



PRIMARY CARE  
WOMEN'S HEALTH FORUM

THIS RESOURCE IS INTENDED FOR UK HEALTHCARE PROFESSIONALS ONLY

# HRT myths uncovered

*This resource has been produced on behalf of the PCWHF. Remember that this is guidance and to please use your clinical judgement on a case-by-case basis.*

Reviewed by Dr Silvia Moens-Lecumberri: June 2023.  
Next review date: June 2026



Many of the things said about Hormone Replacement Therapy (HRT) have not been true. This is what the science really says.

**MYTH**

**HRT causes breast cancer**

**FACT**

HRT with oestrogen alone is associated with little or no change in the risk of breast cancer. Combined HRT can be associated with a small increased risk however this is related to treatment duration & reduces once HRT is stopped.<sup>1</sup> Low-dose vaginal oestrogens do not increase the risk of breast cancer in women without a prior history of breast cancer.

**MYTH**

**HRT has a vascular risk**

**FACT**

HRT does not increase the risk of heart attacks if started before age 60. HRT tablets can increase the risk of stroke though generally the effect is very small. This is avoided by using patches and gels.<sup>1</sup>

**MYTH**

**HRT causes blood clots**

**FACT**

There is no increased risk of blood clots from HRT patches or gels. HRT tablets can cause a small increased risk.

**MYTH**

**HRT is dangerous**

**FACT**

HRT can help relieve menopausal symptoms, protect the bones<sup>1</sup> and heart<sup>2</sup>. This is especially important if periods stop very early. In most women the benefits of HRT outweigh the risks.

**MYTH**

**HRT causes weight gain**

**FACT**

There is no evidence that HRT causes weight gain. Women generally have a tendency to gain weight in the middle years, and a healthy diet and exercise are important.

**MYTH**

**If you need HRT you are beyond getting pregnant**

**FACT**

HRT is not a contraceptive and women should continue to use contraception until the age of 55.<sup>1</sup>

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## MYTH

**HRT only delays the inevitable**

## FACT

HRT effectively manages the symptoms of the menopause and lower doses of HRT continue to work when women are older.<sup>1</sup>

## MYTH

**HRT carries the same risks as the pill**

## FACT

They contain similar hormones but those in HRT are less potent and in lower doses, and may be delivered in different ways so the effects are not the same.<sup>1</sup>

## MYTH

**Natural methods to treat menopausal symptoms are safer than HRT**

## FACT

Just because it is natural, doesn't mean it is safe – the studies haven't been done.<sup>1</sup>

## MYTH

**Women stop having sex after the menopause**

## FACT

Some do, but don't need to. Local oestrogen treatments reverse the vaginal changes and restore comfort.<sup>1</sup>

## MYTH

**Women need examinations to make sure they can take or need HRT**

## FACT

This usually isn't necessary but a woman's blood pressure needs checking.<sup>1</sup>

## MYTH

**You can only have HRT for 5 years, whatever age you are**

## FACT

HRT may be taken for as long as necessary at the lowest effective dose. This is particularly important for younger women, who should not stop before 50 years of age.<sup>3</sup>

## REFERENCES

1. NICE Guidelines [NG23] 2015 2. Cochrane et al, Hormone therapy for preventing cardiovascular disease in post-menopausal women (2015), Cochrane Database of Systematic Reviews 3. [menopausematters.co.uk/benefit.php](http://menopausematters.co.uk/benefit.php)

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This guidance was correct at the time of going to print. The PCWHF will undertake annual reviews of this guidance to ensure it remains in line with Best Practice. Reviewed by Dr Silvia Moens-Lecumberri: June 2023. The next review is due in June 2026. The guidance is for use by healthcare professionals only. For further information, please contact: [enquiries@pcwhf.co.uk](mailto:enquiries@pcwhf.co.uk). Funded and supported by Meda Pharmaceuticals. Developed by Primary Care Women's Health Forum (PCWHF). Please note Meda has had no involvement in the content of this graphic, but reviewed for factual accuracy.