



# *Health & Human Services*

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1992 – 2002... “10 Years of Healing, Protecting and Caring”

## **The Women’s Health Initiative and Hormone Replacement Therapy**

### **1. What is the “Women’s Health Initiative” – and what are the findings that I have been hearing about in the media?**

A very important study, called the Women’s Health Initiative (WHI), was initiated by the National Institutes of Health (NIH) in 1993 to evaluate the effects of postmenopausal hormone therapy on women’s health. The researchers conducting the study published new information on July 9<sup>th</sup> that changes some of our understanding about the risks and benefits of estrogen and progesterone. When this study was started, it was believed that hormone therapy would protect women from heart attack and osteoporosis – as well as relieving as relieving their symptoms of menopause, such as hot flashes. The WHI study was begun to evaluate whether this commonly held belief was correct. Surprisingly, the study has shown that women who are taking estrogen and progesterone after menopause have a small increased risk of heart attack, stroke and breast cancer. The study also confirmed that there appear to be several health benefits of taking estrogen and progesterone – specifically a decrease in colon cancer and hip fractures. The study’s investigators believe that the risks of breast cancer and cardiovascular (heart and blood vessel) disease outweigh these benefits – especially for women who have taken this combination of hormones for more than 5 years. For this reason, July 9<sup>th</sup> they announced that they are ending the part of the research that studied combination estrogen and progesterone.

### **2. If I have been taking estrogen and progesterone, what are the chances that I will have a heart attack, stroke or breast cancer?**

The recent WHI results predict that for a healthy woman aged 50 – 70 years who has been taking estrogen and progesterone for more than 5 years, the chances of her having a heart attack in the next 10 years is 3.7% (compared with 3.0% for non-users). The risk for this same woman to have a stroke in the next 10 years is 2.9% (compared with 2.1% for non-users) and for breast cancer it is 3.8% (compared with 3.0% for non-users). These are very small increases in risk for individual women. However, over time, small risks for individuals add up to a more significant risk for women within the entire population.

### **3. What should I do if I am taking estrogen and progesterone?**

If you have not done so already, examine your reasons for taking these hormones, and whether you wish to continue. The decision is not an urgent one and should be made thoughtfully. If you have any questions about your particular medication situation, please call your provider to discuss it at your next appointment.

#### **4. What should I do if my doctor encouraged me to take hormones to help prevent heart disease or osteoporosis?**

Heart disease remains the number one cause of death for postmenopausal women in this country. Osteoporosis remains a significant source of disability and suffering for older women. It is important for all women to know that there are many safe ways to lower their risks of these diseases. If you smoke, quitting will have the most significant benefit for both your heart and bone health. Also, working to keep your blood pressure and cholesterol levels in the normal range -either through diet, exercise or medication -is very important to help lower your risk of heart attacks. Consuming adequate calcium and Vitamin D -either in your diet or with supplements -will significantly lower your chance of bone fractures as you age.

#### **5. What should I do if I am taking just estrogen because I have had a hysterectomy?**

The WHI study has not found the same breast cancer risk for women who are taking estrogen alone. (Progesterone is prescribed to women to help prevent cancer of the uterus. ). At this time, if you have had a hysterectomy and are taking estrogen alone, we do not advise you to stop your medication. There will be more information about women in the WHI study who are just on estrogen over the next several years. If you would like to consider stopping your estrogen anyway, you may want to discuss this with your doctor or nurse practitioner. **Women who have not had a hysterectomy (i.e., women who still have a uterus) and who are on estrogen and progesterone should not consider switching to estrogen alone to decrease their breast cancer risk.** We already know that the risk of endometrial cancer (cancer of the uterus) from estrogen alone outweighs the benefits of the drug.

#### **6. What should I do if I have menopausal symptoms such as hot flashes, mood changes or night sweats?**

We know that estrogen (with or without progesterone) is the most effective treatment for menopausal symptoms. Women who are taking hormones for this reason, or who are considering taking them, need to know that studies have not shown increased risks from estrogen and progesterone if they are taken for less than five years to control symptoms. However, it is probably best to consider limiting the amount of time on these drugs to 1 to 3 years.

#### **7. What should I do if I have been taking the estrogen patch or estrogen cream?**

The WHI study did not specifically address either of these issues. The estrogen patch when used in conjunction with progesterone may also increase the risk of breast cancer, strokes and heart attacks, but we do not know at this point. Estrogen cream is most likely a safe way to treat menopausal symptoms of vaginal dryness because only a small amount of the hormone is absorbed into the blood stream.

#### **8. How can I find out more about this?**

For more detailed information about the WHI study – and to learn about day to day developments – please visit their website at [www.whi.org](http://www.whi.org). More information can also be found at the north American Menopause Society website at [www.menopause.org](http://www.menopause.org). If you have any questions about your medications and whether you should continue taking them, please contact your doctor or nurse practitioner.