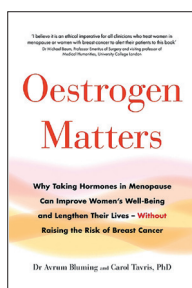


Oestrogen Matters: Why Taking Hormones in Menopause Can Improve Women's Well-Being and Lengthen Their Lives — Without Raising the Risk of Breast Cancer

Avrum Bluming and Carol Tavris

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DOES OESTROGEN REALLY MATTER IN POSTMENOPAUSAL WOMEN? IT CERTAINLY DOES

For many decades, millions of women across the world took hormone replacement therapy (HRT) knowing that it was giving them numerous benefits to their lives. However, since the Women's Health Initiative (WHI) study was published in 2002,¹ HRT has caused significant concern and worry among women and also healthcare professionals. Many women are still being denied HRT by their doctors, which often results in them suffering with numerous symptoms for years, and which can have a very negative effect on the quality of their lives. In addition, the reduction in oestrogen that occurs during the perimenopause and menopause can increase a woman's future risk of common conditions such as cardiovascular disease, diabetes, osteoporosis, and osteoarthritis.

This new book, *Oestrogen Matters*, has been written by Dr Avrum Bluming, a former senior investigator for the National Cancer Institute in the US. The co-author is Dr Carol Tavris, who is a social psychologist.

This book was written to enlighten its readers with detailed information about the history regarding the WHI study and also presents in detail numerous studies supporting the use of HRT. Neither of the authors has a personal vested interest in HRT and their passion to impart evidence-based information is very evident throughout this book.

The contents of this book echo research

that has been presented over recent years at numerous menopause conferences, including the International Menopause Society and British Menopause Society conferences. The National Institute for Health and Care Excellence guidelines for the diagnosis and management of the menopause were published in 2015 and much of the evidence discussed in this book has been used as a basis for these guidelines.

There is overwhelming evidence that taking HRT reduces future risk of osteoporosis² and there is a relative risk reduction of cardiovascular disease of 50% in women who start taking HRT within 10 years of their menopause.³ Women taking HRT have been shown to have a lower mortality from all causes including cancer.⁴ The average age of women in the WHI study was 63 years and many of these women were obese and had established cardiovascular disease. Understandably this is one of the main reasons that it is impossible to relate the evidence from this study to most of our patients who are younger and do not have cardiovascular disease. In addition, the results from the WHI study show that the perceived increased risk of breast cancer is unlikely to be significant. For those women in this study who took combined HRT, the increased risk of breast cancer with HRT is a similar magnitude associated with the increased risk of drinking a couple of glasses of wine a night or being overweight.

For me the most sobering part of the book is reading that Dr Bluming's wife had breast cancer and she still decided to take HRT. There has been some evidence to support that taking HRT does not increase future incidence or recurrence of breast cancer in women who have had breast cancer in the past. However, I personally feel more work needs to be done in this area before I will be routinely giving HRT to women who have a past history of breast cancer.

As a menopause specialist, I speak to hundreds of women without a history of breast cancer who have been denied HRT by their doctors because of the perceived risks, without even having any discussions with them about the numerous benefits that taking HRT can potentially give to them.

This book serves to educate and empower women and also healthcare professionals about the beneficial effects of oestrogen. The evidence is presented in a clear way

and there are very thought-provoking discussions throughout.

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Competing interests

Louise Newson has had financial relationships (lecturer, writer, member of advisory boards, attendance at meetings, and/or consultant) with Pfizer, Meda, Mylan, Besins, Replens, Regelle, Sylk, MonaLisa Touch, and La Roche-Posay. These companies have had no control of the content of any lectures, articles, or other work she has done for them.

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<https://www.eventbrite.co.uk/e/breast-cancer-event-at-the-royal-society-on-31-october-2018-tickets-50532156039>

Further reading

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