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The Menopause Society™
Leading the Conversation

Is Hormone Therapy Good for Heart Health?

New study based on Women's Health Initiative data suggests estrogen-based hormone therapy has favorable long-term effect on all cardiovascular biomarkers except triglycerides

CLEVELAND, Ohio (Sept 10, 2024)–Recent studies show that women can experience bothersome menopause symptoms, like hot flashes, for longer than originally estimated. As a result, more research is focusing on the long-term effects of hormone therapy. A new study suggests certain estrogen-based hormone therapies have favorable long-term effects on the risk of heart disease. Results of the study will be presented at the 2024 Annual Meeting of The Menopause Society in Chicago September 10-14.

Hormone therapy has been the subject of intense debate for more than 20 years since the results of the Women's Health Initiative (WHI) became public. Despite the fact that hormone therapy has proven to be the most effective treatment for managing some of the more common symptoms of menopause, such as hot flashes, some still have concerns about potential health risks, especially after extended use.

A new study based on data from the WHI suggests that, with regard to heart health, extended use of certain hormone therapies might actually be beneficial. The study specifically evaluated women who were taking conjugated equine estrogens (CEE) alone—the most commonly prescribed oral estrogen treatment—and CEE plus medroxyprogesterone acetate (MPA).

Both CEE-alone and CEE plus MPA were shown to have a favorable influence on all cardiovascular biomarkers, except for triglycerides. In particular, relative to placebo, HDL-C (sometimes referred to as good cholesterol) increased by 13% and 7% for participants randomized to CEE-alone and CEE plus MPA, respectively. The reduction of LDL-C (sometimes referred to as bad cholesterol) was around 11% for both types of therapy. Insulin resistance (HOMA-IR) decreased by 14% and 8% for CEE-alone and CEE plus MPA, respectively. Lipoprotein(a), sometimes referred to as the heart's quiet killer, decreased by 15% and 20% for CEE-alone and CEE plus MPA, respectively.

"Although we see a few more favorable effects with CEE, both therapies performed well in relation to their impact on biomarkers except for triglycerides," says Dr. Matthew Nudy, lead author from Penn State Hershey Medical Center. "Future research should assess whether other progestogen formulations may be less likely to attenuate estrogen's long-term effect on cholesterol."

More detailed results will be discussed at the 2024 Annual Meeting of The Menopause Society as part of the presentation entitled "The Long-Term Effect of Hormone Therapy on Cardiovascular Biomarkers in the Women's Health Initiative."

"For many years women and healthcare professionals shied away from hormone therapy for fear of the potential adverse health effects, says Dr. Stephanie Faubion, medical director for The Menopause Society. "Studies like this are valuable to help women feel more confident about their decision to use hormone therapy for managing their bothersome menopause symptoms, especially hot flashes."

Drs. Nudy and Faubion are available for interviews in advance of the Annual Meeting.

For more information about menopause and healthy aging, visit the newly redesigned www.menopause.org.

The Menopause Society (formerly The North American Menopause Society) is dedicated to empowering healthcare professionals and providing them with the tools and resources to improve the health of women during the menopause transition and beyond. As the leading authority on menopause since 1989, the nonprofit, multidisciplinary organization serves as the independent, evidence-based resource for healthcare professionals, researchers, the media, and the public and leads the conversation about improving women's health and healthcare experiences. To learn more, visit menopause.org.