

Menopause & Hormones

Common Questions

What is menopause?

Menopause is a normal change in a woman's life when her period stops. That's why some people call menopause "the change of life" or "the change." During menopause a woman's body slowly produces less of the hormones estrogen and progesterone. This often happens between ages 45 and 55. A woman has reached menopause when she has not had a period for 12 months in a row.

What are the symptoms of menopause?

Every woman's period will stop at menopause. Some women may not have any other symptoms at all. As you near menopause, you may have:

- Changes in your period—time between periods or flow may be different.
- Hot flashes ("hot flushes")—getting warm in the face, neck and chest with and without sweating.
- Night sweats that may lead to problems sleeping and feeling tired, stressed or tense.
- Vaginal changes—the vagina may become dry and thin, and sex may be painful.
- Thinning of your bones, which may lead to loss of height and bone breaks (osteoporosis).

Who needs treatment for symptoms of menopause?

- For some women, many of these changes will go away over time without treatment.
- Some women will choose treatment for their symptoms and to prevent bone loss. If you choose hormone treatment, estrogen alone or estrogen with progestin (for a woman who still has her uterus or womb) can be used.

What is hormone therapy for menopause?

Lower hormone levels in menopause may lead to hot flashes, vaginal dryness and thin bones. To help with these problems, women are often given estrogen or estrogen with progestin (another hormone). Like all medicines, hormone therapy has risks and benefits. Talk to your doctor, nurse, or pharmacist about hormones. If you decide to use hormones, use them at the lowest dose that helps. Also use them for the shortest time that you need them.

What are the benefits from using hormones for menopause?

- Hormone therapy may help relieve hot flashes, night sweats, vaginal dryness or dyspareunia (pain with sexual activity).
- Hormones may reduce your chances of getting thin, weak bones (osteoporosis) which break easily.

What are the risks of using hormones?

For some women, hormone therapy may increase their chances of getting blood clots, heart attacks, strokes, breast cancer, and gall bladder disease. For a woman with a uterus, estrogen increases the chance of getting endometrial cancer (cancer of the uterine lining). Adding progestin lowers this risk.

Who should not take hormone therapy for menopause?

Women who:

Think they are pregnant

Have problems with vaginal bleeding

Have had certain kinds of cancers

Have had a stroke or heart attack

Have had blood clots

Have liver disease



How long should I use hormones for menopause?

- You should talk to your doctor, nurse or pharmacist.
- Hormones should be used at the lowest dose that helps and for the shortest time. (For example, check if you still need them every 3-6 months.)

Does it make a difference what form of hormones I use for menopause?

The risks and benefits may be the same for all hormone products for menopause, such as pills, patches, vaginal creams, gels, rings, or “custom-mixed (compounded) hormones” prepared by a pharmacist.

Are so-called “bioidentical hormones” safer or more effective than other forms of hormone therapy for menopause?

The FDA does not have evidence that “bioidentical hormones” are safer or more effective than other hormone products. FDA believes that the benefits and risks are likely to be the same.

Is the hormone estriol a “safer form of estrogen”?

The FDA has not approved any drug that contains estriol. FDA does not have evidence that shows that estriol is safe and effective.

Has FDA approved other treatments for menopause?

Yes. In 2013, FDA approved:

- a non-hormonal treatment for moderate to severe hot flashes associated with menopause.
- a medicine to treat moderate to severe dyspareunia (pain with sexual activity) due to vaginal changes that occur with menopause.

Are herbs and other “natural” products useful in treating symptoms of menopause?

At this time, we do not know if herbs or other “natural” products are helpful or safe. Studies are being done to learn about the benefits and risks.

Should I use estrogen just to prevent thin bones?

You can, but there are also other medicines and things you can do to help your bones.

Should I use hormone therapy to protect the heart or prevent strokes?

No, do not use hormone therapy to prevent heart attacks or strokes.

Should I use hormone therapy to prevent memory loss or Alzheimer’s disease?

No, do not use hormone therapy to prevent memory loss or Alzheimer’s disease.

Do hormones protect against aging and wrinkles or increase my sex drive?

Studies have not shown that hormone therapy prevents aging and wrinkles or increases sex drive.

For more information:

Food and Drug Administration

www.fda.gov/womens

National Women’s Health Information Center

www.womenshealth.gov

National Institutes of Health

www.nih.gov/PHTindex.htm

Agency for Healthcare Research Quality

www.ahrq.gov/ppip/healthywom.htm

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