

## Editorial

### **Hormone replacement therapy : Practical dilemma ?**

Since the 6<sup>th</sup> International Congress on the Menopause which was held in Bangkok in the year 1990, there has been a continuing controversy over the concept of the menopause. Some regard it as merely a physiologic change which need no additional medical therapy while others considered menopause as an endocrinologic disorder which need effective medical intervention. These are probably stemmed from the different approaches in understanding the menopause of experts from various professionals ie psychologist, socialist, humanitarian naturalist, medicine, etc. This debate has put many physicians who are supposed to be knowledgeable to prescribe HRT, into practical dilemma.

Currently many physicians who claimed a substantial evidence from the western countries which demonstrated the positive effect of HRT on menopausal symptoms and the reduction of long-term menopausal risk, have voiced concern over the underutilization of HRT in menopausal women. On the contrary the more conservative group have questioned the real benefit of HRT on this physiologic condition and have been against to put the chemical substance into women's

body. Virtually, menopausal transition may range from modest and gradual change in a healthy woman to severe and rapid deterioration of a woman with premenopausal suboptimal health status. Hence, the management of menopause is not solely depended on medication. The magnitude of problem in each menopausal women should be individually assessed. This information should be used for decision making process in menopausal management strategies which are suitable with each subject's risk and benefit. Non-medical modalities for instance, life-style modification, should be taken into account in some particular group of menopausal women whose changes are mild and insidious. HRT should be considered in those who have rapid deterioration in which nonmedical modality might not be adequate.

In broad perspective, HRT is not considered to be "a must" or has an undebatable benefit to every postmenopausal women. To prescribe HRT, benefit and risk should be individually assessed to find solid indications while trying to avoid any contraindication in each subject to help improving the quality of life in her golden period.

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