## HORMONE THERAPY DOES NOT SHORTEN LIVES

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A recent study in the Journal of the American Medical Association has helped to decrease women's concerns about the long-term consequences of hormone therapy. Women at menopause can be reassured that by taking hormone therapy to improve their quality of life, they will not increase their risk of dying prematurely.

Hormones used to be touted as the "fountain of youth" and be prescribed to all menopausal women to prevent a range of age-related diseases. However, in 2002, the Women's Health Initiative research findings sounded an alarm regarding the possible negative effects of hormones. In the Women's Health Initiative, over 27 000 women were randomly assigned to either take estrogen and progesterone (in women with a uterus), estrogen alone (in women without a uterus) or placebo. The women took the hormones for five to seven years, then had to stop because of unexpected findings of increased risk of heart attack, stroke and breast cancer. This resulted in most women in North America also abruptly stopping their hormones for fear of a bad outcome, but suffering greatly with intense hot flashes and poor sleep, thereafter. The women from the Women's Health Initiative study were then monitored for a total of 18 years, in the longest running follow up research on hormone therapy to date.

The newest analysis of information from the original study period itself plus the decade and a half after looks at the link between hormone therapy and death. Death is an important measure to look at, because it summarizes the net effect of these medications on women's health.

Overall, the study revealed that there is no increased risk of death from taking menopausal hormone pills. The study looked at death from all-causes, as well as from heart disease and cancer specifically. No matter the cause, the hormone therapy users and the non-users had similar death rates. In total, 7,489 women died during the study; 27.1% of the hormone therapy users and 27.6% of the the placebo group. The vast majority of deaths occurred in the years after women stopped taking hormones.

This analysis also showed a statistically significant decrease in death from all causes in younger women (ages 50 to 59 years old) while they are taking hormone therapy.

For some women with certain health conditions, hormone therapy may still have more risk than benefit, and so having a detailed discussion with a doctor is advised to figure out what is best for each individual woman. However, overall, these results support our current guidelines that promote the use of hormone therapy in otherwise healthy women, under the age of 60, for the treatment of bothersome menopausal symptoms.