



# HORMONE REPLACEMENT THERAPY

荷尔蒙替代疗法

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Hormon

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## Health Promotion Board

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This Patient Education Booklet has been prepared based on the Clinical Practice Guidelines on Hormone Replacement Therapy. It is written for patients requiring Hormone Replacement Therapy, their family members and caregivers, and aims to help them understand their conditions and treatments. It is hoped that patients, their family and caregivers would be able to use this booklet as a basis to discuss with their doctors the treatment options available to them.

Clinical Practice Guidelines are guidelines, based on the best scientific evidence currently available, to help doctors make appropriate choices about treatment of their patients' illnesses. The guidelines do not replace the judgment of the doctor. It is important to remember that each person is different, and the Clinical Practice Guidelines may not always apply to everyone.

## 1 WHAT IS MENOPAUSE?

Menopause is the time in a woman's life when she stops having her menstrual periods. Her ovaries run out of eggs and the production of oestrogens, the main sex hormones, gradually stops.

Monthly periods become irregular and gradually stop. The last period is known as menopause.

## 2 NATURAL MENOPAUSE

This happens when a woman's period has stopped for at least 6 to 12 months and is not caused by any medical or surgical condition. The average age of menopause in women in Singapore is 49 to 50 years.

## 3 PREMATURE MENOPAUSE

Menopause can occur earlier by surgically removing both ovaries, premature ovarian failure or exposure to certain chemical agents used for chemotherapy and radiotherapy.

## 4 WHAT ARE THE SYMPTOMS OF MENOPAUSE?

Most menopausal women, especially Asian women, do not experience severe symptoms.

There may be symptoms like hot flashes, night sweats, sleeplessness or palpitations. You might experience psychological symptoms of anxiety,

irritability, depression, tiredness, loss of libido (sexual drive), lack of concentration and loss of recent memory.

There may also be bone pains, vaginal dryness, painful intercourse, bladder problems and skin changes.

## 5 WHAT ARE THE CHRONIC CONDITIONS ASSOCIATED WITH MENOPAUSE?

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Osteoporosis (weakening of the bones), urogenital atrophy (weakening of bladder and vaginal wall), cardiovascular disease (heart disease and stroke), all increase after menopause. They are all associated with, but not necessarily caused by the drop in oestrogen levels. It is unclear whether dementia is associated directly with a fall in oestrogen levels.

Women with premature menopause are at increased risk of developing osteoporosis and cardiovascular disease, but are at lower risk of breast cancer.

Women show an increase in body weight with age, and this tends to begin at, or near menopause. Body fat accumulates at the abdomen with age.

## 6 WHAT IS HORMONE REPLACEMENT THERAPY?

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Hormone replacement therapy (HRT) is one of the most commonly prescribed drug treatment for postmenopausal women in the world.

Women can use HRT to treat symptoms of menopause as the treatment would restore the female hormones in the body.

HRT can be taken by tablets, skin patches, gels, vaginal cream or implants. HRT can be oestrogen only or a combination of oestrogen and progesterone. A woman who has had her uterus removed needs only oestrogen.

A woman who still has her uterus should take oestrogen and progesterone to protect the uterus. She can choose the regular bleed HRT which consists of daily oestrogen and cyclical progesterone. The no-bleed HRT consists of daily oestrogen and progesterone.

## 7 WHAT IS WOMEN'S HEALTH INITIATIVE (WHI)?

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It is a large study conducted by National Institutes of Health of USA involving 161,000 women. The study involved trials of oestrogen alone and oestrogen plus progestin.

The oestrogen plus progestin trial was stopped in July 2002 after 5.6 years because the risk of breast cancer, coronary heart disease, stroke and blood clots outweighed the benefits on hip fracture and colorectal cancer.

The oestrogen alone trial was stopped in March 2004 after 7 years of follow-up on 11,000 healthy post-menopausal women who had had a hysterectomy. The oestrogen alone appears to increase the risk of stroke and decrease the risk of hip fracture. At the same time, oestrogen alone did not appear to increase the risk of breast cancer or heart disease during the time period of the study.

## 8 WHAT SINGAPOREAN AUTHORITIES RECOMMEND?

Long term HRT may increase the risk of breast cancer and lack of protection against coronary heart disease. However, the study also confirms the long term benefits of reduced risks of colorectal cancer and hip fractures.

Women who are currently on HRT should not be unduly alarmed. They are advised to discuss with their doctor their individual risk for specific conditions that they may be harmed by, or benefit from, hormone use.

However HRT should not be started or continued for the purpose of reducing risk of coronary heart disease. Studies have concluded that there are risks with long-term use of combined HRT, although the risk for an individual is very small.

Women whose main reason for using HRT is the prevention of osteoporosis should be aware that there are currently many non-HRT alternatives which may be effective, both in the prevention as well as the treatment of osteoporosis.

For women taking HRT for short-term relief of menopausal symptoms, the benefits of HRT are likely to outweigh the risks.

## 9 HOW DO I KNOW WHETHER I NEED HORMONE THERAPY?

You need to see a doctor who will discuss with you the need for HRT. You must balance the advantages and disadvantages of taking HRT.

A discussion of other possible alternative treatments should also be done. In the event that you have decided that you require HRT, do bear in mind that the complications are still very small.

A regular assessment of your health is necessary even if you decide not to take HRT.