

Need to balance benefits and risks of long-term hormone therapy in postmenopausal women

Clinical Question	What are the effects of long-term (at least one year's duration) hormone therapy (HT) on mortality, cardiovascular outcomes, cancer, gallbladder disease, fracture and cognition in perimenopausal and postmenopausal women during and after cessation of treatment?
Bottom Line	In relatively healthy postmenopausal women, using combined continuous HT for one year increased the risk of a heart attack from about two per 1000 to between three and seven per 1000, and increased the risk of venous thrombosis from about two per 1000 to between four and 11 per 1000. With longer use, HT also increased the risk of stroke, breast cancer, gallbladder disease and death from lung cancer. Oestrogen-only HT increased the risk of venous thrombosis after one to two years' use: from two per 1000, to two to 10 per 1000. With longer use, it also increased the risk of stroke and gallbladder disease, but it reduced the risk of breast cancer (after seven years' use) from 25 per 1000 to between 15 and 25 per 1000. Among women over 65 years of age taking continuous combined HT, the incidence of dementia was increased. Risk of fracture was the only outcome for which results showed strong evidence of clinical benefit from HT (both types).
Caveat	The main limitation in the quality of evidence was that only about 30% of women were 50 to 59 years old at baseline, which is the age at which women are most likely to consider HT for vasomotor symptoms. Data were insufficient for the assessment of the risk of long-term HT in perimenopausal women or postmenopausal women younger than 50 years old.
Context	HT is widely provided for control of menopausal symptoms and has been used for the management and prevention of cardiovascular disease, osteoporosis and dementia in older women.
Cochrane Systematic Review	Marjoribanks J et al. Long-term hormone therapy for perimenopausal and postmenopausal women. Cochrane Reviews, 2017, Issue 1. Art. No.: CD004143.DOI: 10.1002/14651858. CD004143.pub5. This review contains 22 studies involving 43,637 participants.
