

## **Background**

Climacteric symptoms during the menopausal transition can be alleviated with hormonal replacement therapy (HRT) yet concerns over cancer risk require a more detailed consultation on the risk-benefit ratio of treatment, potentially increasing general practitioner consultation time.

## **Aim**

The present study used practice-based pharmacists (PBPs) to screen for symptomatic menopausal women and to provide evidence-based advice to enable them to make an informed decision on the use of HRT.

## **Method**

Women aged 47 to 53 years were invited to complete the menopause rating scale (MRS) which assessed climacteric symptom severity. Those with moderate severity symptoms were invited to consult with a PBP to discuss the use of HRT. The primary outcome was the change from baseline in MRS score after 3 months. The main secondary outcome was the change from baseline in the subdomains (psychological somatic and urogenital) of the MRS.

## **Results**

In total, 64 women with a mean age of 50.6 (95% CI 50.07 – 51.18) years were recruited and completed a baseline MRS and 57.8% completed a three-month follow-up MRS. The mean baseline and follow-up MRS scores were 21.6 (95 % CI 19.6 – 23.6) and 18.54 (95% CI 16.1 – 21.0) respectively and this difference of 3.11, was significant ( $p = 0.008$ ). There were also significant improvements in psychological ( $p = 0.046$ ), somatic ( $p = 0.014$ ) and urogenital ( $p = 0.003$ ) symptoms.

## **Conclusion**

Practice-based pharmacist screening for symptomatic women undergoing the menopause transition could be used as a source of unbiased treatment advice and serve as an alternative to general practitioners.