Hormone Replacement Therapy (HRT): Understanding Your Options

Written by the Midlife and Menopause Society of Zambia

Hormone replacement therapy (HRT), also called **menopausal hormone therapy (MHT)**, is a treatment that replaces some of the hormones that decline during perimenopause and menopause. It is primarily used to relieve troublesome menopause symptoms and can also provide benefits for bone health in appropriate women.

HRT is not necessary for every woman. Whether it is appropriate depends on your symptoms, age, stage of menopause, medical history, personal preferences, and individual risks and benefits. A healthcare professional can help you decide whether HRT is suitable for you.

What hormones are used?

The two main hormones used in menopausal hormone therapy are **oestrogen and progestogen**.

Oestrogen

Oestrogen is the main hormone used to treat many menopause symptoms, including:

- Hot flushes and night sweats
- Sleep disruption associated with hot flushes
- Vaginal dryness and discomfort
- Some urinary symptoms
- Other symptoms associated with declining oestrogen levels

Oestrogen can also help protect against bone loss while it is being used.

Progestogen

Women who still have a uterus generally need a progestogen alongside systemic oestrogen. This is because oestrogen alone can stimulate the lining of the uterus (endometrium), increasing the risk of endometrial cancer.

Women who have had their uterus removed (a hysterectomy) generally do not require progestogen with systemic oestrogen, although there are exceptions depending on their individual circumstances.

What forms of HRT are available?

HRT can be administered in several ways. The most appropriate option depends on symptoms, medical history, preferences and what is available locally.

Tablets

Hormones can be taken by mouth as tablets. Depending on the treatment, these may contain oestrogen alone or a combination of oestrogen and progestogen.

Patches

Oestrogen can be delivered through a patch placed on the skin. The hormone is absorbed through the skin into the bloodstream.

Gels and sprays

Oestrogen may also be available as a gel or spray applied to the skin.

Vaginal oestrogen

Low-dose vaginal oestrogen is specifically designed to treat symptoms affecting the vagina and urinary system, including vaginal dryness, irritation and discomfort during sex.

Because only a small amount is absorbed into the bloodstream, vaginal oestrogen is different from systemic HRT and has a different risk profile. It may be appropriate for women who cannot or do not wish to use systemic hormone therapy.

Other formulations

Other forms of hormone therapy exist internationally, including hormonal implants, injections and hormonal intrauterine systems. Availability varies considerably between countries and healthcare settings.

In Zambia, women should discuss locally available and appropriately regulated options with a qualified healthcare professional rather than assuming that a particular formulation or brand is available.

Systemic versus local treatment

One important distinction is between **systemic** and **local** hormone therapy.

Systemic HRT delivers hormones into the bloodstream and can treat symptoms throughout the body, particularly hot flushes and night sweats.

Local vaginal oestrogen delivers a very low dose directly to vaginal tissues and is primarily used for genitourinary symptoms such as vaginal dryness, irritation and discomfort.

The choice between these approaches depends largely on which symptoms a woman is experiencing.

Is HRT safe?

HRT is neither universally "safe" nor universally "dangerous." Its benefits and risks vary between individuals and depend on factors such as age, timing of treatment, the type of hormones used, route of administration, dose, duration of treatment and personal medical history.

For many healthy women who are younger than 60 or within 10 years of menopause onset and who have bothersome symptoms, the balance of benefits and risks is generally favourable when HRT is appropriately prescribed.

Some forms of systemic HRT are associated with increased risks of blood clots, stroke and, depending on the regimen and duration, breast cancer. The level of risk differs according to the type and route of treatment and the woman's individual risk factors.

This is why HRT should be individualised rather than approached as a one-size-fits-all treatment.

Who may not be suitable for HRT?

Some medical conditions mean that systemic HRT may not be appropriate, or that specialist assessment is needed before treatment is considered. These can include certain hormone-sensitive cancers, unexplained vaginal bleeding, previous blood clots, stroke or significant cardiovascular disease.

Having a particular risk factor does not necessarily mean that a woman has no treatment options. A healthcare professional can assess the individual circumstances and discuss appropriate alternatives.

HRT and vaginal or sexual symptoms

Menopause can cause changes in vaginal and urinary tissues because of declining oestrogen levels. These changes can contribute to:

- Vaginal dryness
- Burning or irritation
- Pain or discomfort during sex
- Urinary symptoms
- Recurrent urinary tract infections

Low-dose vaginal oestrogen can be an effective treatment for these symptoms and is different from systemic HRT. Very little of the hormone is absorbed into the bloodstream.

Women experiencing sexual or vaginal symptoms should feel comfortable discussing them with a healthcare professional. These symptoms are common, treatable health concerns and do not simply have to be accepted as an inevitable part of ageing.

What about women who cannot or do not want to use HRT?

HRT is only one option for managing menopause symptoms. Depending on the symptoms, alternatives can include psychological approaches such as cognitive behavioural therapy, as well as certain non-hormonal medicines and lifestyle approaches.

The best approach is one that considers the woman's symptoms, health, preferences, circumstances and access to care.

HRT in Zambia

Access to menopause care and hormone therapy can vary across Zambia. The availability of specific medicines and formulations may differ between healthcare facilities and pharmacies, and availability should not be assumed based on information from other countries.

The Menopause Society of Zambia aims to support women by providing reliable, evidence-based information and encouraging informed conversations between women and qualified healthcare professionals.

Remember

There is no single "best" HRT for every woman. Treatment should be individualised, reviewed regularly and based on an informed discussion of potential benefits, risks and alternatives.

If you are experiencing menopause symptoms and would like to explore HRT, speak with a qualified healthcare professional who can assess your individual circumstances and discuss the options available to you in Zambia.

This information is intended for education and does not replace individual medical advice, diagnosis or treatment.

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