

**Menopause evening at 10 Harley Street  
12<sup>th</sup> March 2019**



# **Menopause, HRT and long-term health**

**- is there a conspiracy!?? -**

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## Win a PRIZE! - Quiz

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1. What is the commonest killer of women in England today? £5.00
2. What most commonly puts women and their physicians off HRT? £2.50
3. What could most effectively improve a 52 year old woman's energy levels, her sense of well being and rekindle her interest in her partner? £1.00

## Win a PRIZE! - Answers

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1. What is the commonest killer of women in England today? - **DEMENTIA**
2. What most commonly puts women and their physicians off HRT? - **BREAST CANCER**
3. What could most effectively improve a 52 year old woman's energy levels, her sense of well being and rekindle her interest in her husband? - **TESTOSTERONE**



# **A conspiracy theorist I am not , but....**

- **The scare-mongering of 2002-2003!**
- **It took NICE 12 years to recommend that GPs should offer HRT to more women**
- **No day goes by without a negative story about HRT**
  - **increased risk of clots**
  - **increased risk of Alzheimer's disease**

# HRT and breast cancer - the risks in perspective -



**Estrogen-only therapy does NOT  
increase the risk of breast cancer**

**If anything, Estrogen-only therapy  
is associated with a reduced risk**

**- WHI & other studies /reports -**

# The Bogeyman of HRT

## - Progesterone -

- Unopposed Estrogen poses a risk of **ENDOMETRIAL** cancer
- Progestogens are given to minimize this risk



# ??Circumventing the breast cancer risk of Progesterone:

- The Mirena IUS – local rather than systemic progesterone
- Progestogens given every 3-4 months to induce endometrial shedding

# **HRT breast cancer risks in perspective**

**A comparison of lifestyle risk factors versus HRT treatment.  
Difference in breast cancer incidence per 1,000 women aged 50-59.  
Approx no. of women developing Ca breast over the next 5 years.**

23 cases of breast cancer diagnosed in the UK general population



## **Impact of various lifestyles / interventions**

- Combined HRT**
- Estrogen only hormone therapy**
- Alcohol**
- Smoking**
- Obesity**

# Impact of combined HRT

**23 cases of breast cancer diagnosed in the UK general population**



**An additional four cases in women on combined hormone replacement therapy (HRT)**



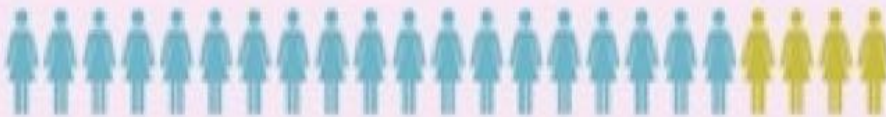
# Impact of Estrogen-only hormone therapy

(Women without a womb, who do not need progesterone)

23 cases of breast cancer diagnosed in the UK general population



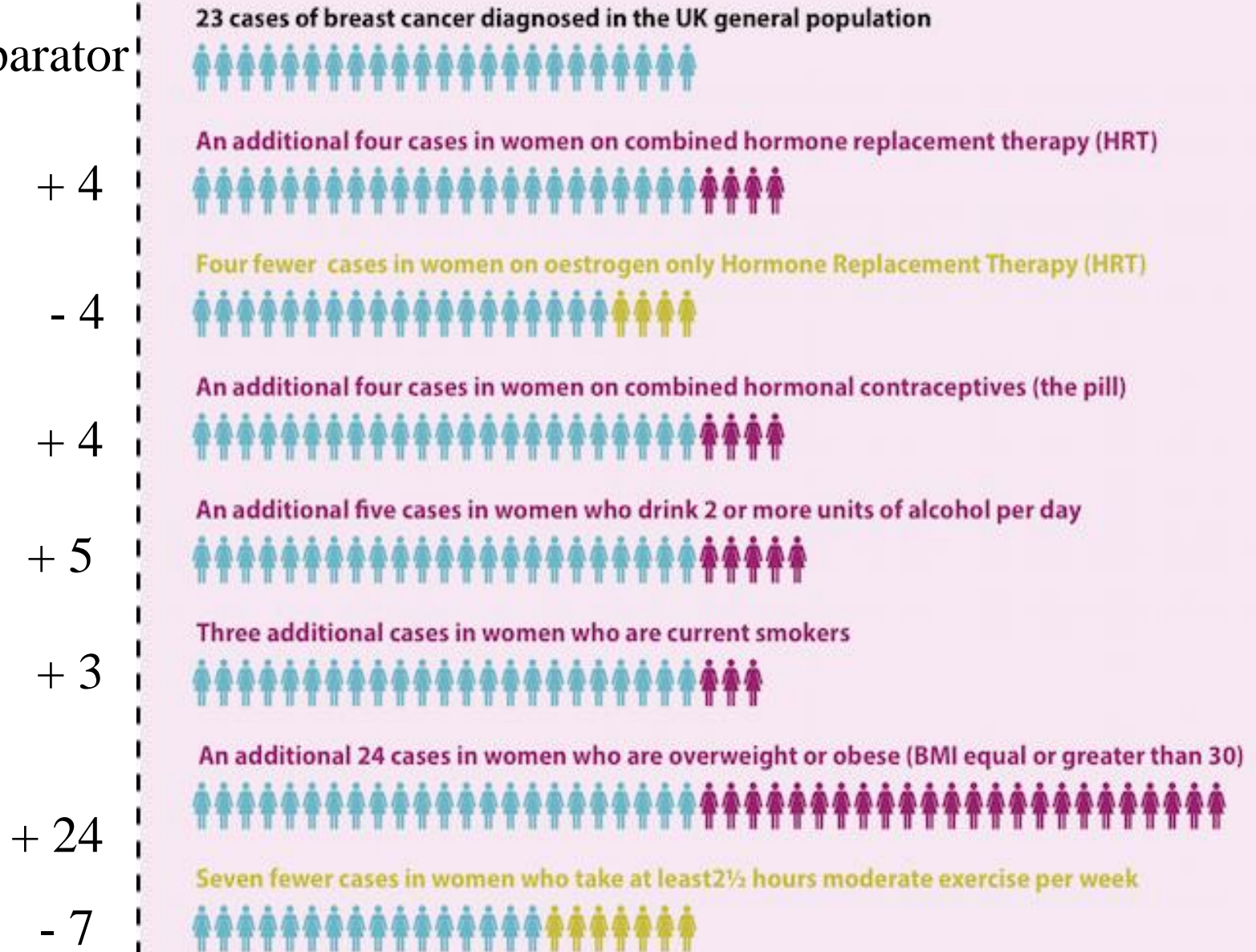
Four fewer cases in women on oestrogen only Hormone Replacement Therapy (HRT)



# Other life-style factors: impact on risk of breast cancer.



comparator



# 1. Peri-menopausal **Estrogens** protect against Alzheimers Disease



# Dementia – a global epidemic

## ■ Current WHO data on Dementia

- 50 million people are currently affected
- 132 million people projected to be affected by 2050

(ref - )

## Global financial costs of caring for dementia

- US\$800 billion
- US\$2 trillion by 2030

(ref-)

## Human cost of the dementia epidemic

- Major cause of disability and dependency among older people worldwide
- Has physical, psychological, social, economic, impact on caregivers, families and society

(ref-)



# Dementia – a global epidemic

**A epidemic of biblical proportions that dwarfs the HIV epidemic**

## **Some facts:**

- **Alzheimer's Disease (AD) accounts for 70% of all dementia**
- **1:10 people will develop AD after 65 years of age**
- **Female preponderance: 16 women for every 10 men**
- **No one is immune**
- **One new person is affected by dementia every 4 seconds**  
**(Pantzka's et al, 2016)**

# Dementia – a global epidemic

**At present there is  
no proven  
intervention that  
prevents Dementia**



**Hormonal optimization of women's health in the  
menopausal transition  
- some novel concepts -**

**Peri-menopausal Estrogens  
protect against Alzheimers  
Disease -**

**The Evidence in Humans**

## Estrogens protect against Alzheimers Disease: **Critical window**

### ■ Peter Zandi, Neurology 2012

- Longitudinal cohort study
- Perimenopausal Estrogen-only HRT within 5 years of menopause + use for 10 or more years ==35% reduced risk of AD [95% CI 0.43-0.98]
- Menopausal Estrogen-only HRT for 5 or more years after menopause ==12% reduced but NS risk of AD [95% CI 0.49-1.51]

# Testosterone is an essential component of HRT



# Testosterone – often misunderstood

- A “male hormone”
- Ideas of unwanted body hair
- Fear of “voice changes

**But the ovaries produce THREE times the amount of testosterone as estrogen before the menopause: Testosterone is just as important a hormone as the other ovarian hormones estrogen and progesterone, and levels gradually decline with age or precipitously with oophorectomy.**

For all women, testosterone plays a vital role in **bone strength, brain function and the overall development of lean muscle mass and strength.** It also helps contribute to a **general sense of well-being and higher energy levels.** And perhaps most crucial is its effect on a woman's **libido or sex drive.**

# **Testosterone – impact of declining levels**

- Women desire sexual intercourse less**
- When they do have sex it is reportedly less pleasurable**
- Reports of increased tendency to depression**
- Poor energy levels are a common complaint**



**Testosterone is / should be an  
essential component of HRT**

# **Impact of Testosterone replacement therapy**

- **Improvement in libido**
- **Better energy levels**
- **Improvement in general well-being, emotions, moods, better quality sleep and even dreams, better concentration**
- **Improved skin and hair quality**

# **Testosterone – administration**

**- Transdermal gels / vaginal gels**

**- Subcutaneous implants**

**- Lozenges**

**NB:**

**- Not licensed for use in women in the UK**

**- Be careful not to create a mismatch eg partner with erectile dysfunction**

# **Testosterone therapy – Side effects**

**VERY rare:**

- **increased body hair – facial troubles most women**
- **Voice change**



***Thank you***