Introduction
The menopause occurs when hormones (estrogen and progestogen) are no longer produced by the ovaries. Lack of estrogen or progestogen may cause symptoms such as hot flushes, night sweats, difficulty sleeping, vaginal dryness, lack of sex drive, poor memory or mood swings. It also increases the risk of thinning of the bones (osteoarthritis) in the longer term.

The average age of the menopause happens in the early 50s. Approximately 1% of women have a menopause before the age of 40, this is often referred to as premature ovarian insufficiency (POI), or premature menopause. There are a number of different causes of having a menopause before the age of 40 and these can result in either never having ovarian hormones (due to the ovaries not being present or not working as expected), or ovarian function stopping early.

Hormone Replacement Therapy (HRT)
Why should I take HRT?
HRT involves replacing estrogen that would have been produced by the ovaries. In women who still have a uterus (womb), progestogen is needed in addition to estrogen to protect the lining of the uterus.

What are the benefits of taking HRT?
HRT is often recommended for both helping with symptoms and bone protection and usually should be continued until the early 50s (the average age of the menopause). Some young women do not have any symptoms, but they are often still recommended to take HRT for its beneficial effects on the bones.

What are the risks of taking HRT?
Many concerns about risks of HRT (e.g. breast cancer risk) should not apply to most young women taking HRT since they are replacing hormones which would usually be produced anyway at this stage.
How do I take HRT?

Estrogen can be taken as a tablet, a patch or a gel. Women who require progestogen as well as estrogen, can take a ‘combined’ HRT (containing both hormones) as a pill or a patch, or take the hormones separately. Progestogen can be taken as a pill or a progestogen hormone intrauterine contraceptive (hormone coil).

Combined HRT for young women is usually given as a ‘cyclical’ preparation which should give regular monthly withdrawal bleeds. You can opt to try a continuous HRT which should not result in any bleeding, but this often results in irregular bleeding in younger women and therefore a cyclical preparation would be better.

Your doctor will discuss what the best options for HRT for you are.

Women who experience vaginal dryness or pain during sex may be advised to use vaginal estrogen in the form of a vaginal tablet or cream in addition to their HRT.

Does HRT work as contraception?

HRT does not work as contraception. If you have POI, the chance of conceiving naturally is significantly reduced. However, depending on the cause, there may be a small chance (up to 5%) of spontaneous pregnancy and therefore if you don’t want to be pregnant, you should consider using contraception.

Some young women may prefer to take the combined contraceptive pill in order to control menopause symptoms and provide contraception. However, this is not such a good form of HRT in terms of long term effects on bone and slightly increasing the chances of problems such as a clot in the veins (DVT). Your doctor may discuss using a contraceptive pill which contains hormones that are more similar to those used in HRT (e.g. Qlaira).

A good option for women requiring HRT and contraception can be to use the hormone coil in addition to estrogen only HRT (as a pill, patch or gel).

Does HRT help with psychological symptoms?

There can be a number of reasons why young women who require HRT may experience psychological symptoms such as low mood or anxiety. HRT may sometimes help with these when they are caused by a lack of estrogen. However, for many women psychological symptoms can be due to a number of factors including coming to terms with an unexpected diagnosis or change in expected fertility. Therefore, if you are struggling, it is important to speak to your doctor for support and advice regarding useful local services. The daisy network (see below) is an online network that some young women find helpful.

Useful resources:

www.daisynetwork.org.uk
www.menopausematters.co.uk