



Patient information service St Michael's Hospital Gynaecology

Alternatives to HRT



In most people, hormone replacement therapy (HRT) is an effective treatment for menopausal symptoms with the benefits often being greater than the side effects. However, if you prefer not to take hormonal treatment, have symptoms which have not responded to HRT, or have been advised by your doctor to avoid use (for conditions such as, hormone sensitive cancers, a recent blood clot, unstable epilepsy or lupus or porphyria), this leaflet provides information on lifestyle, herbal and non-hormonal treatment options that you may wish to consider.

Complementary therapies can take several weeks to be effective and need daily use for the benefits to be felt. Some can be as effective as HRT but you may need to trial a few to find the right combination that suits your particular symptoms.

What is menopause?

This is when your ovaries stop making oestrogen and your periods become irregular and stop. The average age in the UK is 51. The perimenopause is the time when your symptoms start until your periods stop. Most people will have mild symptoms and can manage with lifestyle measures alone. One third of people can have more severe symptoms and would like either HRT or more natural options.

Symptoms can include:

- hot flushes (day or night). This occurs in 80% of people and usually lasts up to 5 years
- low mood, anxiety and/or reduced confidence
- difficulty getting to sleep or disturbed sleep
- joint and muscle aches
- vaginal dryness and/or increased urine infections
- headache
- loss of interest in sex (libido)
- palpitations (an awareness of your heart pounding)
- dry/itchy skin and thinning of hair.

Lifestyle options

There are several relatively simple lifestyle measures that you can take to help improve your symptoms.

- Avoiding smoking and alcohol can reduce flushes, heart disease and improve bone strength. Help with reducing alcohol or smoking is available via you GP or practice nurse.
- Wearing light cotton clothing in layers and avoiding caffeine /spicy foods can help manage flushes.
- Gel packs can reduce flush severity at night.

Exercise

- Weight bearing exercise such as brisk walking, running and dancing can improve bone strength.
- Regular sustained exercise such as running and swimming can improve mood, sleep, sex drive and reduce heart disease. High-intensity exercise can make flushes worse.
- Yoga, pilates and Tai Chi may help with joint aches, the emotional symptoms of the menopause, reduce how severe your flushes are and improve mental function and energy.

Nutrition, supplements and herbal remedies

Good nutrition can help reduce weight gain, menopausal symptoms and heart disease. This can include eating fruit and vegetables, more white meat and oily fish, increasing fibre and reducing salt intake and sugar. A low fat, plant-based diet has been reported to improve menopausal symptoms as effectively as HRT with one study quoting an 88% reduction in hot flushes and improved cognition and fatigue.

There are many different over the counter options which may help with menopausal symptoms. Herbal remedies are not licensed like medicines that your doctor would prescribe which means the same product can contain different ingredients and strengths if you buy them from different places.

Some remedies can interact with other medicines you may use for conditions like asthma, epilepsy, heart disease or breast cancer. If you take other medicines, check with your health professional first before using herbal remedies.

The following section lists supplements and remedies you may want to try. There are many on the market but we have included ones that have an evidence base for helping menopausal symptoms.

We suggest trying one at a time for 8 to 12 weeks and then stop using if you see no benefit. These options are self-funded, they are not currently on prescription, with cost varying between £15 to £25 for a month's treatment.

The following are suitable for most people including those who have had previous cancer.

Vitamin D and calcium

These can help keep bones strong. It is reduced in the months when there is little sunlight and in people who take medication to reduce seizures. Vitamin D (800 to 1000 units) can be taken as a tablet or by eating oily fish, eggs and margarine. The recommended amount of calcium is 700mg a day (1 pint of milk); sources of calcium include yogurt, cheese, nuts and green vegetables.

You can look at whether you have enough in your diet through an the Royal Osteoporosis Society's online Calcium

Calculator here: https://theros.org.uk/informationand-support/bone-health/nutrition-for-bones/ calcium/).



Omega 3

This is an essential fatty acid which means it can only be found in the food you eat or supplements. It has been shown to help with joint pain (by reducing inflammation), improve bone strength and, if taken with vitamin E, the frequency of hot flushes (see below).

Omega 3 can be found in oily fish (tuna, salmon, sardines, mackerel), walnuts, chia seeds, spinach, eggs and soybeans. Dieticians recommend 1g per day from diet or supplements.

Omega 3 may interact with Tamoxifen so we would advise avoiding use if you are taking this.

There is a vegan version of omega 3.

Magnesium glycinate/threonate

Magnesium plays a vital role in health throughout life. During menopause, it is important for keeping bones strong and preventing osteoporosis (60% of magnesium is stored in your bones). It may also reduce unwanted side effects of menopause, such as difficulty sleeping and low mood whilst supporting heart health. 80% of menopausal people have low magnesium levels. Magnesium can be found in many foods, such as dark chocolate, beans, lentils, nuts, seeds, leafy greens, and whole grains or taken as supplements (we recommend up to 350 milligrams per day).

It can however make flushes worse if supplements are taken with alcohol.

Glycinate helps sleep and threonate helps anxiety.

Turmeric (Pomi-T)

The Pomi-T supplement is a vegan capsule that contains 150mg whole pomegranate fruit powder (Punica granatum), 30mg ground green tea leaf (Camellia sinensis), 150mg whole ground turmeric and 150mg whole ground broccoli florets.

This supplement can help with mood, joint aches and hot flushes with 80% of people reporting an improvement in symptoms when they take 2 capsules per day.

Side effects include mild indigestion (5%) and it can interact with blood thinners, blood pressure medications and antianticonvulsants so please speak to your doctor before starting.

Vitamin E

This is a fat-soluble vitamin that acts as an antioxidant, protecting cells from the damage of free radicals. It improves immune function and prevents clots from forming.

Supplements (15 mg or 22 IU) can be taken or foods such as plant-based oils (wheat germ or sunflower), hazelnuts and almonds, sunflower seeds, vegetables (like spinach or broccoli) and kiwi or mango fruit.

Vitamin E can reduce how severe and how often hot flushes occur and if used in the vagina it can improve dryness (a pierced vitamin E gel capsule can be inserted directly into the vagina or the gel squeezed onto the finger before applying to the vulva).

Vitamin E may interact with Tamoxifen so we would advise avoiding use if you are taking this.

Collagen

Collagen is essential for your bones, gut, skin, nails and hair, but you make much less of it during the menopause. 30% of dermal collagen is lost within first five years of the menopause, and it continues to reduce by around 2% each year after that.

Adding more collagen to your diet could help with a range of menopause symptoms, from aching joints to dull skin or brittle nails. 2.5 to 15g of daily collagen is safe and effective.

Sage

If it works for you, after 8 weeks of taking 300mg once a day, it can reduce how severe your flushes are by up to 40%. Sage has anti-inflammatory and anti-oxidant effects, improving memory and cognition.

Sage is not recommended if you have epilepsy.

Pollen extract (Femal)

Pollen extract can help with hot flushes and difficulty sleeping. Femal is a product that removes the allergenic shell so that it can be used in people with hayfever, reducing the risk of allergic reactions. It can take 2 months for the effects to be felt and needs to be taken every day (one capsule).

Dong quai and ginkgo biloba

Current research disagrees on whether these remedies help with memory and mental function.

These should not be used with blood thinners.

Milk thistle

Milk thistle or 'Silybum marianum' can help reduce the frequency and intensity of hot flushes. One study showed that hot flushes decreased from 4 to 1 a day when compared with placebo.

The following are NOT suitable for people who have had a previous cancer.

Isoflavones

These are natural ingredients (plant compounds) in your diet that mimic oestrogen and can help reduce menopausal symptoms such as hot flushes and low mood by 20 to 30%.

Dietary sources include soya products, seeds, beans, pulses, brown rice, and cereals such as oats, barley and rye, hops, fruits and vegetables (such as broccoli, tomatoes, celery, sage and garlic).

There is no current recommended dose or upper limit, but the evidence suggests that higher doses do not necessarily help symptoms more.

If you are unable to alter your diet, supplements can be considered. A twice a day dose is more effective than once daily; we would recommend red clover (80mg per day) or soya extract (25mg per day). If there is no improvement after 8 to 12 weeks, then stop.

Black cohosh

There is little data to support whether this is beneficial but some studies have shown it can reduce how often flushes happen and improve mood.

The maximum safe dose is 80mg a day. Higher doses can lead to liver damage.

It can interact with aspirin, blood pressure tablets and

tamoxifen. Side effects can include constipation, weight gain, tummy cramps and irregular bleeding. In some parts of the body, it can increase the effects of oestrogen and therefore, in people with hormone-sensitive conditions such as breast cancer, it is not recommended.

Agnus castus

This may improve mood swings but interacts with HRT and oral contraceptives. There is also little evidence to support its safety when taking Tamoxifen so we would advise avoiding use in this case.

St John's wort

This reduces mild anxiety and can improve flushes and mood. If it works for you there will be a 50% improvement in how often and how severe your flushes are after taking a tablet every day for 8 weeks. It is unclear how much to use.

It can interact with other medications such as tamoxifen or medications to prevent seizures.

Evening primrose and star flower oil

They can be helpful for breast tenderness and in some people may help mood swings and joint pain.

You need to take 240mg a day for two months to feel the best effects and then the dose can be reduced. They can interact with other medicines such as those for blood thinning, blood pressure, depression, asthma and seizures.

There is unclear evidence as to whether they increase oestrogen levels so we would advise avoiding use if you cannot take oestrogen.

Gingseng

Studies have shown that gingseng can relieve menopausal symptoms such as fatigue, sleeping difficulties, depression and anxiety.

Ginseng can stop tamoxifen working properly and it mimics oestrogen effects on different body systems leading to conflicting evidence about whether gingseng is safe if you have a condition which responds to oestrogen; the current advice is to avoid use if you cannot take oestrogen.

Other remedies

The following have little evidence to guide whether they help menopausal symptoms. We do not know if they are safe to take for people who have oestrogen sensitive conditions.

- Ashwaganda may help anxiety, insomnia.
- Maca may improve sexual desire.
- Lion's Mane (Mushrooms) may help relieve mild symptoms of anxiety and depression, most of these studies are in mice.

Complementary therapies

These are options which aim to treat you as a whole person rather than looking to treat one symptom.

Although research looking at the benefits of homeopathy, aromatherapy or reflexology for menopause symptoms is small, you may find that after seeing a licensed therapist you discover a treatment which suits you.

Acupuncture

After 6 weeks of a once-a-week treatment, 80% of people report improvements in moderate to severe hot flushes, sleep quality and mood. Acupuncture has also been shown to relieve muscle and joint pains caused by breast cancer treatments. It is important to find a practitioner who specialises in menopause acupuncture (see resources).

Psychological treatments

Cognitive Behavioural Therapy (CBT)

This is a non-medical method that is used for many health problems. There is good evidence, especially in people with a previous cancer, that it reduces by up to 50%, how severe and how often flushes happen. It can also help improve sleep and mood changes caused by the menopause.

CBT helps you to find new ways to cope with your symptoms such as breathing exercises, recognising and avoiding triggers and good sleep habits. It can be completed online or as a group over 4 to 6 weeks, with most people still feeling the benefits six months after finishing the course.

Mindfulness

There is not enough evidence to prove if mindfulness helps with menopausal symptoms but it can reduce stress, anxiety and increase wellbeing which, in turn, improves mood. Stress can make flushes worse and increase the risk of heart disease.

Most people have busy home and work lives so it is important to try and make time for yourself (and ask for family to help support you with this).

Insomnia

Insomnia is a term used to describe difficulties getting to sleep and waking up multiple times during the night (that is not related to flushes). There are many causes, but menopause in itself can affect sleep quality. Although HRT can be beneficial, many people find that the below measures are more effective.

CBTi

This is cognitive behavioural therapy aimed at tackling insomnia. It helps you identify and replace thoughts and behaviours that cause or worsen sleep problems.

Apps and online support for sleep

Apps such as Sleepio are more effective than sleeping tablets and do not have side effects. There is also plenty of free online resources, for example 'Steps to a good night's sleep' provided by the University of Exeter.

Magnesium

Magnesium glycinate has been shown to improve sleeping difficulties. See section on page 6.

Melatonin

This is a hormone that your brain makes at nighttime and helps with the timing of sleep. Melatonin levels reduce at menopausal age and can be one of the factors affecting sleep.

Supplements may help people get to sleep, which improves mood and fatigue. It does not improve hot flushes.

Melatonin is normally taken as a tablet, 2mg, 1 to 2 hours before bed. As it makes you sleepy it should not be taken with alcohol.

It can interact with medications such as antidepressants, blood thinners (warfarin) and some pain killers. It should be avoided in people who have autoimmune disorders as it can increase inflammation.

Vaginal dryness treatments

Without oestrogen, vaginal and vulval tissues can become dry and thin causing itch, pain with sex and sometimes bleeding. There are different options for people who can and cannot use vaginal oestrogens.

Vulval skin care

When the vulval skin is dry it can become more sensitive. Using a good moisturiser and removing irritants such as pads, certain washing conditioners and soaps can reduce soreness.

Moisturisers and lubricants

Organic brands such as Yes! and Sylk are made from plants (nonhormonal). Unlike other products they help to maintain the natural environment of the vagina, reducing mild to moderate dryness. They can be bought online or in a pharmacy.

Moisturisers are inserted into the vagina with an applicator and can be used every day to start with and then twice weekly. For people who have had a cancer diagnosis they are free on prescription in Bristol, North Somerset and South Gloucester. Coconut oil can also be used. Massaging a small amount onto the vulva can help improve moisture and reduce dryness. Coconut oil can break down latex, which means it cannot be used with condom.

For people taking aromatase inhibitors (AI) as part of their cancer treatment, we would advise starting these as soon as possible; more than 80% of people develop vaginal dryness and soreness with an AI and the moisturisers can reduce this developing.

Vitamin E

This is a fat-soluble vitamin that acts as an antioxidant, protecting cells from the damage of free radicals. To improve dryness, a suppository can be used in the vagina and a pierced vitamin E gel capsule can be squeezed onto the finger and then rubbed onto the vulva.

Hyaluronic acid

This vaginal gel is hormone free and releases water molecules into the tissues, improving dryness without causing irritation. It can be used with moisturisers or on it's own. Studies have shown it can have similar benefits to vaginal oestrogens. Aim to use 3 to 5 times per week.

Vaginal oestrogen

This can be a tablet, cream or pessary and used alone or with prescribed HRT. As most of the oestrogen works in the vagina

and very little goes into the body it does not increase the risk of blood clots or breast/womb cancer (if you have no prior history). Most people start to feel an improvement by two weeks. A vaginal ring is also an option and this can be changed every 3 months. If you have had an oestrogen sensitive cancer your specialist will discuss whether this is an option for you.

Ospemifene (SERM) is a non-hormonal tablet which can be taken every day for vaginal dryness and pain. This is a good option if you have problems inserting vaginal tablets, have allergic reactions to pessaries/creams or for people who have finished breast cancer treatment. Symptoms improve in 50% by 3 months and 80% by 12 months. It can also reduce bone thinning (osteoporosis) in the spine. Side effects include discharge, hot flushes (7%), headache and a small increase in the risk of blood clots.

Vaginal laser, vaginal testosterone and DHEA (prasterone) are still undergoing safety testing in people with hormone sensitive cancers. Studies have shown no difference in improving dryness and soreness, when compared to moisturisers.

Prescribed medicines

For people with thinning bones (osteoporosis)

HRT is the treatment of choice in people under the age of 60 for osteoporosis. For people who cannot, or prefer not to take HRT, and need prescribed medicines to improve thinning bones, there are other options.

 Bisphosphonates slows the breakdown of bone making them stronger and reducing the risk of future fractures by 50%. They keep working for months after the medication is stopped (unlike HRT) and help both spine and hip bones. Possible side effects can include heartburn, swallowing problems, diarrhoea, joint pains and rarely, small fractures of your leg bones (2% (2:100) risk) if on bisphosphates for more than 6 years. They are mostly given as a once-a-week tablet but can also be given as an injection every 3 months. They are usually taken for 3 to 5 years and, just like HRT, it can take 1-2 years before an improvement is seen on a bone scan. They are as effective as HRT.

Raloxifene (SERM) can make bones stronger and reduce the risk of a fracture by 30-50%. It is taken as a daily tablet for 3-5 years and works better on the back than the hip. The side effects include a small increase in hot flushes, a small chance of a blood clot and some irregular bleeding but other benefits include a decrease in the risk of breast cancer.

For menopausal symptoms

These options can take 2 to 3 weeks to start working and the best benefits are felt by 3 months of use.

 SSRIs and SNRIs – These are traditionally used as a type of antidepressant but they have been found, in a lower dose, to reduce hot flushes by 50 to 70%. Some can improve mood and energy. They are usually offered if HRT is not recommended or the side effects have stopped you using it. There are many choices and if one does not suit you, there are other options. Initial side effects (first few weeks) can include headaches, sleep problems, feeling sick, a dry mouth and constipation. Some can reduce sex drive and interact with tamoxifen. They are taken as a tablet once to twice a day.

- Gabapentin/Pregabalin Normally used for nerve pain, migraines and to control seizures. They reduce hot flushes by 50 to 60% and can help with joint pains and sleep. Possible initial side effects are dry mouth, tiredness, weight gain and dizziness. It is taken as a tablet 2 to 3 times a day, usually starting at a low dose and then slowly increasing to reduce side effects.
- Clonidine is used to treat blood pressure and migraines but can reduce flushes by 40%. It is taken twice a day and increased every two weeks to reduce side effects which can include dry mouth, tiredness and sleep problems.
- Oxybutynin is a medication traditionally used for overactive bladder symptoms but a study has shown a 75% reduction in hot flushes. It does not interact with tamoxifen. Most people see a benefit within a week with full effect by 4 weeks. Oxybutynin can be taken as a tablet or a patch. Side effects are common and include dry eyes, dry mouth and constipation. We would recommend trying a patch initially (applied twice weekly) and after 4 weeks if there is no improvement then try the tablet.

Key points for people who have had a hormone sensitive cancer

An early menopause with symptoms due to lack of oestrogen are common side effects of breast or gynaecological cancer treatments. If you are having endocrine treatment (aromatase inhibitor or tamoxifen), symptoms can continue throughout the time the tablets are taken but for many people the symptoms improve with time.

If your cancer responded to oestrogen, we would advise looking at non-hormonal options first to reduce the risk of cancer coming back. Below is a summary of the treatment options from this leaflet that would be safe to try and that you can discuss with your specialist.

- 1. Lifestyle measures such as exercise, yoga and weight loss can improve flushes, mood and joint pain caused by cancer treatments.
- 2. CBT and/or acupuncture can improve mood, sleep and flushes. Macmillan funding grants can be applied for through your cancer nurse contacts for these options.
- 3. Herbal supplements such as magnesium, Pomi-T and Femal can reduce flushes and improve sleep.
- 4. Vitamin E with Omega 3 can be used in people not taking tamoxifen.
- 5. Vitamin D and calcium can improve bone strength. Levels are reduced if you are taking aromatase inhibitors so we would advise supplements.

- 6. If you have vaginal dryness and/or painful sex we would recommend vaginal moisturisers and lubricants (brands such as Yes!), hyaluronic acid and vulval vitamin E.
- 7. You can be reviewed in a menopause cancer clinic to discuss the following:
 - Different non-hormonal medications targeted to your symptoms
 - They may discuss changing your endocrine treatments (aromatase inhibitor / tamoxifen) to improve symptoms
 - HRT, including vaginal oestrogen, may be considered on specialist review of the type of cancer and treatments you are using; if the measures above have not helped and your symptoms are affecting your daily function.

Resources and contacts

Menopause matters

Menopause matters is an award winning, independent website providing up-to-date, accurate information about the menopause, menopausal symptoms and treatment options.

www.menopausematters.co.uk

Womens Health Concern

Women's Health Concern (WHC), is the patient arm of the British Menopause Society (BMS) since 2012. WHC provides a confidential, independent service to advise, inform and reassure women about their gynaecological, sexual and post reproductive health.

https://www.womens-health-concern.org/

We recommend looking at the WHC factsheets.

Royal Osteoporosis Society

www.theros.org.uk

British Acupuncture Council

The British Acupuncture Council (BAcC) – the UK's largest, member-led, professional body for traditional acupuncturists.

www.acupuncture.org.uk









British Reflexology Association

The British Reflexology Association was founded in 1985 to act as a representative body for persons practising the method of Reflexology. The Association also aims to help promote the practice of Reflexology in Great Britain and abroad.

www.britreflex.co.uk

National Institute of Medical Herbalist

The National Institute of Medical Herbalists is the UK's leading professional body of herbal practitioners.

www.nimh.org.uk

Society of Homeopaths

www.homeopathy-soh.org

British Association of Dermatology Patient Leaflet 'Vulval Skin Care' (May 2023 Edition)

https://badmainstage.wpengine.com/wp-content/ uploads/2021/11/Vulval-skincare-PIL-May-2023.pdf

BOOK: 'Managing hot flushes and Night Sweats – A cognitive behavioural self-help guide to the menopause' by Myra Hunter and Melanie Smith

BOOK: 'The complete guide to the Menopause: Your toolkit to take control and achieve life-long health' by Annice Mukherjee

leading







Notes

As well as providing clinical care, our Trust has an important role in research. This allows us to discover new and improved ways of treating patients.

While under our care, you may be invited to take part in research. To find out more please visit: www.uhbw.nhs.uk

Help us prevent the spread of infection in hospital. Please make sure your hands are clean. Wash and dry them thoroughly/use the gel provided. If you have been unwell in the last 48 hours please consider whether your visit is essential.

Smoking is the primary cause of preventable illness and premature death. For support in stopping smoking contact **NHS Smokefree** on **0300 123 1044**.

Drinkline is the national alcohol helpline. If you're worried about your own or someone else's drinking, you can call this free helpline in complete confidence. Drinkline on 0300 123 1110.

For access all patient leaflets and information please go to the following address: http://foi.avon.nhs.uk/

Bristol switchboard: 0117 923 0000

Weston switchboard: 01934 636 363 www.uhbw.nhs.uk



For an interpreter or signer please contact the telephone number on your appointment letter.





For this leaflet in large print or PDF format, please email patientleaflets@uhbw.nhs.uk.

