

**Table 2 Oestrogen-only HRT versus no HRT: effect on specific health outcomes**

–	Baseline risk	How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?	Does the way oestrogen-only HRT is taken affect these risks?	Does the type of hormone taken affect these risks?
<b>All-cause mortality (life expectancy)</b>	–	Overall, life expectancy is unlikely to change with the use of oestrogen-only HRT. [2024]	–	–

–	<b>Baseline risk</b>	<b>How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?</b>	<b>Does the way oestrogen-only HRT is taken affect these risks?</b>	<b>Does the type of hormone taken affect these risks?</b>
<p><b>Cancer: breast (Information in this table applies to people with no personal history of breast cancer)</b></p>	<p>Breast cancer risk varies depending on a person's modifiable and non-modifiable risk factors. <b>[2024]</b></p>	<p>There is very little or no increase in breast cancer risk with oestrogen-only HRT.</p> <p>There is little or no increase in the risk of breast cancer mortality with oestrogen-only HRT.</p> <p>Use the <a href="#">discussion aid on HRT for the number of breast cancer cases per 1,000 people taking oestrogen-only HRT over a 5- or 10-year period.</a> <b>[2024]</b></p>	<p>–</p>	<p>Breast cancer risk is similar with oestradiol and with conjugated equine oestrogen. <b>[2024]</b></p>

–	<b>Baseline risk</b>	<b>How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?</b>	<b>Does the way oestrogen-only HRT is taken affect these risks?</b>	<b>Does the type of hormone taken affect these risks?</b>
<b>Cancer: endometrial (Information in this table applies to people with no personal history of endometrial cancer)</b>	–	<p>In people with a uterus, endometrial cancer risk increases with oestrogen-only HRT (use the <a href="#">discussion aid on HRT for the number of endometrial cancer cases per 1,000 people taking oestrogen-only HRT over a 5-year period</a>). [2024]</p> <p>See also <a href="#">recommendation 1.8.1 on which type of HRT to offer depending on whether people have a uterus or not in the section on starting HRT</a>. [2024]</p>	<p>In people with a uterus, endometrial cancer risk increases with both oral and transdermal oestrogen-only HRT. [2024]</p>	–

–	<b>Baseline risk</b>	<b>How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?</b>	<b>Does the way oestrogen-only HRT is taken affect these risks?</b>	<b>Does the type of hormone taken affect these risks?</b>
<b>Cancer: ovarian (Information in this table applies to people with no personal history of ovarian cancer)</b>	The baseline population risk of ovarian cancer in women aged under 60 is very low. (Use the <a href="#">discussion aid on HRT for the number of ovarian cancer cases per 1,000 people over a 5-year period</a> ). [2024]	In people with ovaries, ovarian cancer risk increases very slightly after 5 years of using oestrogen-only HRT and this risk increases with duration of use (use the <a href="#">discussion aid on HRT for the number of ovarian cancer cases per 1,000 people over a 5-year and a 10-year period</a> ). [2024]	Ovarian cancer risk increases with both transdermal and oral oestrogen-only HRT. [2024]	–
<b>Coronary heart disease (Information in this table applies to people with no personal history of coronary heart disease)</b>	–	Coronary heart disease risk does not increase with oestrogen-only HRT (use the <a href="#">discussion aid on HRT for the number of coronary heart disease cases per 1,000 people over a 5-year period</a> ). [2024]  Mortality from cardiovascular disease does not increase with oestrogen-only HRT. [2024]	–	–

–	<b>Baseline risk</b>	<b>How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?</b>	<b>Does the way oestrogen-only HRT is taken affect these risks?</b>	<b>Does the type of hormone taken affect these risks?</b>
<b>Dementia</b>	–	Dementia risk is unlikely to increase with oestrogen-only HRT (see the <a href="#">discussion aid on HRT for the number of dementia cases per 1,000 people over a 5-year period</a> ). <b>[2024]</b>	–	–
<b>Muscle mass and strength</b>	–	There is limited evidence suggesting that HRT may improve muscle mass and strength. <b>[2015]</b>	–	–
<b>Osteoporosis</b>	<p>The baseline population risk of fragility fracture:</p> <ul style="list-style-type: none"> <li>is low in the UK for women, trans men and non-binary people registered female at birth who are around the age of menopause <b>and</b></li> <li>varies from one person to another.</li> </ul> <p>(Use the <a href="#">discussion aid on HRT for the incidence</a></p>	<p>Fragility fracture risk is decreased while taking HRT and this benefit:</p> <ul style="list-style-type: none"> <li>is maintained during treatment but decreases once treatment stops</li> <li>may continue for longer in people who take HRT for longer.</li> </ul> <p>(Use the <a href="#">discussion aid on HRT for the incidence of fragility fractures in women</a>.) <b>[2015]</b></p>	–	–

-	<b>Baseline risk</b>	<b>How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?</b>	<b>Does the way oestrogen-only HRT is taken affect these risks?</b>	<b>Does the type of hormone taken affect these risks?</b>
	<a href="#">of fragility fractures in women.</a> ) [2015]			

–	<b>Baseline risk</b>	<b>How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?</b>	<b>Does the way oestrogen-only HRT is taken affect these risks?</b>	<b>Does the type of hormone taken affect these risks?</b>
<b>Stroke (Information in this table applies to people with no personal history of stroke)</b>	The baseline population risk of stroke in women aged under 60 is very low. <b>[2024]</b>	–	<p>Stroke risk increases with oral oestrogen-only HRT and the increase:</p> <ul style="list-style-type: none"> <li>• rises with the dosage of oestrogen</li> <li>• is greater if HRT is started after the age of 60.</li> </ul> <p>(See the <a href="#">discussion aid on HRT, for the number of stroke cases per 1,000 people over a 5-year period.</a>) <b>[2024]</b></p> <p>Stroke risk is unlikely to increase with transdermal oestrogen-only HRT (see the <a href="#">discussion aid on HRT, for the number of stroke cases per 1,000 people over a 5-year period.</a>) <b>[2024]</b></p>	–
<b>Type 2 diabetes</b>	–	The risk of developing type 2 diabetes does not increase with HRT. <b>[2015]</b>	The risk is not affected whether HRT is taken orally or transdermally. <b>[2015]</b>	–

–	<b>Baseline risk</b>	<b>How does taking oestrogen-only hormone replacement therapy (HRT) impact the risks related to this outcome?</b>	<b>Does the way oestrogen-only HRT is taken affect these risks?</b>	<b>Does the type of hormone taken affect these risks?</b>
		Generally, no adverse effect on blood glucose control is reported when taking HRT. <b>[2015]</b>		
<b>Venous thromboembolism (VTE)</b>	–	VTE risk is not increased with transdermal HRT. <b>[2015]</b>	VTE risk is increased with oral HRT. <b>[2015]</b>  VTE risk is greater with oral than transdermal HRT. <b>[2015]</b>	–

Table 2 lists the differences in specific health outcomes between people who are taking or have taken oestrogen-only HRT, and those who have never had HRT.

The statements from 2015 in tables 1 and 2 do not distinguish between combined and oestrogen-only HRT. These statements have been included in both tables to better support discussions.

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