

The Silent Gap in Primary Care: Implications of Inadequate Follow-Up for HRT

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Introduction

- Hormone Replacement Therapy (HRT) is effective in managing menopausal symptoms and improving quality of life ⁽¹⁾
- NICE guidelines recommend annual follow-up to assess treatment efficacy, monitor adverse effects, and review risks. ⁽²⁾
- Adherence to follow-up protocols in primary care is often inconsistent or undocumented.

Objective

- Evaluate the extent to which **HRT patients in primary care** receive follow-up care aligned with **NICE guidelines**
- Assess the:
 - Frequency** of follow-up reviews
 - Quality** of monitoring provided
 - Adherence** to recommended practices, including:
 - Monitoring for adverse effects
 - Reviewing treatment efficacy
 - Reassessing individualised risks
- Explore the **impact of insufficient follow-up** on:
 - Development of complications (e.g., cardiovascular, oncological risks)
 - Persistence or worsening of menopausal symptoms
 - Overall **quality of life**
- Inform strategies to:
 - Improve **primary care HRT follow-up**
 - Optimise **HRT management**
 - Enhance **patient safety** and **satisfaction**

Methods

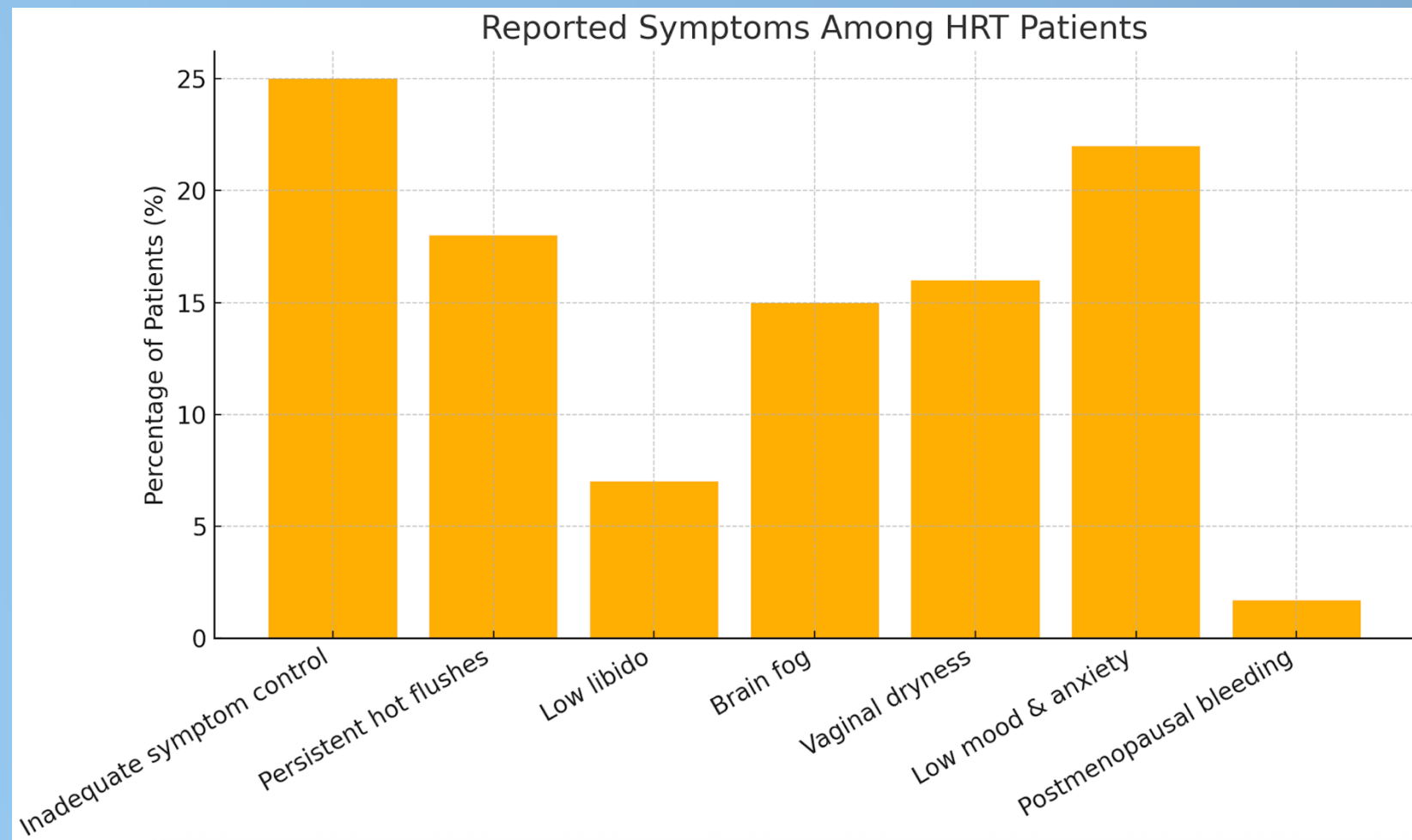
- patients initiated on HRT over a year ago were identified using electronic patient records,
- invited to complete a questionnaire assessing current symptoms, red flag signs, and any treatment-related concerns.

Results

DEMOGRAPHICS

- Data was collected for 144 patients
- Mean age of the patients is 56 years
- Mean time on HRT was 5.75 ± 4.3 years

First Cycle Results



Secondary Effects of Inadequate Follow-Up

- 1.7% reported postmenopausal bleeding, a red flag symptom requiring urgent assessment.
- 2% were using HRT incorrectly, reflecting poor patient education and lack of monitoring

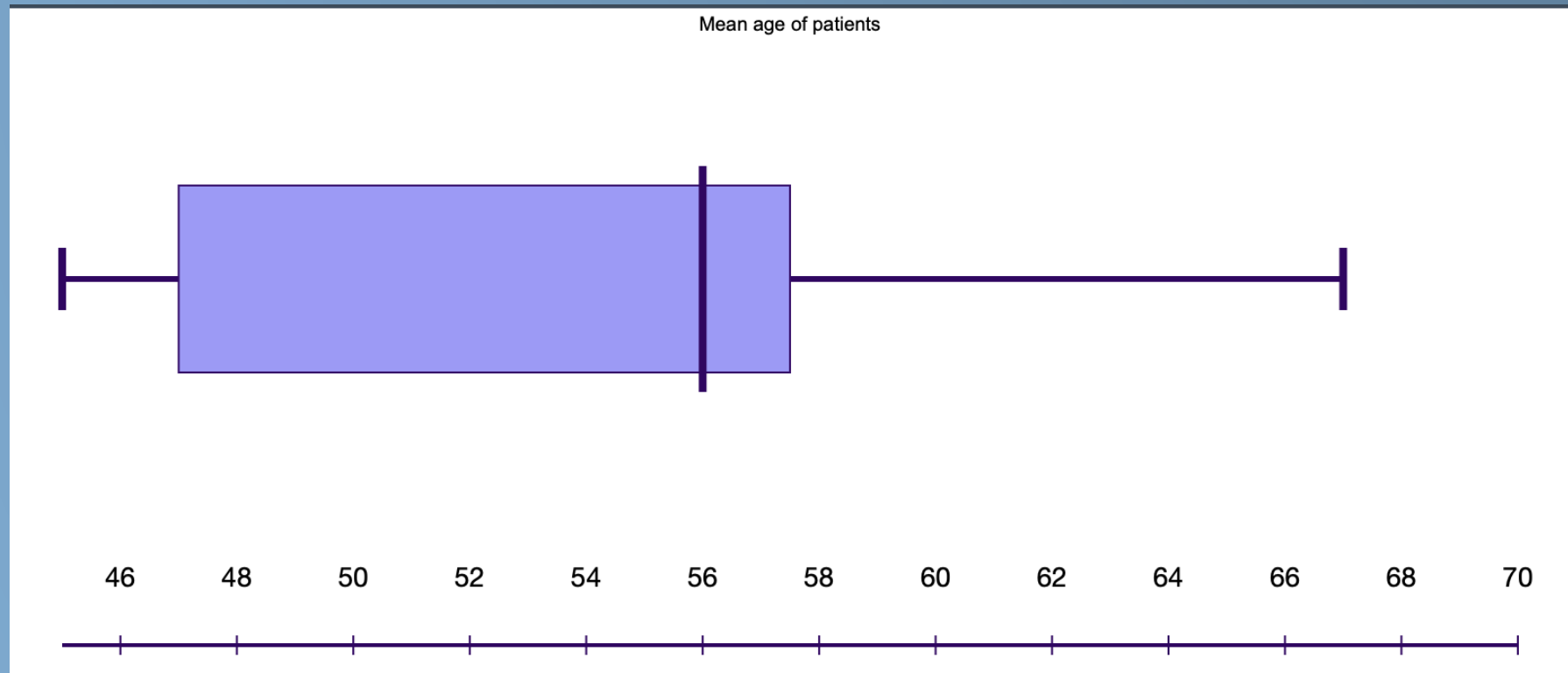
Second Cycle Results

Follow Up:

- 70% increase in follow up for patients on HRT

Symptom Control

- 10 % reported inadequate symptom control.
- Breakdown of specific symptoms:
 - ❖ 8% had persistent hot flushes
 - ❖ 5% reported low libido
 - ❖ 3% experienced brain fog
 - ❖ 2% reported vaginal dryness
 - ❖ 15% had low mood and anxiety

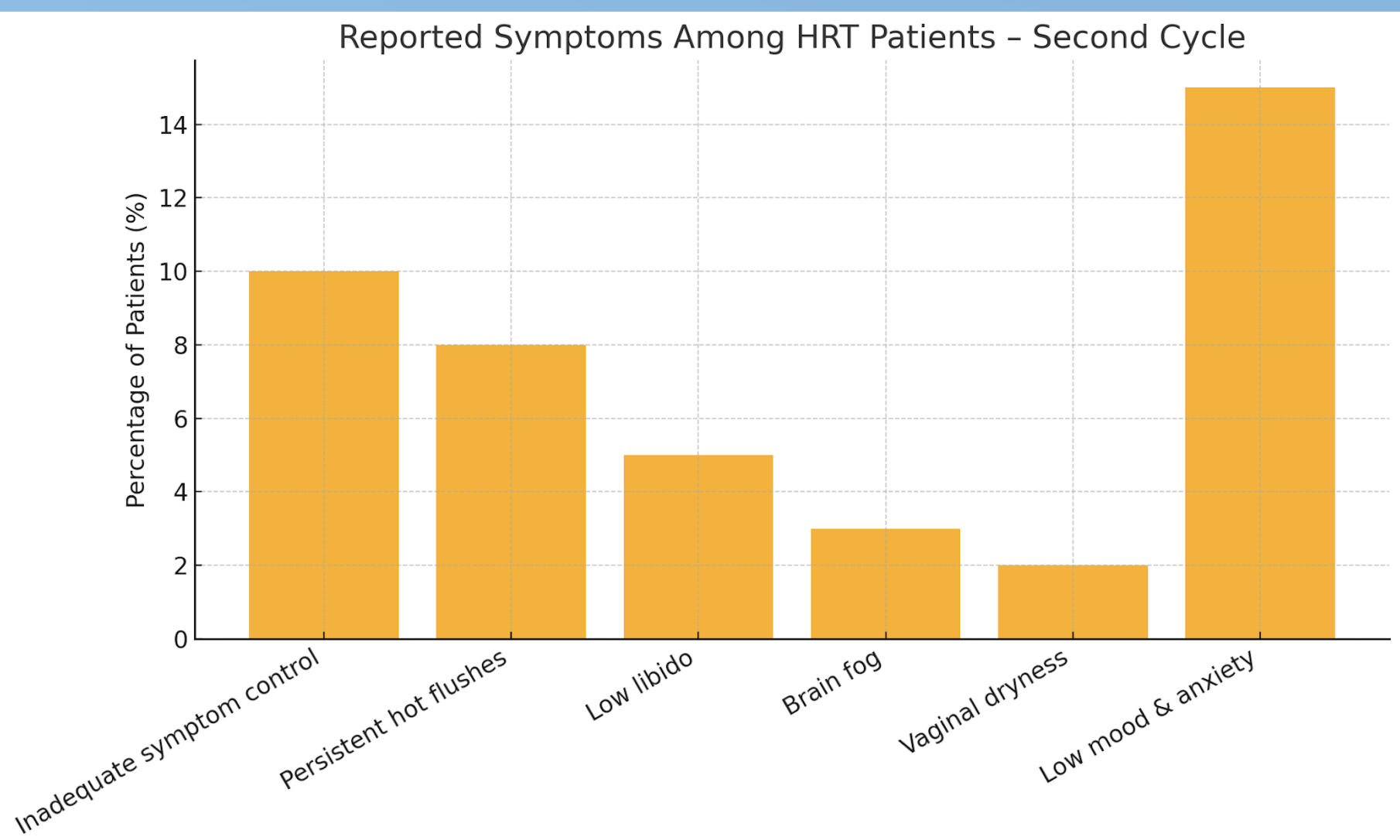


Follow Up:

- 0% had received follow-up in line with NICE guidelines.
- 43% were unsure about the recommended duration of HRT.

Symptom Control

- 25% reported inadequate symptom control.
- Breakdown of specific symptoms:
 - ❖ 18% had persistent hot flushes
 - ❖ 7% reported low libido
 - ❖ 15% experienced brain fog
 - ❖ 16% reported vaginal dryness
 - ❖ 22% had low mood and anxiety



Conclusion

Gaps in follow up care

- There is a lack of follow-up aligned with NICE guidelines for women on HRT.
- Many patients had unresolved symptoms, uncertainty about HRT duration, or red flag symptoms.
- Incorrect HRT usage observed in a subset of patients, indicating gaps in education and support.

Clinical Implications

- Inadequate follow-up can lead to:
 - Poor risk assessment
 - Delayed identification of adverse effects
 - Suboptimal adjustments to treatment
 - Potential harm to patients

Recommendations

- Urgent need for:
 - ❖ Structured follow-up protocols in primary care
 - ❖ Regular monitoring of symptoms and side effects
 - ❖ Improved patient education and communication

References

- Lega IC, Fine A, Antoniadou ML, Jacobson M: [A pragmatic approach to the management of menopause](#). CMAJ. 2023, 14:677-682.
- National Institute for Health and Care Excellence (NICE). [Gynaecological cancers - recognition and referral](#). Clinical Knowledge Summaries. (2025). Accessed:01/05: <https://cks.nice.org.uk/topics/gynaecological-cancers-recognition-referral/>.

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