Rash | Mood symptoms | Breast Tenderness | Gastrointestinal side-effects such as diarrhoea and constipation

### **When is HRT not recommended**

- Recent heart attack or poorly controlled angina
- Recent stroke or clot
- Suspected, active, or previous history of breast cancer or a hormone-sensitive cancer
- Severe or active liver disease
- Irregular non-investigated vaginal bleeding

### **Risks Associated with HRT**

- A small increased risk of breast cancer with increasing duration of use which reduces on stopping. This risk is small in real numbers and varies with the type of HRT used.
- Small increased risk of endometrial cancer with sequential HRT
- Possible very small increased risk of ovarian cancer
- Small increased risk of clots and stroke with oral oestrogen
- Irregular vaginal bleeding which may require gynaecological investigations if persistent
- Deterioration in liver function tests

## Vaginal Oestrogen

This is a very effective treatment for genitourinary symptoms such as vaginal dryness, itch, discharge, and painful sex. It can also sometimes help with symptoms of overactive bladder and recurrent urinary tract infections. It usually consists of a small amount of oestrogen inserted into the vagina where it acts locally on the vagina and urogenital tissues. It is usually inserted as a pessary, cream, gel, or ring. It can usually be used by women who choose not to or can't take, systemic HRT - but can also be used by those that are taking systemic HRT. It is not linked with an increased risk of breast cancer.

## Testosterone

Women also produce testosterone but to a lesser degree than men. It is made in the ovary and the adrenal glands. There is an age-related decline over time which coincides with a reduction in ovarian egg reserve but production doesn't stop when a woman becomes menopausal. Its main indication for use is that of low libido and inability to orgasm, but it is important to note that low libido is a complex symptom with many other causes and psychosocial factors are particularly important. There is no conclusive evidence that it can improve low energy, fatigue, and cognitive symptoms such as brain fog.

Testosterone therapy for women is provided as a cream or gel which is usually applied on a daily basis. We do not have a licenced option in Ireland at present. Side-effects are usually rare but can include increased hair growth, acne, nausea, and headache. Male virilising symptoms such as male-patterned baldness and deepening of the voice should not occur if blood levels are kept within the female range. Before starting testosterone, a blood test is required to ensure the baseline total testosterone level is not higher than the normal female range. A monitoring blood test is then required 3-6 weeks after starting testosterone, and at 6-12 monthly intervals thereafter to ensure the level does not exceed the range of a young premenopausal woman. If no improvement is obtained after 3-6 months of use, it should be stopped.

## How long can I stay on HRT?

How long you decide to stay on HRT is an individual decision and depends on your own benefit/risk profile which changes with time, and whether you have ongoing symptoms. All patients taking HRT should have an annual consultation with their GP or menopause practitioner to discuss factors such as whether ongoing use is required and whether any dose reduction or changes should be considered. Vaginal oestrogen for genitourinary symptoms will often be required long-term.

## How to use your Hormone Replacement Therapy

### Estrogen

TYPE	DOSE	FREQUENCY
ESTRADOT (patch)		apply a new patch every 3-4 days
EVOREL (patch)		apply a new patch every 3-4 days
OESTROGEL (gel)		pumps per day
DIVIGEL (gel)		sachets per day
LENZETTO (spray)		sprays per day
Fematab (tablet)		Tabs per day

**Patches:** Apply to your abdomen, lower back, thigh, or buttocks and change twice/wk. Stick to the same days each week for e.g.: Monday & Thursday; Tuesday & Friday etc. You can wear the patch in the bath, shower, and when swimming. If the sticky residue of the patch remains on the skin, it can be removed easily with baby oil on cotton wool. If you are having problems with your patch sticking, please contact us to discuss.

**Gel:** Gel is usually administered via a gel-sachet or a pump-canister and applied to the outside of your upper arms or to the inside of your thighs. It is applied every day to clean, dry, unbroken skin. Depending on your dose, it can be applied in the morning, at night, or both morning and night. Apply after showering/bathing and ensure it has dried before getting dressed. Wash hands thoroughly after application. Wait 30mins to apply any other creams such as moisturisers, shower gels, and sun cream.

**Spray:** Spray is applied to the inside of your forearm on a daily basis to clean, dry, unbroken skin. Depending on your dose, it can be applied in the morning, at night, or both morning and night. Apply after showering/bathing and ensure it has dried before getting dressed. Wash hands thoroughly after application. Wait 30 mins to apply any other creams such as moisturisers, shower gels, and sun cream.

### Vaginal Estrogen

TYPE	DOSE	Frequency
Vagifem (pessary)		
Imvaggis (pessary)		
Vagirux (pessary )		
Ovestin (cream)		
Blissel (gel)		
Estring (ring)		

### Progestogens

TYPE	DOSE	FREQUENCY
UTROGESTAN (tablet by mouth or vaginally)		Use at night as it can make you sleepy. If inserting vaginally, do not be alarmed if you notice a white residue in the morning as the hormone has been absorbed
DUPHASTON (tablet by mouth)		Usually taken at night or twice/day
PROVERA (tablet by mouth)		
MIRENA (Intra-uterine coil)		Can stay in place for 5 years

### Combined Oestrogen and Progestogen preparations

Type	Dose	Frequency
Evorel Conti Patch		Apply a new patch every 3-4 days
Femoston Tablet		One tablet daily

### Testosterone preparations

TYPE	DOSE	FREQUENCY
Testogel 50mg sachets (gel)		1 sachet to last approx. 10 days as a starting dose. Apply to upper or outer thigh, or lower abdomen, and vary site of application.
Tostran 2% (gel)		1 metered pump alternate days as a starting dose. Application site as above
Androfeme1 (cream)		1 application (0.5mls) per day as a starting dose. Application site as above

Your menopause symptoms should start to improve within 2-3 weeks, but it can take up to 3-6 months for the full benefit to be obtained.

Side effects are common but usually settle with time or adjustments. If you are not managing, please contact us for further guidance. In addition, if your symptoms are severe, it's OK to stop HRT and contact us for guidance.

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## Menopause symptom checker

Please fill this symptom checker prior to commencing HRT and again prior to your review appointment.

<b>Cycle changes</b>	<b>Yes</b>	<b>No</b>		<b>Vasomotor</b>	<b>Yes</b>	<b>No</b>
Shorter period cycles				Hot flushes		
Lighter period cycles				Night sweats		
Heavier period cycles						
Bleeding in between periods				<b>Mood/Memory</b>		
Longer period cycle or skipped periods				Anxiety		
				Feeling low		
<b>Physical</b>				Tearfulness		
Headache				Irritability		
Palpitations				Mood swings		
Joint pains				Bursts of anger		
Aches and pains				Worsening PMS		
Burning mouth/tongue				Poor memory of 'Brain Fog'		
Dry skins/nails/eyes/hair				Poor Focus and concentration		
Itchy or crawling skin				Loss of interest in most things		
Hair loss				Feeling excitable		
Acne						
Numbness in parts of body				<b>Bladder/Vaginal/GSM</b>		
Breathing difficulties				Painful sex		
				Dry or itchy vagina		
<b>Miscellaneous</b>				Vaginal discharge		
Loss of libido				Overactive bladder		
Low energy				Recurrent UTIs		
Dizziness						
Tinnitus						
Poor sleep						

**For further information and resources:**

**Menopause, HRT and POI:**

Women's Health Concern: [www.womens-health-concern.org](http://www.womens-health-concern.org)

Menopause Matters: [www.menopausematters.co.uk](http://www.menopausematters.co.uk)

Daisy Network: [www.daisynetwork.org](http://www.daisynetwork.org)

Ireland's Menopause Campaign: [www.gov.ie/en/campaigns/menopause/](http://www.gov.ie/en/campaigns/menopause/)

National Institute for Health and Care Excellence (NICE) "NICE Guideline (NG23) Menopause Diagnosis and Management" [www.nice.org.uk/guidance/ng23](http://www.nice.org.uk/guidance/ng23)

International Menopause Society: [www.imsociety.org/](http://www.imsociety.org/)

**Diet and lifestyle:**

Irish Heart Foundation: [www.irishheart.ie](http://www.irishheart.ie)

Irish Nutrition and Dietetic Institute : [www.indi.ie](http://www.indi.ie)

National Quit Smoking support: [www.quit.ie](http://www.quit.ie)

Alcohol information and support: [www.askaboutalcohol.ie](http://www.askaboutalcohol.ie)

**Psychological wellbeing:**

Apps to download for mindfulness, meditation, relaxation, sleep:

Headspace  Calm  Sleepio 

HSE Minding Your Wellbeing programme: <https://www2.hse.ie/healthy-you/minding-your-wellbeing-programme.html>

**Sexual Health and Wellbeing**

HSE sexual health and wellbeing resource: [www.sexualwellbeing.ie](http://www.sexualwellbeing.ie)

**Pelvic Floor and Bladder:**

International Urogynaecological Association: [www.yourpelvicfloor.org](http://www.yourpelvicfloor.org)

St Michaels Hospital, Pelvic Floor Centre: [www.stmichaels.ie/videos](http://www.stmichaels.ie/videos)

[www.bladdermatters.co.uk](http://www.bladdermatters.co.uk)

**Bone Health and Osteoporosis**

International Osteoporosis Foundation [www.osteoporosis.foundation](http://www.osteoporosis.foundation)

Irish Osteoporosis Society: <https://www.irishosteoporosis.ie/>

**Cancer services:**

ARC Cancer Support Centres: [www.arccancersupport.ie](http://www.arccancersupport.ie)

Irish Cancer Society: [www.cancer.ie](http://www.cancer.ie)

Marie Keating Foundation: [www.mariekeating.ie](http://www.mariekeating.ie)

