

New recommendations for managing menopausal symptoms in breast cancer survivors

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A large proportion of the world's estimated 9.3 million breast cancer survivors experience menopausal symptoms or clinical manifestations of estrogen deficiency. A comprehensive review published in the Endocrine Society's *Journal of Clinical Endocrinology & Metabolism* focuses on current and future approaches to management of menopausal symptoms after breast cancer.

Menopause is a normal part of a woman's aging process but pre-menopausal women treated with chemotherapy can also develop premature menopause, and consequently, severe <u>menopausal symptoms</u> including sleep disorders, vulvovaginal atrophy (VVA), vasomotor symptoms (VMS), mood changes, depressive symptoms, cardiovascular disease, osteopenia, and osteoporosis. Hormone therapy may help relieve a woman's menopausal symptoms but is not recommended for women who have had breast cancer.

"Following breast cancer, women should generally not be treated with <u>menopausal hormone therapy</u> but should instead focus on lifestyle modifications such as smoking cessation, weight loss, and regular physical activity," said the study's first author, Richard J. Santen, M.D., of the University of Virginia Health System in Charlottesville, Va. "Pharmacologic agents are also available to treat women with severe symptoms. The most important thing to remember is that therapy must be individualized based on each woman's needs and goals."

Santen and colleagues reviewed controlled clinical trials, observational studies, evidence-based guidelines, and expert opinion from professional societies to address the gap in treatment recommendations for management of menopausal symptoms after breast cancer.

The review's recommendations include:

- Smoking cessation, weight loss (if indicated), limiting or avoiding alcohol, maintaining adequate levels of vitamin D and calcium, eating a healthy diet, and <u>regular physical activity</u> are suggested for all women with prior breast cancer
- Non-pharmacologic therapies for VMS such as cognitive behavioral therapy, hypnosis, and acupuncture may be helpful as are vaginal lubricants and moisturizers
- Several emerging approaches such as selective estrogen receptor modulators (SERMs), Tissue selective estrogen complex (TSECs), estetrol, and neurokinin B inhibitors show promise as useful agents to expand options for symptom relief with less <u>breast cancer risk</u> but have not yet been tested to confirm safety in women with prior <u>breast cancer</u>

More information: Richard J Santen et al. Managing menopausal symptoms and associated clinical issues in breast cancer survivors, *The Journal of Clinical Endocrinology & Metabolism* (2017). DOI: 10.1210/jc.2017-01138

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