

TREATING MENOPAUSAL SYMPTOMS

in women who've had breast cancer



Menopause is a natural part of life that affects all women as they get older. It begins most often in the late 40s or early 50s. A woman is considered in menopause 12 months after her last period. For women with a history of breast cancer, some breast cancer treatments, like hormone therapy and chemotherapy can push women into menopause early. Oftentimes, the symptoms are sudden and can be worse than for women who go through menopause naturally.

How does breast cancer treatment affect premenopausal women?

For women who've been treated for breast cancer, and haven't been through natural menopause, some therapies can cause irregular periods or stop periods all together. Other therapies can damage the ovaries. Typically, the risk of permanent menopause increases with age.

Because of these concerns, premenopausal women may want to talk with a fertility specialist before starting breast cancer treatment if they wish to have children.

What are common menopausal symptoms in women who've had breast cancer?

The most common menopausal symptoms are hot flashes (including night sweats) and vaginal dryness. Other symptoms include joint and muscle pain, thinning hair, mood swings and depression. The severity and duration of symptoms vary from woman to woman.

Is there a concern about using menopausal hormone therapy?

There are many types of menopausal hormone therapies (MHT) available for women to relieve menopausal symptoms. MHT may also be called hormone replacement therapy (HRT). Some are pills, some are used vaginally and others are patches. They also differ in whether they contain estrogen and progesterin, or just estrogen.

Some MHT are not recommended for women with a history of breast cancer due to the risk of:

- Recurrence (cancer coming back).
- Metastasis (spread or distant recurrence).
- Cancer in the opposite breast.

Due to the risks noted above, currently, the best choice for most breast cancer survivors is to avoid the use of MHT. However, there are options for treating or relieving the most common menopausal symptoms. Some options

include taking non-hormonal drugs or using lubricants, using complementary and integrative therapies or making some lifestyle changes.

What are safe options to treat some menopausal symptoms for women with a history of breast cancer?

Vaginal therapies

Vaginal moisturizers and lubricants don't contain estrogen, so they're safe for women who've had breast cancer.

Other therapies for vaginal symptoms like suppositories, vaginal rings or vaginal estrogen creams **do** contain estrogen. So, it's best to talk with your doctor about your options because there are some questions about using vaginal estrogen therapies, especially those taking an aromatase inhibitor.

Using vaginal estrogen suppositories or a vaginal estrogen ring is preferred over a vaginal estrogen cream, especially if your breast cancer was **estrogen receptor-positive**.

Complementary and Integrative therapies

While studies are mixed, some people may get relief from hot flashes and other menopausal symptoms through some **complementary and integrative therapies** such as acupuncture, soy or cognitive behavioral therapy.

Some complementary therapies can interfere with breast cancer treatments though, so **talk with your doctor** before using any complementary therapy to help avoid problems. They can help you understand the risks and benefits of the therapy you are thinking about using.

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Resources

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Related online resources:

- [Hormone Therapy for Early Breast Cancer](#)
- [Questions About Hormone Therapy and Side Effects](#)
- [Complementary and Integrative Therapies](#)
- [Side Effects After Breast Cancer Treatment Ends](#)

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Non-hormonal medication

Non-hormonal Medication	Summary of Evidence from Randomized Controlled Trials	Short-term Health Risks
Clonidine (Catapres, Kapvay and others)	Reduced frequency of hot flashes among women who've had breast cancer	<ul style="list-style-type: none"> • Constipation • Dry mouth • Low blood pressure • Sleeping problems
Elinzanetant (Lynkuet)	Reduced strength and frequency of hot flashes among women taking tamoxifen or an aromatase inhibitor for breast cancer treatment or risk reduction	<ul style="list-style-type: none"> • Drowsiness or fatigue • Liver problems • Headache • Stomach pain <p>Grapefruit and grapefruit juice should be avoided while taking elinzanetant, as they may increase blood levels of this drug.</p>
Gabapentin (Neurontin) and pregabalin (Lyrica)	Reduced strength and frequency of hot flashes	<ul style="list-style-type: none"> • Dizziness • Drowsiness • Swelling in arms and legs
Oxybutynin (Ditropan)	Reduced strength and frequency of hot flashes	<ul style="list-style-type: none"> • Abdominal pain • Difficulty urinating • Dry mouth
SSRI antidepressants	Reduced strength and frequency of hot flashes	<ul style="list-style-type: none"> • Constipation • Dry mouth • Headache • Nausea • Reduced sexual desire • Sleeping problems <p>May interact with tamoxifen</p>
SNRI antidepressants	Reduced strength and frequency of hot flashes Increase in sexual desire	<ul style="list-style-type: none"> • Constipation • Dry mouth • Nausea

Talk with your doctor to see if any of these options will work for you.

Lifestyle changes

Although studies are limited at this time, the following tips may help relieve hot flashes.

- Quit smoking (if you smoke)
- Avoid caffeine
- Avoid spicy foods
- Take a cool shower before bed
- Keep an ice pack under your bed pillow to use to cool down if you wake up with night sweats

If you experience any symptoms or have concerns about any menopausal issues like joint and muscle pain, thinning hair, mood swings and depression, please talk with your doctor.

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