



Hormone replacement therapy and risk of breast cancer

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- **Hormone replacement therapy (HRT)** is used to relieve symptoms of the menopause such as hot flushes and night sweats when these affect your daily activities
- HRT should be used at the **lowest dose (amount) for the shortest amount of time** needed to relieve symptoms. This is because HRT increases the chance (risk) of some cancers and of having blood clots or stroke. These risks generally get bigger the longer HRT is used
- A new study has confirmed that women who use HRT for longer than 1 year have a higher risk of breast cancer than women who never use HRT
- The risk of breast cancer falls after HRT is stopped but some increased risk remains for more than 10 years compared to women who have never used HRT
- The increased risk of breast cancer is seen with **all types of HRT**, except for topical HRT applied directly into the vagina
- Your exact increase in risk will depend on what type of HRT you use and how long for. Your doctor or nurse can tell you more about your risks. Estimates are included later on

This large-print information sheet has been produced by the Medicines and Healthcare products Regulatory Agency (MHRA), an executive agency of the Department of Health and Social Care, to assist healthcare professionals when discussing new information about breast cancer risk with women using or who are considering using HRT. © Crown Copyright. Page | 1 of 7



I am using HRT at the moment. What should I do?

- Your doctor or nurse has been asked to discuss the updated risks with you at your next appointment
 - It is OK to stop HRT at any time, but stopping gradually can reduce the chance of menopause symptoms coming back
- If you wish to stop, you can ask your doctor or nurse about this and other ways to manage the symptoms of the menopause

I am thinking about using HRT in the future. What should I do?

- As for all medicines, HRT has benefits and risks. You should discuss the benefits and risks with your doctor or nurse to decide if you need HRT and which form is right for you
- Use of HRT for as short a time as possible will help to reduce the risks

Information about breast cancer for all women, including past HRT users

- All women should be vigilant for the signs of breast cancer, such as dimpling of the skin, changes in the nipple, or any lumps you can see or feel
- Always see a doctor if you notice any changes to your breasts
- It is important for all women to go to breast cancer screening when invited
- You can discuss any concerns with your doctor or nurse if you are worried

Always read the leaflet that comes in the box with your medicines (ask your pharmacist if you did not receive one) – this will provide more information on other key risks and side effects of HRT



Questions you may have about your medicine

What is HRT?

HRT replaces hormones that fall during menopause. This can help make some symptoms of menopause less severe or less frequent. HRT can be made of one hormone type (estrogens) or two types of hormones together (estrogens and progestogens).

Estrogen-only HRT can increase the risk of cancer of the womb (endometrial cancer). Adding a progestogen reduces this risk for women who still have their womb (have not had a hysterectomy). The hormones may be in the same tablet or patch or be separate. Progestogens may be added to an estrogen for some days of the month (sequential HRT) or every day (continuous HRT).

The most common ways to use HRT are tablets that are swallowed, patches or gels that go on the skin, or implants that go under the skin. The hormones from these forms of HRT go into the whole body (systemic).

What is topical HRT?

Topical HRT (also known as local HRT or vaginal estrogen) contains the hormone estrogen in a cream, tablet, or a ring. These are applied into the vagina.

Topical HRT is used to relieve symptoms of the vagina due to the menopause. These symptoms can include vaginal dryness, pain during sex, and an increased risk of vaginal or urinary infections. Topical HRT may not be an option for all women since it does not help with other menopause symptoms such as hot flushes or night sweats.

The study found no evidence that this type of HRT increased the risk of breast cancer.



What is my risk of breast cancer?

Your overall risk of breast cancer will depend on many things. Other factors that increase risk of breast cancer include smoking, family history, alcohol use, and obesity. The new study showed that an increased risk of breast cancer with HRT is similar whether HRT is taken orally (swallowed) or delivered via patches or gels or implants.

In the UK about 1 in 16 women who never use HRT are diagnosed with breast cancer between the ages of 50 and 69 years. This is equal to 63 cases of breast cancer per 1000 women.

Over the same period (ages 50–69 years), with 5 years of HRT use, the study estimated:

- about 5 extra cases of breast cancer per 1000 women using estrogen-only HRT
- about 14 extra cases of breast cancer per 1000 women using estrogen combined with progestogen for part of each month (sequential HRT)
- about 20 extra cases of breast cancer per 1000 women using estrogen combined with daily progestogen HRT (continuous HRT)

These risks are for 5 years of HRT use. The numbers of extra cases of breast cancer above would approximately double if HRT was used for 10 years instead of 5.

Why has the information changed?

An increased risk of breast cancer with HRT has been known for some time. The amount of information available about the risks has increased as more women have been followed up who used HRT and then stopped. The new study measured how many cases of breast cancer occurred in women who never used HRT and in women who used HRT, then stopped.



What will happen if I stop HRT?

No medical harms are associated with stopping HRT and you can stop it on without seeing a healthcare professional. However, stopping gradually may help to prevent symptoms of the menopause from coming back. Your doctor, nurse, or pharmacist can advise you on how best to do this.

I've been told HRT is good for my bones. Should I keep taking HRT?

Some women's bones get thin and fragile during and after the menopause. This is called osteoporosis. HRT helps to prevent osteoporosis when it is used for a long time. Because of the risks, HRT is only recommended for women who are at a high risk of fractures (breaks) due to osteoporosis and only when other medicines cannot be used. Speak to your doctor or nurse to see if this applies to you.

I've been told HRT is good for my heart. Should I keep taking HRT?

HRT is not recommended or licensed to protect the heart. Some studies have suggested HRT might slightly lower the risk of heart disease in younger women (in their 50s). However, not many women of this age were included in studies measuring this and the results do not show a clear-cut benefit.