

## Menopausal Hormone Therapy for the Primary Prevention of Chronic Conditions

The U.S. Preventive Services Task Force (Task Force) has issued **final** recommendations on *Menopausal Hormone Therapy for the Primary Prevention of Chronic Conditions*.

These recommendations are for women who have already gone through menopause and are thinking about hormone therapy as a way to prevent chronic conditions (illnesses that last a long time). **The recommendations don't apply to women who are interested in hormone therapy to manage the symptoms of menopause, such as hot flashes.** They also don't apply to women younger than age

50 who have had a hysterectomy (surgery to remove the uterus) that resulted in menopause.

The Task Force reviewed recent research studies on the use of hormone therapy to prevent chronic conditions. These recommendations summarize what the Task Force learned: The harms of hormone therapy, when used to prevent chronic conditions, outweigh the benefits.

This fact sheet explains these recommendations and what they might mean for you.

What is menopausal hormone therapy?

The use of the female hormones estrogen and progestin to treat symptoms of menopause and various medical conditions. These medications can be given during or after menopause.

### Hormone Therapy to Prevent Chronic Conditions

Many women take the hormones estrogen and progestin for a short period of time as they go through menopause to help reduce troublesome symptoms, such as hot flashes and vaginal dryness. Women who have had a hysterectomy and are going through menopause take estrogen by itself.

Today, many women live for 30 years or more after they go through menopause. As they get older, their risk of common chronic conditions increases. These chronic conditions include heart disease, breast cancer, fractures, and dementia (problems with thinking and memory). There is much interest and research in finding ways to prevent these chronic conditions.

Some research initially suggested that continuing hormone pills for the long term, after menopausal symptoms have ended, might reduce the risk of some important common chronic conditions. However, more recent and larger studies, including a very large study of many thousands of women, found that this is not true for most of these chronic conditions. In fact, using hormone therapy to prevent chronic conditions can increase the risk of some of these conditions.

## Potential Benefits and Harms

The Task Force found that taking both estrogen and progestin after menopause reduces the risk of fractures. However, the Task Force found that this type of hormone therapy also has important potential harms. It can increase the risk of breast cancer, stroke, blood clots, and gallbladder disease. It also can increase the risk of dementia and urinary incontinence.

The Task Force found that taking estrogen alone after menopause (a choice that is only safe for women who have had a hysterectomy) reduces the risk of fractures. It also appears to reduce the risk of breast cancer. However, the Task Force found that this type of hormone therapy also has important potential harms. It can increase the risk of stroke, blood clots, gallbladder disease, and urinary incontinence.

### Combined Hormone Therapy with Estrogen and Progestin

For every 10,000 women who use combined therapy each year, these events can occur as a result

Benefits	No change in risk	Harms
<b>46</b> avoid a fracture	Heart disease	<b>8</b> develop breast cancer <b>9</b> have a stroke <b>9</b> develop a serious blood clot in their lungs <b>12</b> develop a serious blood clot in their legs <b>20</b> develop gallbladder disease <b>22</b> develop dementia <b>872</b> develop urinary incontinence

### Hormone Therapy with Estrogen Alone

For every 10,000 women who use estrogen therapy each year, these events may occur as a result

Benefits	No change in risk	Harms
<b>56</b> avoid a fracture <b>8</b> avoid developing and <b>2</b> avoid dying from breast cancer	Heart disease	<b>11</b> have a stroke <b>7</b> develop a serious blood clot in their legs <b>33</b> develop gallbladder disease <b>1,271</b> develop urinary incontinence

## The Final Recommendations on Hormone Therapy to Prevent Chronic Conditions: What Do They Mean?

Here are the Task Force's final recommendations on the use of hormone therapy to prevent chronic conditions. The recommendations have letter grades. The grades are based on the quality and strength of the evidence about the potential benefits and harms of hormone use for this purpose. They are also based on the size of the potential benefits and harms. Task Force evidence grades are explained in the box at the end of this fact sheet.

When the Task Force recommends against using medications for a particular purpose (Grade D), it is because the medications have more potential harms than potential benefits. The Notes next to the recommendation help to explain key ideas.

Visit the [Task Force Web site](#) to read the [full recommendation statement](#) on the use of hormone therapy to prevent chronic conditions. The statement explains the evidence the Task Force reviewed and how it decided on the grades. An [evidence report](#) on this topic provides more detail about the studies the Task Force considered.

- 1 The Task Force recommends against the *use of combined estrogen and progestin* for the *prevention of chronic conditions* in *postmenopausal women*. **Grade D**
- 2 The Task Force recommends against the *use of estrogen* for the prevention of chronic conditions in postmenopausal women who have had a *hysterectomy*. **Grade D**

## Notes

- 1 *use of combined...*  
Hormone therapy used in women who have a uterus  
*prevention of chronic...*  
Use of hormone therapy to reduce risk of heart disease, fractures, dementia, breast cancer; does not include prevention of menopause symptoms  
*postmenopausal women*  
Women who have already been through menopause
- 2 *use of estrogen*  
Hormone therapy used in women who have had a hysterectomy  
*hysterectomy*  
An operation to remove the uterus (womb)

## Should You Use Hormone Therapy to Prevent Chronic Conditions?

Getting the best health care means making smart decisions about what screening tests, counseling services, and preventive medicines to get and when to get them. Many people don't get the tests or counseling they need. Others get tests or counseling they don't need or that may be harmful to them.

Task Force recommendations can help you learn about screening tests, counseling services, and preventive medicines. These services can keep you healthy and prevent disease. The Task Force recommendations do not cover diagnosis (tests to find out why you are sick) or treatment of disease. Task Force recommendations also apply to some groups of people, but not others. For example, this recommendation does not apply to women who are interested in hormone therapy to manage the symptoms of menopause. They also don't apply to women younger than age 50 who have had a hysterectomy that resulted in menopause.

### Making a decision about using hormone therapy to prevent chronic conditions

Think about your own health and lifestyle. Consider your personal beliefs and preferences for health care. Talk with a health care professional about whether the use of hormone therapy to prevent chronic conditions is right for you. And consider scientific recommendations, like this one from the Task Force.



## What is the U.S. Preventive Services Task Force?

The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed. Recommendations only address services offered in the primary care setting or services referred by a primary care clinician.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the **final recommendation statement**. To learn more, visit the [Task Force Web site](#).

### USPSTF Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

## Click Here to Learn More About Menopause and Hormone Therapy



**Postmenopausal Hormone Therapy: Information for the Public**  
(National Heart, Lung, and Blood Institute)



**Hormone Replacement Therapy**  
(healthfinder.gov)