

# Menopause and hormonal treatment - is it really necessary?

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**The menopause strikes most middle-aged women and some of them will develop symptoms that can be alleviated by hormonal treatment. But is it the best treatment and what does it mean to the brittleness of the bones? And what about the risk of cancer? In this article, Dr. Christine Felding illustrates how everything is connected.**

The menopause, which means the time of the last period, is also called the climacteric and it usually occurs in women aged 45 to 55.

During the 17<sup>th</sup> century the menopause was known as "the French disease". It was thought that it was impossible for women to release the toxins in the body because they did not have their period, and that these toxins would then accumulate in the body and create various symptoms. The treatment back then was different baths, enemas and phlebotomies aided by a great sense of piety!

Research into the various climacteric symptoms really started this century, mainly because there are more elderly women now, that is to say women who live on past the menopause and consequently need help. Around the turn of the century, the average life span for women was approx. 50 years whereas today it is approximately 80 years.

## Symptoms of menopause

In connection with the menopause, the ovaries cease the production of oestrogen, which is one of the female sex hormones. This affects the tissue and the functions of the body in several ways. Approximately 75% of

women in the climacteric experience symptoms or discomfort of some sort.

The most typical symptoms are hot flushes, restlessness, dysuria and insomnia. These discomforts are caused by the lack of hormones. A number of psychological symptoms such as irritability and mood swings are hardly caused by the lack of hormones but more likely by the physical discomfort.

## Osteoporosis

In normal bones there is a fine balance between the breakdown and the regeneration, but if you suffer from osteoporosis, also called the female scourge, the balance is destroyed. This means that the breakdown is more rapid than the regeneration, which results in fragile bones that are more easily broken.

Some women are at a higher risk of developing osteoporosis. This is particularly true for women with a family history of osteoporosis, who have a fragile build or women who drink and smoke heavily. Women who reach the menopause at an early age due to the removal of their ovaries or to longterm illness with bed rest and no exercise are also more likely to suffer from osteoporosis. The adrenal cortex hormonal treatment for asthma also increases the risk of osteoporosis.

## Coronary diseases

This category covers various blood clots in the heart and brain as well as hypertension, but it does not cover



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blood clots in other parts of the body such as the legs or lungs.

Younger women are very well protected against coronary diseases because of their oestrogen production. It is documented that when women reach the climacteric, the frequency of coronary diseases increases considerably and the figures rapidly become equal to those for males. Women who reach the climacteric at an early age develop coronary diseases more rapidly than the ones who go on having their periods.

One of the reasons for this fact is that the amount of cholesterol in the bloodstream increases enormously prior to the climacteric.

## Who needs hormonal treatment?

Some people would argue that women who experience discomfort in connection with the climacteric should be offered some kind of hormonal treatment.

The hormones come in various forms such as tablets, plasters, gel or suppositories. There are approximately 30 different preparations, which either contain just one of the female sex hor-





mones oestrogen or both sex hormones oestrogen and progesterone. Progesterone is a hormone produced by the ovaries after ovulation in younger women.

In short, it could be said that one hormone – oestrogen – is sufficient for women who have had their uterus removed; women who have an intact uterus need both hormones. This is because there is an increased risk of developing cancer in the uterus if oestrogen is taken alone.

### **The hormonal treatment**

The advantages of hormonal treatment are:

- Elimination of hot flushes and sweats.
- Stability in the mucous membrane in the vagina.
- Relief from dysuria.
- Prevention of osteoporosis.
- Acts preventively against coronary diseases.
- Prevention of Alzheimer's disease.
- Prevention of cancer in the colon.
- Finally, it improves the quality of life!

If you choose to be treated with hormones, you should see a doctor regularly. The first consultation should be scheduled after 3 month's treatment and if you follow a regular schedule, a tumour - benign or malignant – will be discovered at an earlier stage.

### **Women and cancer**

The most typical forms of cancer experienced by women are mammary cancer, uterine cervix cancer and cancer in the colon.

The only two forms of cancer which can be connected to the hormonal treatment are mammary cancer and cancer in the uterus (should not be confused with uterine cervix cancer, which is not connected to the hormonal treatment).

Cancer in the uterus cavity can be caused by years of treatment with oestrogen without any progesterone supplement. One of the symptoms of cancer

in the uterus cavity is a reduced or a more powerful menstruation.

Many women are cured by the removal of the uterus, fallopian tubes and ovaries. All women have a 10% risk of being diagnosed with mammary cancer, but for women who have been treated with hormones for more than 10 years the risk is increased slightly to approx. 12%. If mammary cancer occurs during hormonal treatment, the tumour is usually less malignant and usually discovered at an earlier stage because one is more likely to be seeing a doctor.

Both forms of cancer can develop without any kind of hormonal treatment; even men can suffer from mammary cancer.

### **Treatment/prevention of osteoporosis**

Oestrogen has a hindering effect on the

breakdown of the bones and is a good and affordable treatment. There are, however, other preparations on the market. One relatively new and promising treatment is the use of bisphosphonates, which hinder the cells in causing the breakdown of the bones. This treatment is, however, more expensive than hormonal treatment, must be taken while fasting, and some people experience side effects such as nausea. The bisphosphonates can also be given to men. At the moment bisphosphonates are only registered as a treatment of osteoporosis and not as a prevention.

Calcium and vitamin D in tablet form is also used as a prevention of osteoporosis. The recommended dosage of calcium is 1500 milligrams for women who have passed the climacteric.

## **IHI Service Survey**

**A questionnaire sent out to thousands of our policyholders proved to be a wonderful success – we received a great response concerning the Company's service level.**

During the period from October 1997 through to May 1998 we sent out a questionnaire to thousands of the

company's policyholders – and to our joy and surprise a large number took the time to fill out the questionnaire and return it to us. The questionnaire contained some very specific questions regarding the policyholders' experience with the company's service in connection with emergency situations, but it also gave them an opportunity to come up with suggestions for

### **"Inquiry concerning IHI's service":**

#### **The amount of time necessary to handle a claim**

One of the questions the policyholders were asked to answer in our recent inquiry concerned the amount of time used for claims processing. This is the length of time from IHI's receipt of a claim to when the policyholder receives his/her reimbursement. 44% of the policyholders were very satisfied. 36% were satisfied, while 14% were either less satisfied or dissatisfied. Along with this question the policyholders were also asked how much time should pass before the client receives the reimbursement. The answer to this question varied from one week to three months. It is required of the service officers in IHI that they process the claims as quickly as possible. Unfortunately, you have to allow for the time of dispatch to IHI and the return to the client due to the great distances.