

HORMONE REPLACEMENT THERAPY

WHY CLINICIANS ARE HESITANT TO PRESCRIBE !!!!!

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INTRODUCTION

Hormone Replacement Therapy (HRT) is a cornerstone of menopausal symptom management and prevention of associated long-term health risks. Despite its established efficacy, HRT prescription remains suboptimal in Pakistan, driven by a combination of clinical, cultural, and economic factors. This study aimed to explore the prescribing practices, perceptions, and barriers faced by gynecologists in Pakistan, providing insights into improving menopausal healthcare delivery.

OBJECTIVE

To evaluate the prescribing practices, perceptions, and barriers associated with hormone replacement therapy (HRT) among consultant gynecologists in Pakistan, with the goal of identifying actionable insights to improve menopausal healthcare delivery and optimize patient outcomes.



RELATED LITERATURE

- The North American Menopause Society. The 2022 hormone therapy position statement of The North American Menopause Society. *Menopause*. 2022;29(7):767-794. doi:10.1093/men/0000000000002028
- Bobo RJ, Parag N, Fenton A. 2016 IMS recommendations on women's midlife health and menopause hormone therapy. *Climacteric*. 2016;19(2):109-150. doi:10.31002/1567157.2015.102966
- Noval SH, Nazeem A, Hussain S. Menopause in Pakistan: Current practices and attitudes. *J Pak Med Assoc*. 2011;61(2):190-193.
- Kumar MS, Bhandal M. Bio-psychio-social factors in menopausal symptom management. *BJOJ*. 2007;14(4):468-475. doi:10.1111/j.1471-0528.2006.01071.x
- Rahman S, Saleem S. Knowledge, attitude, and practice towards hormone replacement therapy among healthcare providers in Pakistan. *Pak J Med Sci*. 2019;33(5):789-794. doi:10.12667/pjms.33.5.290
- Santoro N, Epperson CN, Matthews SB. Menopausal symptoms and their management: HRT and beyond. *Nat Rev Endocrinol*. 2015;11(1):27-38. doi:10.1038/nrendo.2014.163

METHODOLOGY

The survey revealed a pervasive reluctance among gynecologists to prescribe HRT. Notable barriers included:

- A predominant focus on risks rather than benefits during patient counseling
- Limited clinical familiarity with various HRT modalities.
- Concerns regarding side effects and complications.
- Economic constraints and poor patient follow-up, which hinder adherence.

The study also highlighted that a significant number of postmenopausal women did not seek medical advice due to lack of awareness about menopausal health. HRT was prescribed more frequently to patients with prior knowledge of menopausal issues, suggesting that patient awareness plays a crucial role in acceptance. Additionally, controversies surrounding the safety of HRT had a substantial impact on prescribing trends

RESULTS

This study identifies key obstacles to HRT utilization in Pakistan and emphasizes the need for targeted interventions. Dedicated menopause clinics, professional training programs focusing on evidence-based HRT use, and public awareness campaigns are crucial to bridging the gap between potential and actual utilization. Counseling approaches must be balanced, highlighting both the benefits and risks to facilitate informed decision-making. Addressing socio-economic barriers and ensuring continuity of care through improved follow-up systems are essential to enhance HRT acceptance and adherence.

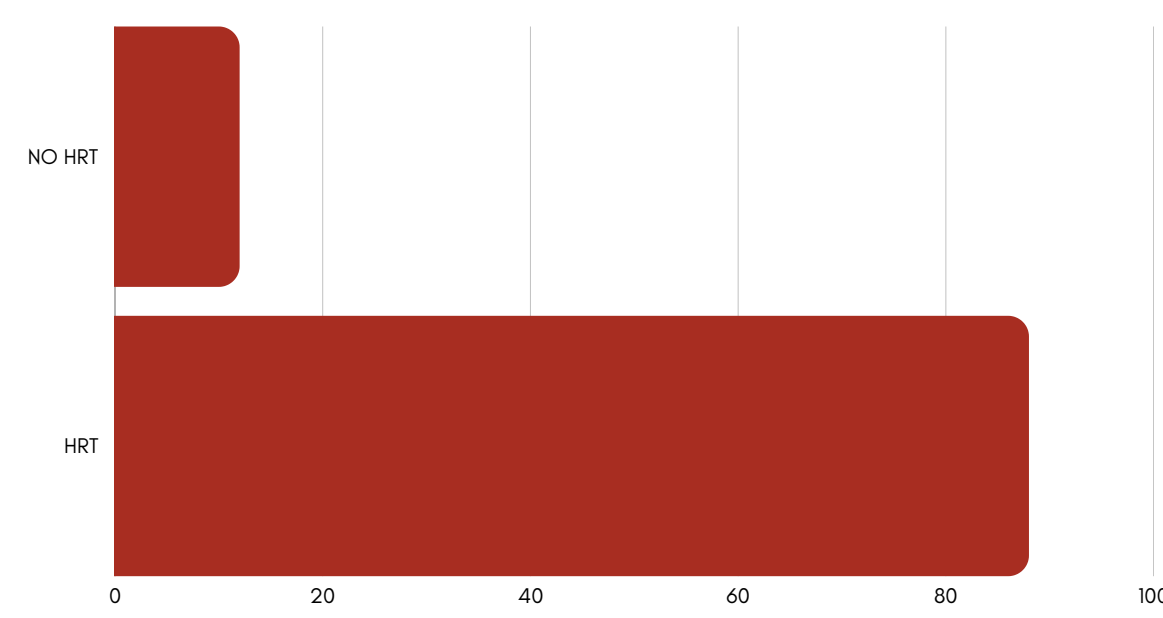
CONCLUSION

This study highlights a significant underutilization of hormone replacement therapy (HRT) among gynecologists in Pakistan, despite its proven efficacy in managing menopausal symptoms and preventing long-term complications. The findings reveal that clinical hesitancy is driven by a combination of perceived risks, limited practitioner experience, patient unawareness, economic barriers, and concerns regarding side effects.

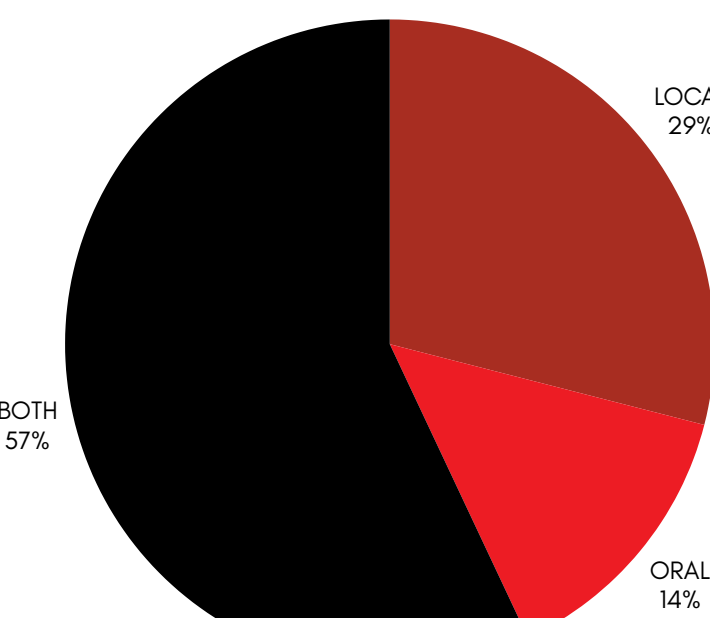
Addressing these gaps requires a multifaceted strategy:

- Enhancing physician education and confidence in prescribing HRT.
- Increasing patient awareness to promote informed decision-making.
- Establishing dedicated menopause clinics to deliver structured, evidence-based care.
- Advocating for policy and cost interventions to improve HRT accessibility.

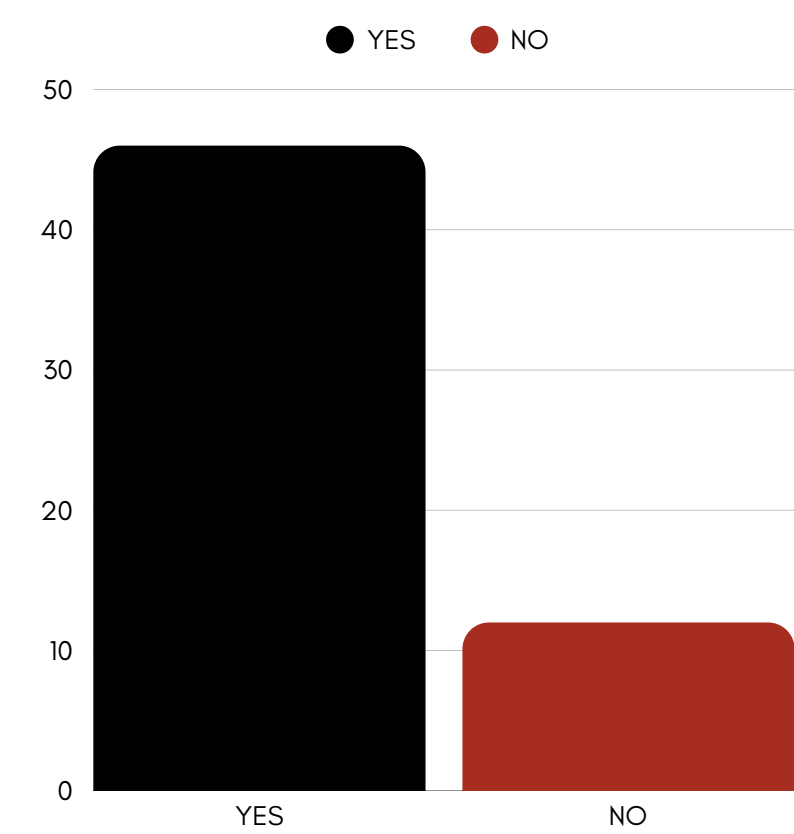
ANALYSIS



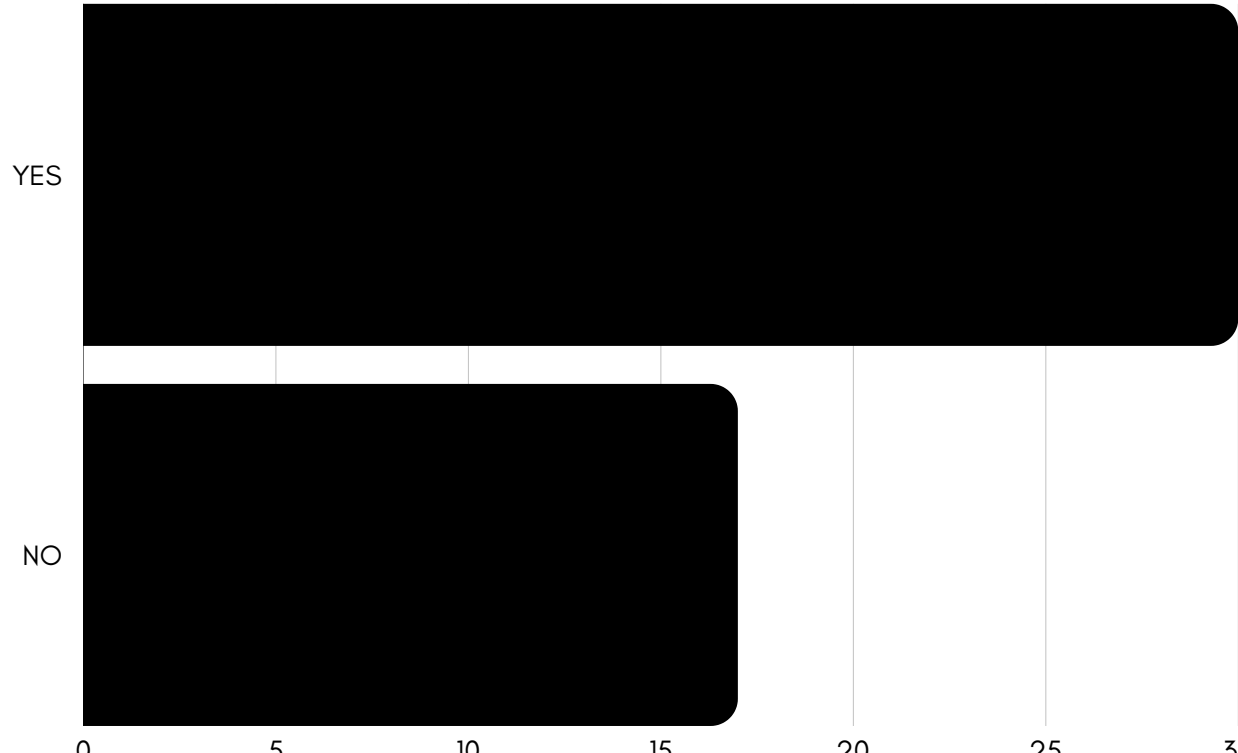
PERCENTAGE OF DOCTORS NOT PRESCRIBING HRT



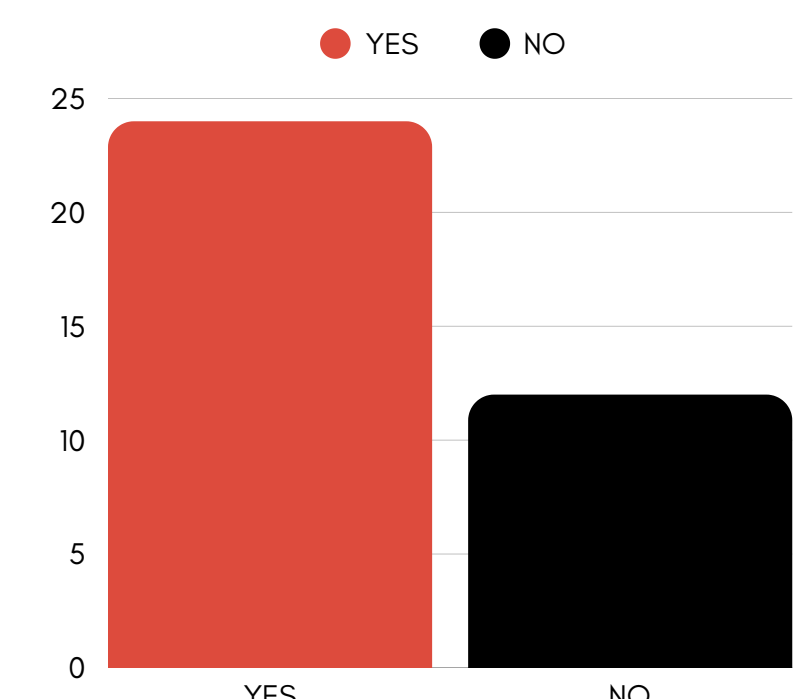
TYPES OF HRT PRESCRIBED BY CONSULTANTS



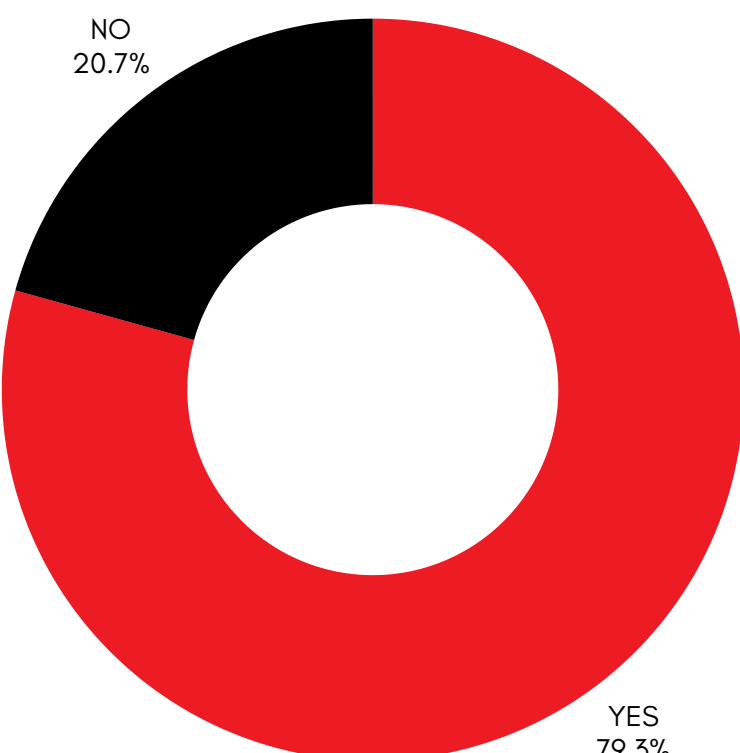
LARGE NUMBER OF PATIENTS DONOT REPORT



DURING COUNSELLING RISKS ARE DISCUSSED MORE THAN BENEFITS



DO HRT CONTRAVERSIES EFFECT YOUR PRESCRIPTION



DEDICATED CLINICS WILL HELP IN MENOPAUSAL AND HRT ISSUES

GRAPHICAL PRESENTATION OF SURVEY