

## HRT & Breast Cancer

### What are the risks and is it safe if you have a family History of Breast cancer or have had breast cancer yourself?

For most women, the benefits from taking HRT outweigh any risks as it helps symptoms, protects from osteoporosis, diabetes, raised cholesterol, heart disease and vascular dementia.

#### The risks of HRT depend on:

- The type of HRT prescribed.
- Age and when you started with perimenopausal symptoms or had your menopause.
- Lifestyle choices such as smoking, alcohol intake, the amount of exercise you do and the diet you eat.
- Many women worry about breast cancer when taking HRT, but most types of HRT do not actually increase the risk of breast cancer. Some studies have shown that women taking combined HRT containing both Oestrogen and a progestogen (which is a synthetic progesterone) may be associated with a very small increased risk of breast cancer if taken over 3-5 years.

The increased risk is related to the type of progestogen in the HRT and not the Oestrogen. Taking micronised progesterone (the body identical progesterone) "UTROGESTON" has not been shown to be associated with an increased risk of breast cancer.

- Even for women taking synthetic progestogen, the risk is very low and is actually less than the increased risk of breast cancer associated with drinking a couple of glasses of wine each night, or from being overweight.
- No studies have shown that any type of HRT increases the risk of a woman's death from breast cancer.
- If you have had a hysterectomy in the past, and are just taking Oestrogen without a progestogen, you actually have a lower risk of breast cancer than if you did not take HRT at all.
- There is also no increased risk of breast cancer in women who take any type of HRT when they are under the age of 51 years as this is the natural age of the menopause anyway so in theory, you would have had natural exposure to oestrogen up to this age had you not had your menopause sooner.
- If you take Oestrogen in tablet form, you have a small increased risk of venothrombotic disease such as Deep vein thrombosis. Anyone with a BMI near or over 30 will be encouraged to use transdermal HRT.

### Should I take HRT if I have a family history of breast cancer?

- Sadly, in this country, 1 in 7 women will develop breast cancer in their lifetime so most of us have a family member affected or know of someone who has had breast cancer.
- It is estimated that only about 10% of the breast cancers that are diagnosed every year have a genetic or familial cause and these are often due to the BRCA 1 and BRCA 2 genes. If your mother or sister has had breast cancer your background risk is doubled.
- Women with a family history of breast cancer should discuss it with their doctor if they are considering HRT. Remember that 1 in 7 women taking HRT will get breast cancer – not because of the HRT, but because they would have developed it anyway.
- There is no strong evidence that having a family history of breast cancer puts you at any higher risk of getting breast cancer if you take HRT, compared to women who do not have a family history of breast cancer.
- There is some evidence that women with a family history of breast cancer who take certain types of HRT actually have a lower future risk of developing breast cancer compared to women not taking HRT.

Women carrying the BRCA gene, can still usually take HRT safely if they have had prophylactic oophorectomy (ovaries removed). As there are many health benefits of taking HRT, women can usually take HRT for ever, so do not have to stop taking it at a certain age or after a specific length of time.

### Can I take HRT if I have had breast cancer?

Many doctors and oncologists will say no but there needs to be a detailed discussion about the pros and cons associated with HRT should you feel like your perimenopausal, and menopausal symptoms are so bad that you'd like to try it. Alternative non hormonal treatments should be fully explored in all women prior to any discussion about HRT though.

Women with ER positive breast cancers need to be aware that there is very little evidence regarding safety and risks associate with HRT to date but generally, non-hormonal therapies would be advised to help manage their symptoms in the first instance.

Aromatase inhibitors such as Arimidex can certainly exacerbate perimenopausal and menopausal symptoms, tamoxifen less so.

### Some final advice to remember

Breast cancer is common.

- Lifestyle measures such as keeping a healthy weight, not smoking and not drinking alcohol to excess reduce the risk of developing breast cancer.
- Examine your breasts at the same time every month so you know what normal' feels like for you. Attend mammograms when invited to.
- HRT does not increase the risk of breast cancer for the majority of women.
- HRT can be taken safely if you have a family history of breast cancer or carry the BRAC gene.
- If you have had breast cancer, you can still have HRT if the benefits outweigh the risks for you.



# Understanding the risks of breast cancer



A comparison of lifestyle risk factors versus Hormone Replacement Therapy (HRT) treatment.

**Difference in breast cancer incidence per 1,000 women aged 50-59.**

Approximate number of women developing breast cancer over the next five years.

NICE Guideline, Menopause: Diagnosis and management November 2015

**23 cases of breast cancer diagnosed in the UK general population**



**An additional four cases in women on combined hormone replacement therapy (HRT)**



**Four fewer cases in women on oestrogen only Hormone Replacement Therapy (HRT)**



**An additional four cases in women on combined hormonal contraceptives (the pill)**



**An additional five cases in women who drink 2 or more units of alcohol per day**



**Three additional cases in women who are current smokers**



**An additional 24 cases in women who are overweight or obese (BMI equal or greater than 30)**



**Seven fewer cases in women who take at least 2½ hours moderate exercise per week**



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