



# Menopause and Breast Cancer: What Every Woman Should Know

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Chief Clinical Officer, Midi Health

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# Meet Midi. Expert medical care for perimenopause and menopause

- Virtual care from anywhere
- Delivered by experts in perimenopause and menopause
- Personalized, holistic Care Plans
- Covered as an in-network service under your Anthem Blue Cross and Blue Shield of CA PPO Plans. Standard cost-sharing applies.



Scan the QR code or visit [joinmidi.com/sisc](https://joinmidi.com/sisc) to book your first visit today.

# Dr. Mindy Goldman

Chief Clinical Officer, Midi Health



## Education

University of Vermont, Burlington (M.D.);  
University of California, San Francisco (UCSF) (Residency)

## Clinical Specialty

Women's health care and gynecology issues for cancer patients and those at-risk for cancer

## Experiences include

- Practicing OB/GYN at UCSF for almost three decades
- Current director of the UCSF Gynecology Center for Cancer Survivors and At-Risk Women
- Authored the guidelines for gynecology care for women with breast cancer for the American College of Gynecology
- Member of survivorship panel for the National Comprehensive Cancer Network: Chair of the menopause panel and the Co-Chair of the sexual functioning panel

## Currently

Expanding access care as **Chief Clinical Officer of Midi Health**, a telehealth platform serving women in Midlife

## AGENDA

01. Menopause overview
02. Breast cancer therapies and menopause
03. Safe treatments and solutions for cancer survivors and at-risk women
04. HRT and breast cancer
05. How your Midi benefit works
06. Q&A with Dr. Goldman

# Menopause + breast cancer

Every woman's menopause experience is unique, but cancer adds extra considerations.

## TOP QUESTIONS:

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Does breast cancer affect when menopause starts?

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Can cancer treatment cause early menopause?

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Does HRT cause breast cancer?

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Can I take hormonal treatment for menopause symptoms if I have a family history of breast cancer?

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Are there any safe menopause treatments for patients with breast cancer?



First, a quick **menopause overview...**

# What is Menopause?



12 months

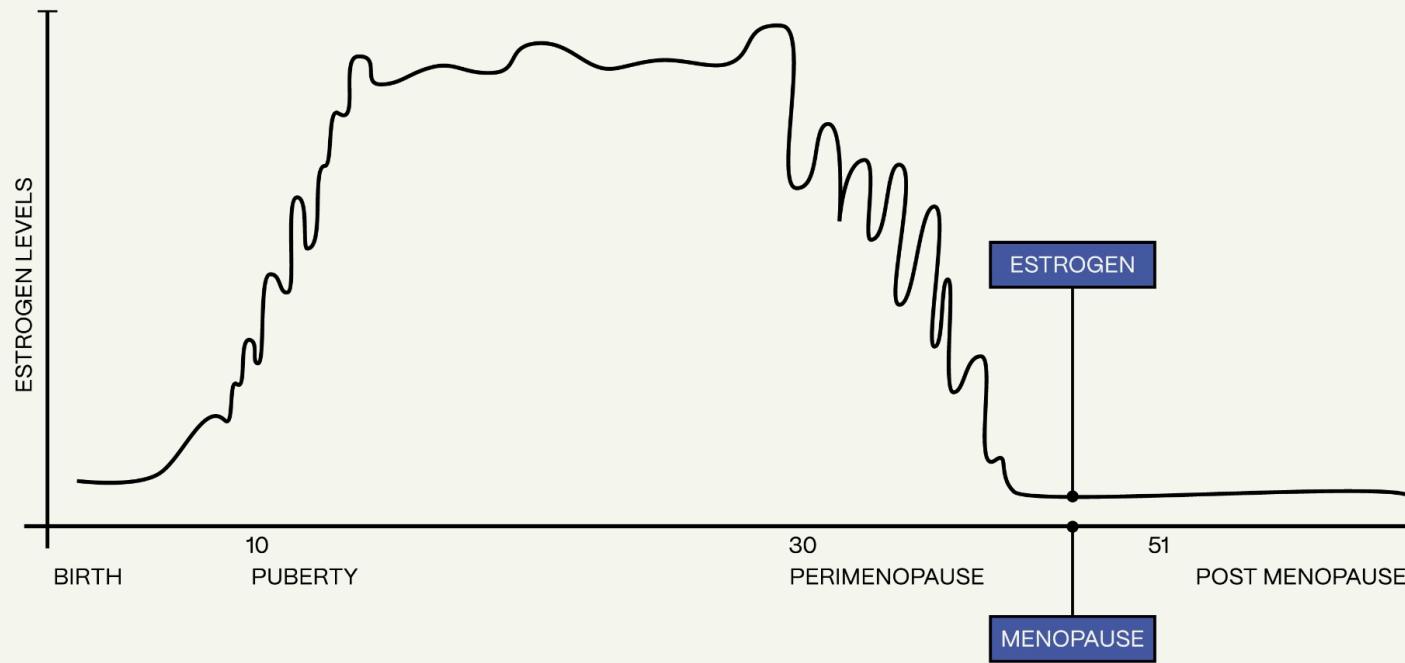
FROM YOUR LAST MENSTRUAL PERIOD

Estrogen & Progesterone  
LEVELS DROP

These hormonal shifts can cause  
physical and emotional symptoms.

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# How estrogen levels shift over time



# Where you might feel the changes:

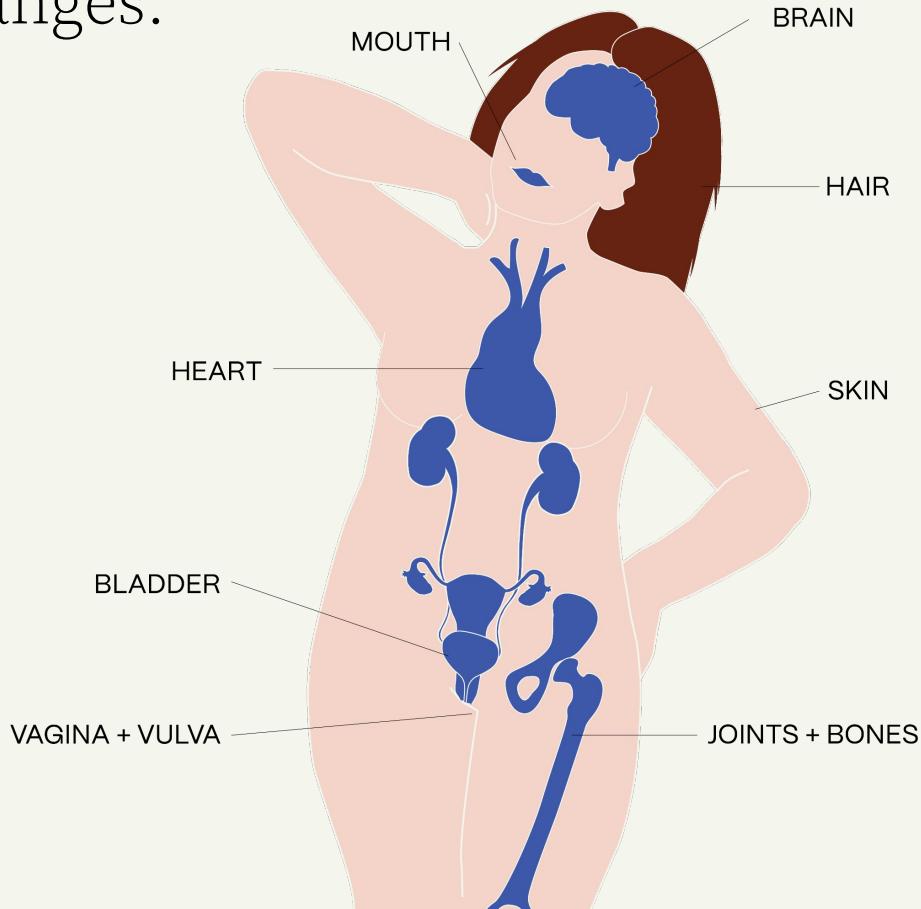
Estrogen receptors are everywhere

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Estrogen supports nearly every organ and system in the body

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“Estrogen withdrawal” is real



# Menopause Symptoms

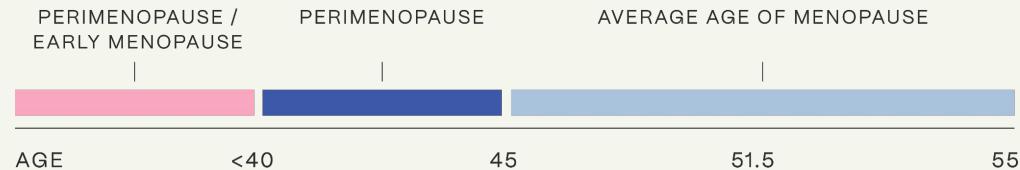
	Irritability	Painful intercourse	
Hot flashes			Joint pain
	Decreased libido	Difficulty achieving orgasm	
Night sweats			Dry mouth
	Cognitive issues	Urinary urgency	
Sleep trouble/Insomnia			Itchy skin
	Anxiety/Depression	Recurrent UTIs	
Brain fog/Memory lapses			Irregular heartbeat
	Weight gain	Stress incontinence	
Mood changes			And many more!
	Vaginal dryness	Hair and skin changes	

Not everyone follows the same path to menopause, and breast cancer can change the course

Typical menopause follows a pattern; **but your path may look different**

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Women who have breast cancer and receive chemotherapy or take certain hormonal therapies may experience **early menopause**



# Why do some cancer therapies bring on early menopause?

**It comes down to a major drop in estrogen that can happen when cancer treatment involves:**

## **CHEMOTHERAPY**

- Can damage and shut down the ovaries, sometimes permanently
- Women who are over 40 when they receive chemotherapy are more likely to have permanent menopause

## **SURGICAL MENOPAUSE**

- Sometimes breast cancer treatment involves removal of the ovaries, which causes immediate onset of surgical menopause

**Symptoms can sometimes be even more severe for cancer survivors.**

All these treatments help you beat breast cancer, but they also impact estrogen levels and can cause some of the same symptoms natural menopause does.

# Why do some cancer therapies cause menopause symptoms?

## Hormonal therapies

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Some breast cancer treatments include tamoxifen, which may impact menstrual cycles and cause hot flashes

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Some breast cancer treatments include aromatase inhibitors (which require someone to be menopausal to be effective) which can cause significant menopausal symptoms



There are many **safe** and **effective** treatment solutions for breast cancer survivors and at-risk women.

Let's explore those...

# Start with lifestyle + wellness therapies

## Exercise

- For hormone-sensitive breast cancer survivors, regular interval cardio may also decrease risk of recurrence and improve survival

## Diet

## Sleep hygiene

## Integrative therapies

- CBT
- Acupuncture

## OTC supplements & botanicals

- Black cohosh
- Maca
- Ashwagandha
- Lavender



# Non-hormonal medication

May be appropriate for survivors of breast cancer and other female cancers. Offer relief for symptoms such as hot flashes, night sweats, mood problems, and sleep.



OPTIONS INCLUDE:

## FDA APPROVED

Brisdelle

Fezolinetant/Veozah

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## USED OFF-LABEL

Low-dose antidepressants

Neuropathic pain relievers

Anticonvulsants

Anticholinergics

Antihypertensives

There are a number of different medications within these categories, so there's **no reason to suffer**.

## HORMONE THERAPY

Hormone replacement therapy is the most effective treatment for immediate symptom relief: estrogen +/- progesterone

### Immediate symptom relief

- 75% reduction in hot flashes/night sweats
- 75% improvement in vaginal dryness, painful sex, urinary symptoms
- Improvement in sleep & mood

### Long term benefits: Evolving evidence suggests:

- Lower heart disease risk
- Decreased death from all causes
- Improved bone health
- Improved brain health

**HRT isn't right for most cancer survivors**, but may be appropriate for some



## RISK VS. CAUSE

Some forms of estrogen and progestogen are associated with higher risks

### WHAT WE DO KNOW:

Estrogen does NOT increase breast cancer risk

**Actually, research shows it decreases it\*:**

Reduces the risk of breast cancer by **21%**

Reduces breast cancer death by **40%**

\*Based on the large WHI study

# Not all hormones are the same

## Duavee

- Instead of using a progestogen, Duavee is a hormone therapy that combines oral estrogen with a cousin drug of tamoxifen
- FDA-approved for treating hot flashes and bone loss
- Is being studied for prevention of breast cancer in high-risk women



# HRT green, yellow, and red lights

## Green Lights

**Can women with a family history of breast cancer take HRT?**

Women with a family history **can** be offered HRT

Should be followed closely to monitor breast health risk

**Can women with a genetic mutation that increases breast cancer risk take HRT?**

Women with a genetic mutation **can** be offered HRT

Should get high-risk breast cancer follow-up

**Can women with DCIS with bilateral mastectomies take HRT?**

If bilateral mastectomy, **yes**

If breast tissue remains, often best to discuss alternatives

# HRT green, yellow, and red lights

## Yellow Lights

Can women with hormone-negative breast cancer take HRT?

Women with breast cancer that is not sensitive to hormones **most often can** take HRT if they have been cancer-free for a period of time

Can women with breast atypia (ADH, ALH, and LCIS) take HRT?

Women should be offered other options **before** being offered HRT

## Red Lights

Can women with hormone-sensitive breast cancer take HRT?

**No**, HRT isn't right for women with hormone-sensitive breast cancer

There are other routes for finding relief

# Local vaginal & vulvar estrogen



For dryness, painful intercourse, UTIs

Used by itself, does not need a progesterone

Several forms:

- Suppository
- Ring
- Cream

For those with hormone-sensitive breast cancer:

- Suppository and ring formulations are usually recommended for inside the vagina.
- Creams can be rubbed into the vaginal opening and vulva safely.

# What we want you to know

Specialized menopause care is vital for cancer survivors and at-risk women

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Midi's clinicians are trained by world-class experts and understand how to prescribe effective treatment for survivors and those at-risk

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Midi works with you to determine the best option for your body

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Midi is the only virtual care clinic dedicated to giving **all women**—cancer survivors included—personalized treatment so they can feel their best

91%  
of Midi patients feel better within 60 days



Sign up today or learn more about your Midi Health benefit at [joinmidi.com/sisc](http://joinmidi.com/sisc)

# Symptom Improvement After First Midi Visit

Hot flashes and  
night sweats



Trouble sleeping and/or  
insomnia



Moodiness, irritability,  
anxiety and/or depression



And within **5 months**,  
Midi patients reported  
improvement of  
these symptoms

**89%** BRAIN FOG AND/OR MEMORY LOSS

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**87%** PAINFUL SEX, VAGINAL DRYNESS, AND/OR  
LIBIDO CHANGE

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**83%** JOINT PAIN

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**82%** PERIOD PROBLEMS

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**80%** HAIR AND/OR SKIN CHANGES

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**54%** WEIGHT AND/OR BODY CHANGES

# Who is Midi for?



WOMEN IN  
PERIMENOPAUSE



WOMEN WHO REACH  
MENOPAUSE NATURALLY



WOMEN WHO EXPERIENCE  
SURGICAL MENOPAUSE

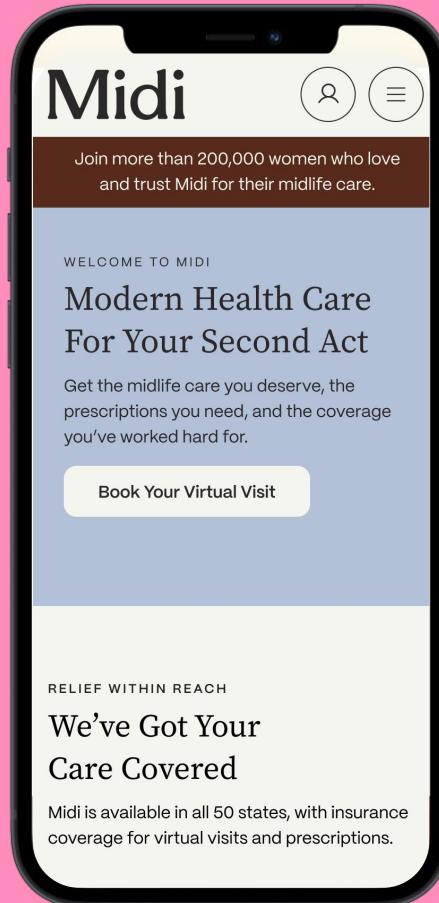


CANCER AND  
THOSE AT RISK

# What to expect from a Midi visit

- Convenient care from an expert deeply trained in perimenopause and menopause
- Personalized Care Plan designed for your specific symptoms and health history
- Evidence-based treatments including FDA-approved hormonal and non-hormonal options, supplements, lifestyle coaching, and more
- Ongoing follow-ups to adjust your treatment as needed, address new symptoms, and help you navigate your health concerns

Midi is covered for eligible employees and their partners/dependents covered under Anthem Blue Cross and Blue Shield of CA PPO Plans. Standard cost-sharing applies.



# Questions? Ask us anything!



Many Midi patients feel better within weeks—even days!  
**Sign up today to take the first step.**

1. **Scan the QR code or visit [www.joinmidi.com/sisc](http://www.joinmidi.com/sisc) to sign up for your Midi Health benefit.**
2. Complete your eligibility verification and answer a few questions about your symptoms.
3. Schedule your first virtual Midi visit and meet with your clinician.