

# Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on hormone therapy for the primary prevention of chronic conditions in postmenopausal people. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from April 19, 2022, to May 16, 2022. The Task Force welcomes your comments.

## Hormone Therapy to Prevent Chronic Conditions in Postmenopausal People

The Task Force has issued a **draft recommendation statement** on *Hormone Therapy for the Primary Prevention of Chronic Conditions in Postmenopausal Persons*.

The Task Force recommends that people who have already gone through menopause not take hormone therapy, either estrogen alone or estrogen and progestin together, to prevent chronic health problems.

This draft recommendation applies to people who have already gone through menopause and are considering hormone therapy to prevent chronic health problems. It does not apply to people who are going through menopause and are considering hormone therapy to manage symptoms of menopause, such as hot flashes, night sweats, or vaginal dryness.

### Facts About Hormone Therapy to Prevent Chronic Conditions

As people get older, their risk for many chronic conditions such as heart disease, osteoporosis, cancer, and diabetes increases. Much of that increase is due to aging generally, but there is some question about how much the natural decline of female hormones that happens during menopause adds to that risk. Menopause, which typically occurs around age 50, is the time in a person's life after they stop menstruating, or having a period, for at least 12 months.

Hormone therapy, a medication that contains female hormones, is typically taken as a pill, but it can also be delivered through a patch on the skin or a cream or gel. There are two types of hormone therapy. The most common medication uses a combination of estrogen and progestin. The second type of medication uses just estrogen and is only for people who have had a hysterectomy, meaning that their uterus has been removed. Hormone therapy can be used to help manage symptoms of menopause, but this draft recommendation is about using it to prevent chronic health problems.

### Potential Benefits and Harms of Hormone Therapy to Prevent Chronic Conditions

The Task Force reviewed studies about the benefits and harms of taking hormone therapy after menopause to prevent chronic conditions. It found that while hormone therapy may reduce the risk of some conditions, it can also lead to serious harms, such as an increase in the risk of blood clots and stroke.

Based on this evidence, the Task Force determined that, for people who have gone through menopause, the potential harms of using hormone therapy to prevent chronic health problems cancel out any potential benefits. Fortunately, there are several other effective ways people can reduce their risk of chronic disease through preventive services like screening and counseling on healthy behaviors. Patients should talk to their healthcare professionals about how best to stay healthy as they age.



#### What is hormone therapy?

Hormone therapy refers to the use of medication that contains female hormones, which naturally become lower after menopause. It can contain either estrogen alone or a combination of estrogen and progestin.

# Hormone Therapy for the Prevention of Chronic Conditions

## The Draft Recommendation on Hormone Therapy to Prevent Chronic Conditions: What Does It Mean?

Here is the Task Force's draft recommendation on menopausal hormone therapy to prevent chronic conditions in people who have gone through menopause. It is based on the quality and strength of the evidence about the potential benefits and harms of preventive medication for this purpose. It also is based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force recommends against the use of a preventive medication (**Grade D**), it is because the potential harms cancel out the potential benefits.

Before you send comments to the Task Force, you may want to read the full [draft recommendation statement](#). The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the scientific studies the Task Force reviewed.

**1** The USPSTF recommends against the use of combined **estrogen** and **progestin** for the **primary prevention** of chronic conditions in **postmenopausal persons**.  
**(Grade D)**

**2** The USPSTF recommends against the use of estrogen alone for the primary prevention of chronic conditions in postmenopausal persons who have had a **hysterectomy**.  
**(Grade D)**

### Notes

**1 estrogen**  
One of the two main female sex hormones. It is responsible for the physical changes that come with puberty, including growth of breasts and start of menstrual cycles.

**progestin**  
A man-made version of progesterone, the other main female sex hormone that plays a role in the menstrual cycle and pregnancy.

**primary prevention**  
Preventing a health problem before it begins.

**postmenopausal persons**  
People who have already been through menopause.

**2 hysterectomy**  
A surgery to remove the uterus.

# Hormone Therapy for the Prevention of Chronic Conditions

## What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the **Task Force website**.

### Task Force Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

[Click Here to Learn More About Hormone Therapy](#)

-  **Menopausal Hormone Therapy and Cancer**  
(National Cancer Institute)
-  **Hormone Replacement Therapy**  
(MedlinePlus)
-  **Menopausal Hormone Therapy Information**  
(MedlinePlus)

 [Click Here to Comment on the Draft Recommendation](#)



The Task Force welcomes comments on this draft recommendation.



Comments must be received between April 19, 2022 and May 16, 2022.



All comments will be considered for use in writing final recommendations.