The BEACH program is a continuous national study of general practice activity in Australia. The subject of this analysis was all problems for which a hormone therapy (HT) medication was prescribed or supplied at HT encounters with women aged 40 years and over between March 2002 and April 2004. This provides a backdrop against which the theme articles in this issue of *Australian Family Physician* can be further considered.

**Management rate**

Of the 69,726 encounters with women aged 40 years and over (W40+), there were 1848 at which 1940 problems were managed with hormone therapy (HT), accounting for 1.7% of all W40+ problems managed (Figure 1).

The problem for which HT medications were most often provided was labelled ‘HT’ (41.2 per 100 HT encounters), followed by menopausal symptoms (38.5), ‘prescription’ (without a more specific problem label) (11.0), and osteoporosis (5.4 per 100). Of the 2427 medications prescribed or supplied for HT problems, oestrogen was the most common (18.1%), followed by medroxyprogesterone (13.3%), and the combination oestradiol/norethisterone (13.2%). The median prescribed daily dose for oestrogen was 0.6 mg, medroxyprogesterone 5.0 mg and oestradiol/norethisterone 2.0 mg.

**Age of patients**

Women aged 55–59 years were most likely to receive HT (5.8 per 100 contacts), followed by those aged 50–54 years (5.3), and 60–64 years (4.3). Women over 70 years of age and those aged 40–44 years were least likely to receive HT (0.6 and 1.6 per 100 contacts respectively).

**Patient reason for encounter**

The most common patient reason for encounter was a prescription request (49.6 per 100 HT encounters), followed by a specific request for HT (17.3), menopausal symptoms (6.8), and hot flushes (6.4 per 100 HT encounters).

**Comorbidities managed**

Hypertension was the most commonly managed comorbidity (14.0 per 100 HT encounters), followed by depression and lipid disorders (6.1 per 100 each).

**Other management**

Other treatments were utilised less often for HT problems than the national average; counselling about HT being the most common (14.0 per 100 HT encounters), followed by depression and lipid disorders (6.1 per 100 each).

**Pathology rates** were low (10.7 per 100 problems); the most common being hormone assays (1.7), lipids (1.5), and thyroid function tests (1.2 per 100 HT problems). Imaging was ordered at a rate of 4.7 per 100 problems; mammography (2.2) and bone mineral density (1.9 per 100 problems) being the most frequent.

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### Theme: Current status of hormone therapy in general practice in Australia

Reprinted from Australian Family Physician Vol. 33, No. 11, November 2004

#### The patients – women aged over 40 years (n=1848)

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<th>Age group</th>
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<td>60–64</td>
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<td>65–69</td>
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<td>70–74</td>
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<td>75+</td>
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</table>

#### RFE at HT encounters (a) (n=3502, 189.5/100)

- Prescription – all: 49.6
- Hormone therapy: 17.3
- Menopausal symptom/complaint: 6.8
- Hot flushes: 6.4
- Cardiac check up: 5.7
- Test results: 5.6
- Genital check up: 5.5
- Immunisation – all: 3.9
- General check up: 3.1
- Other contraception: 2.8

#### Imaging (b) (n=92, 4.7/100)

- Mammography: 2.2
- Bone mineral density: 1.9
- Pelvic ultrasound: 0.4

#### Pathology (b) (n=208, 10.7/100)

- Hormone assay: 1.7
- Lipids: 1.5
- Thyroid function: 1.2
- Full blood count: 1.2
- Glucose: 1.0
- Pap test: 1.0

#### Figures and Notes:

(a) Expressed as rates per 100 encounters at which women patients aged over 40 years were prescribed/supplied with HT (n=1848)

(b) Expressed as rates per 100 problem for women patients aged over 40 years in 2002–2004 (n=116 768)

* Only medications that are prescribed or supplied by the GP are included
+ Calculations are based on medications prescribed/supplied for women patients aged over 40 years in 2002–2004 (n=76 038)
³ Calculations are based on all encounters with women patients aged over 40 years in 2002–2004 (n=69 726)
† Calculations are based on problems managed at encounters with women patients aged over 40 years in 2002–2004 (n=1940)
§ PDD calculated only for prescribed medications with complete regimen information

Note: RFE = reasons for encounter, HT = hormone therapy, PDD = prescribed daily dose

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