

health

Exploring HRT

Hormone Replacement Therapy should be avoided as far as possible, says DR KIRAN COELHO, Co-ordinator, Department of Gynaecology, Lilavati Hospital

What is HRT?

Hormone Replacement Therapy (HRT) is the replacement of the hormones, which are not produced by the body anymore. Till menopause, throughout the reproductive age group, estrogen is produced every month. A woman's appearance — her contours, the lack of facial hair, breast growth, monthly periods and vaginal lubrication — are all because of estrogen. After menopause, estrogen production reduces as a result of which estrogen levels in the body becomes low. The hair, teeth, breasts, bones, heart, vagina, uterus — all have estrogen receptors, which do not receive estrogen. As a result, they do not function optimally. Consequentially, the menopausal symptoms appear with the waning of ovarian function.

Indications of lack of estrogen...

In the postmenopausal phase, the estrogen becomes so low that soon you have short-term, mid-term and long-term implications of the lack of estrogen, which are...

Immediate/short-term: Hot flushes which die out over three to four years, vaginal dryness, frequency of urination, loss of libido, mood swings, irritability, and other psychosomatic problems.

Mid-term: Sagging of breasts, frequent vaginal infections, frequent urinary tract infections, incontinence, arthritis and bony pains.

Long-term: Heart disease and osteoporosis.

Who should take it...

Most women are symptomatic in the peri-menopause period — that is premenopause, during menopause or soon after menopause. So it's beneficial to give estrogen to them. It should, however, be given for a short-term and not for protection from osteoporosis and heart disease as was given in the past. If estrogen or estrogen progesterone are given for more than five years, then the incidence of breast cancer increases. There has to be medical supervision and the dosage of drugs is tailormade to suit an individual. HRT can be given through oral medication, skin creams, patch, contraceptive device, nasal spray and vaginal rings.

Why HRT was popular...

The age of 45 to 55 years is often considered the prime of a woman's life. In the past, it was thought that if lack of estrogen was causing so many problems, why not replace the hormone? That is essentially 'HRT'. Ideally, it's estrogen, which should be replaced, but estrogen can't be given to a woman with an intact uterus as it stimulates the lining of the uterus and results in cancer. Therefore, in a woman with intact uterus, estrogen and progesterone are given. But in a woman who has had a hysterectomy, only estrogen is given.

Recent studies...

Recent studies show, giving estrogen-progesterone over a long period of time causes more damage than good. The Million Woman Study, HERS Study (Heart Estrogen Replacement Study), the WHI Study (World Health Initiative), etc. had to be stopped mid-way because they realised there were more problems than benefits.

Guidelines for HRT...

The International Menopausal Society has laid down guidelines and rules for HRT, which are as follows...

As far as possible don't take HRT.

If at all a woman is very symptomatic, it should be given in the lowest possible dose for the shortest possible duration.

For long-term protection against heart disease, it should not be given.

It can be given for long-term protection of osteoporosis but with due risks.

Alternatives...

Because primary estrogen-progesterone is a problem, there are other substances, which can be given that mimic estrogen — designer drugs like raloxifene and tamoxifen. These act on the bones and heart like estrogen positively but have a negative estrogen effect on the uterus and breasts. There are Selective Estrogen Receptor Modulators (SERMs), which also have their own set of side-effects. There is also phyto-estrogen or plant estrogen, but all of these have very doubtful efficacy. Now world over, estrogen-progesterone is not being given. In the west, women took it for years. Only in our country because women never complained that much, was it avoided.

Way out for menopausal women...

Recognise that estrogen will be less. Develop a positive attitude. Lifestyle change is very important: Diet control is important as is eating satvik type of foods, right amount of proteins, less carbohydrate and less fat. Increase in diet of calcium rich food, magnesium and soya bean would also help. Aerobic exercise is very important – weights, gymming and walks strengthen the bones.

(Co-ordinated by Savia Rajagopal)

