



# Hormone Replacement Therapy (HRT)

January 2025

## About this information

This information leaflet is available for you if you wish to know more about using HRT as a young person. Your healthcare team is there to support you in making decisions that are right for you. They can help by discussing your situation with you and answering your questions.

## Key points

- You may need HRT if puberty is delayed, you have no ovaries or that your ovaries are not working as expected
- Oestrogen is a hormone needed for breast development, growth of the uterus (womb), general body growth and bone health
- If you have a uterus, progestogens are a type of hormone needed in addition to oestrogen to protect the womb lining and to regulate periods
- HRT is not a contraceptive
- There are a number of ways these hormones can be given

## **What is Hormone Replacement Therapy (HRT) and why might I need to take it?**

HRT involves replacing hormones that would have been produced by the ovaries as a teenager and young adult.

There are a number of reasons why young women may require HRT. This may be because puberty is delayed, the ovaries are not present, or that the ovaries are not working as expected (often referred to as primary ovarian insufficiency (POI) or premature menopause). Your healthcare team should explain to you the reason why you need HRT.

## **What are the benefits of taking HRT?**

Oestrogen may be given to allow the expected changes of puberty to occur (such as breast development). Oestrogen is a hormone needed for growth as well as heart, blood vessel and bone health. If you have a uterus, oestrogen helps it grow and will in time make the womb lining thicken. Once it has thickened, it is important that it sheds regularly as a period. For this to happen, you will also need to start taking a hormone called progestogen.

If periods have already occurred when you start HRT, and you have a uterus, you will have both oestrogen and progestogen from the start.

HRT is often recommended until your early 50s (the average age of the menopause). HRT may also help with the symptoms that can be caused by lack of oestrogen and progestogen. This might include hot flushes, night sweats, difficulty sleeping, vaginal dryness, lack of sex drive, poor memory or mood swings.

Some young women do not have any symptoms of low hormones, but HRT may still be recommended. It might be given for breast and womb development and/or for its long-term benefits effects on the health of your bones, heart and blood vessels. Taking HRT may and reduce the risk of osteoporosis (thinning of the bones) and fractures.

## **What are the risks of taking HRT?**

For most patients, the benefits of taking HRT will outweigh any risks. For patients over the age of 50 there is a very small increased risk of breast cancer associated with using HRT. Some types of HRT have a higher risk than others. Before the age of 50 the risks would be the same as someone who is having periods naturally. Your healthcare professional will be able to discuss this with you.

Some types of HRT can increase the risk of blood clots in the legs and lungs (VTE). The risks in younger people using HRT are less clear. Transdermal (via the skin) HRT is unlikely to increase this risk and might be suggested in some cases.

## **How do I take HRT to start puberty or if puberty is not completed?**

When HRT is given to start puberty, the aim of this treatment is to copy the expected changes that happen in puberty. This means starting on a low dose and building up gradually to mimic the pattern of hormone release seen in puberty. The dose of oestrogen is increased by small amounts every 6-12 months. The timing of the changes will depend on how your body responds to the oestrogen. If oestrogen is started when puberty has already begun (or completed) then oestrogen may start at a higher dose as your body will already be used to some of these hormones.

Oestrogen can be taken as a tablet, a patch a gel or spray. For some patients the use of a HRT tablet may not be recommended and your healthcare team will talk to you about the alternatives. If you choose an oestrogen patch, a useful practical guide on how to use this HRT can be found in the further information section below.

If you have a womb, progestogen is often started once you have had a bleed or if you have been on oestrogen treatment for at least 2 years. Progestogen can also be taken as part of a patch, as a pill or a progestogen hormone intrauterine system (IUS, the is sometimes called a “coil”).

## **How do I take HRT once puberty is complete?**

If you have a uterus, you have completed puberty and periods have started (either naturally or started by HRT) you will need to have HRT that contains both oestrogen and progestogen.

Women who require progestogen as well as oestrogen, can take a ‘combined HRT’ (containing both hormones) as a pill or a patch, or take the hormones separately.

Combined HRT for young women is often given as a ‘cyclical’ or ‘sequential’ 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 can result in irregular bleeding in some women.

If you take oestrogen and progestogen separately, the oestrogen is usually in a patch or a gel that is applied into the skin of thighs (away from breasts). The progestogen can be a pill or in a hormone intra-uterine system (IUS) called a Mirena.

Women who experience vaginal dryness or pain during sex may also be advised to use vaginal oestrogen in the form of a vaginal tablet, a cream, an oily gel or a small ring that sits in the vagina in addition to their HRT.

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

## Does HRT work as contraception?

HRT does not work as contraception. HRT will not stop you getting pregnant. If you have POI, the chance of conceiving naturally is significantly reduced. However, in some cases, there may be a small chance of becoming pregnant. If you don't want to be pregnant, you should consider using other methods of contraception.

If you don't have ovaries then you will not be able to get pregnant naturally and you do not need contraception.

Some young women may prefer to take the combined contraceptive pill in order to provide hormone replacement and contraception together. It is not currently known whether there is benefit of using HRT rather than the combined contraceptive pill. HRT may be more beneficial in improving bone and heart health to the combined oral contraceptive pill, but more evidence is needed.

The combined contraceptive pill may not be suitable for those at a higher risk of blood clots as it slightly increases 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®/ Zoely®). For some women requiring HRT and contraception, a good option can be to use the hormone IUS in addition to oestrogen 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 oestrogen. 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. Your hospital team may be able to refer you to a psychologist within the team. The Daisy network (see below) is an online network that some young women find helpful.

## Further information

[www.daisynetwork.org](http://www.daisynetwork.org) – A charity and resource for women with POI

[www.menopausematters.co.uk](http://www.menopausematters.co.uk) – Information about the menopause, menopausal symptoms and treatment options

<https://patient.info/womens-health/menopause/premature-ovarian-insufficiency>

<https://www.bsped.org.uk/media/1870/evorel-patches-web-version.pdf> - Patient information Leaflet for Evorel (oestrogen) Patches

## **Sources and acknowledgements**

This information has been produced by the BritSPAG Executive Committee.

The information is evidence-based (at the time of production) and a full reference list is held by the BritSPAG Executive Committee.