

# Primary care screening to identify symptomatic menopausal women

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<b>Registration date</b> 13/08/2021	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 12/04/2024	<b>Condition category</b> Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

The menopause represents a normal physiological change that occurs on average occurs in women aged 50. Though not strictly an illness, the low levels of oestrogen associated with the menopause commonly results in vasomotor symptoms such as hot flushes and night sweats. In addition, some also experience sleep disturbance, depression, mood changes, musculoskeletal pain, vaginal dryness and low libido.

Menopausal symptoms can be easily managed with hormone replacement therapy (HRT) however the potential increased risk of breast and other cancers, although very slight, has led to concerns among many women so that uptake of HRT is relatively low and women remain symptomatic.

The purpose of the present study is to make use of a validated screening tool to identify women eligible for treatment with HRT and who, according to the screening tool, experience moderate to severe menopausal symptoms. These women will be offered an appointment with a practice pharmacist to discuss the benefits and any possible risks from using HRT to enable them to make an informed choice on whether they wish to manage their symptoms with treatment. We are interested in exploring the proportion of eligible symptomatic women who subsequently decide to use HRT and the extent to which the symptom burden is reduced by treatment.

### Who can participate?

All women between the ages of 47 and 53 who are currently not prescribed any form of hormone replacement therapy and who have no medical reason not to use the treatment.

### What does the study involve?

After giving informed consent participants will complete the menopausal symptom rating (MRS) scale and a quality of life questionnaire (Men QoL) online, both should take less than 5 to 10 minutes to complete. If the result from the rating scale shows that they have moderate to severe symptoms, they will be invited to have a discussion with their practice pharmacist about using HRT to manage symptoms, this consultation will take place online. The pharmacist will provide information on the benefits and any risks associated with using HRT, to allow participants to make an informed decision. If they want to try using HRT, the pharmacist will discuss the various treatment options and participants will have a follow-up online appointment with the pharmacist after three months to assess whether or not the treatment is working.

What are the possible benefits and risks of participating?

Hormone replacement therapy is indicated for the relief of menopausal symptoms although it is associated with some risks including blood clots, stroke, endometrial cancer, breast cancer and ovarian cancer. However, these risks are small.

Where is the study run from?

Rotherham, Doncaster, and South Humber NHS Foundation Trust (RDaSH) (UK)

When is the study starting and how long is it expected to run for?

January 2019 to December 2021

Who is funding the study?

Besins Healthcare (UK) Limited

Who is the main contact?

Miss Jeannie McKie, [j.mckie@nhs.net](mailto:j.mckie@nhs.net)

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## Contact information

### Type(s)

Scientific

### Contact name

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## **Additional identifiers**

**Integrated Research Application System (IRAS)**  
265355

**Central Portfolio Management System (CPMS)**  
44336

## **Study information**

### **Scientific Title**

The use of a screening tool in primary care to identify menopausal and perimenopausal women who could benefit from hormone replacement therapy

### **Study objectives**

Providing women with moderate to severe menopausal symptoms with educational support from their practice pharmacist will support them to make informed treatment choices and reduce symptom severity.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Approved 20/03/2020, North West - Greater Manchester Central Research Ethics Committee (Barlow House, 3rd Floor, 4 Minshull Street, Manchester, M1 3DZ, UK; +44 (0)207 1048 007; gmcentral.rec@hra.nhs.uk), ref: 19/NW/0745

### **Study design**

Interventional non-randomized

### **Primary study design**

Interventional

### **Study type(s)**

Screening

### **Health condition(s) or problem(s) studied**

Primary care screening to identify symptomatic menopausal women

### **Interventions**

This will be an uncontrolled before and after intervention study with participants recruited from primary care. The intervention consists of the use of the menopause rating scale (MRS) combined with the educational input from the practice pharmacists.

#### Recruitment/Data collection

1. Practice databases will be searched to identify women aged 47 to 53 not currently/previously prescribed any form of HRT. Patients identified from the search will be sent (from the practice) a letter of invite to the study, an information leaflet, consent form and copies of the MRS/MenQol scales and asked to return the completed forms (consent, MRS, MenQol) to the practice. Non-responders will be sent a follow-up two weeks after the initial letter has been sent.
2. The practice (administrative staff) will collate the completed MRS/MenQol forms and invite those with a score  $\geq 8$  (on the MRS) for an appointment with the practice pharmacist to discuss use of HRT.
3. Eligible participants willing to use HRT will be invited back for a follow-up appointment after 3 months to review the impact of HRT on MRS and MenQol scores
4. Practices will be asked to record the number of patients identified in the database search /current treatments/No of non-responders/refusals
5. Participant demographics & current treatment will be transcribed onto an anonymised data collection form
6. Participants opting for a trial of HRT will be asked to return to the practice after 3 months for a treatment review and asked to complete a second menopausal rating scale and QOL questionnaire.
7. Any known adverse effects reported by women will be documented in the medical notes and new or unrecognised effects will be reported using the yellow card scheme.

#### Pharmacist training

To ensure that all participating clinical pharmacists are prepared to participate in the study, we will produce a bespoke training pack that will cover background information on the menopause, symptomology and any national guidance around treatment recommendations and information to help complete the study paperwork.

#### Data Analysis

Both demographics and current treatments used by women will be analysed descriptively. Means and standard deviations will be used for normally distributed continuous variables, medians and interquartile ranges will be used for non-normally distributed continuous variable, and counts and percentages will be used to describe categorical variables.

Changes in total MRS/MenQol scores will be assessed using paired t-tests if the data are normally distributed or nonparametric equivalents if the data are skewed.

#### Intervention Type

Behavioural

#### Primary outcome(s)

Menopause symptom severity measures using the MRS and MenQol scales at 3 months

#### Key secondary outcome(s)

Uptake of HRT measured using self report at 3 months

#### Completion date

31/12/2021

# Eligibility

## Key inclusion criteria

All women between the ages of 47 and 53 years who are currently not prescribed any form of hormone replacement therapy and who have no recorded contra-indications to using the treatment

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

47 years

## Upper age limit

53 years

## Sex

Female

## Total final enrolment

63

## Key exclusion criteria

1. Current, past or suspected breast cancer
2. Known or suspected oestrogen-sensitive cancer
3. Undiagnosed vaginal bleeding
4. Untreated endometrial hyperplasia
5. Previous idiopathic or current deep vein thrombosis or pulmonary embolism unless on anticoagulant therapy.
6. Active or recent arterial thromboembolic disease (e.g. angina, myocardial infarction)
7. Untreated hypertension
8. Active liver disease with abnormal liver function tests
9. Porphyria cutanea tarda
10. Pregnancy

## Date of first enrolment

06/02/2021

## Date of final enrolment

31/12/2021

# Locations

## Countries of recruitment

United Kingdom

England

**Study participating centre**

**Clifton Medical Centre**

Doncaster Gate  
Rotherham  
United Kingdom  
S65 1DA

**Study participating centre**

**Mayford House Surgery**

Boroughbridge Rd  
Northallerton  
United Kingdom  
DL7 8AW

**Study participating centre**

**The Scott Practice**

Greenfield Lane  
Balby  
Doncaster  
United Kingdom  
DN4 0TG

## **Sponsor information**

**Organisation**

Rotherham, Doncaster, and South Humber NHS Foundation Trust (RDaSH)

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Besins Healthcare (UK) Limited

# Results and Publications

## Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are not expected to be made available due to the small size of the trial.

## IPD sharing plan summary

Not expected to be made available

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>			19/03/2024	Yes	No
<a href="#">HRA research summary</a>			28/06/2023	No	No
<a href="#">Other unpublished results</a>			23/11/2023	No	No
<a href="#">Participant information sheet</a>	version 1.4	17/08/2020	10/08/2021	No	Yes
<a href="#">Plain English results</a>			12/04/2024	No	Yes
<a href="#">Protocol file</a>	version 1.5	17/08/2020	30/12/2021	No	No