

Written evidence by Dr Nighat Arif [MEW0089]

Supplementary evidence – Dr Nighat Arif

This evidence supplements the oral evidence I gave on 17 November 2021.

Footnote 1: Surgical removal of ovaries would result in a 50% reduction in testosterone. Women with premature ovarian insufficiency are at risk of decreased concentrations of testosterone, but more studies are needed on this. Ref: <https://pubmed.ncbi.nlm.nih.gov/29994966/>

Footnote 2: the WHI studies were randomised control studies.

Footnote 3: 1 in 8 women are at risk of developing breast cancer. The data shows that transdermal (through the skin) systemic oestrogen-only HRT does not increase the risk of breast cancer in younger women, but it is not possible say there is no risk. <https://www.breastcancer.org/research-news/hrt-and-its-effect-on-bc-risk> In women who have combined transdermal HRT such as oestrogen and progesterone, there is a very small risk of breast cancer. However, there is no increased risk of death from breast cancer. With regards to vaginal-localised oestrogen, it does not increase the risk of breast cancer. <https://pubmed.ncbi.nlm.nih.gov/17138766/> Oral combined HRT has a slight higher risk of breast cancer. We need more studies on HRT and risk. <https://pubmed.ncbi.nlm.nih.gov/17138766/>

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