

## Hot Flash Symptom Management

### Hot flashes

Hot flashes normally occur in women who are in the early stages of menopause. Men and women who have had certain types of cancer treatment may have hot flashes. Treatments include surgery, chemotherapy, radiation or hormone therapy.

Examples include:

- Pre-menopausal women whose ovaries have been removed
- Pre-menopausal women treated with chemotherapy or radiation
- Breast cancer patients on hormone therapy
- Prostate cancer patients on hormone therapy Ask for the patient information sheet "Menopause."

### Causes

A part of the brain, called the hypothalamus, controls appetite, sleep cycles, sex hormones and body temperature. When it senses the body is too hot, the brain tells the body to cool. The heart beats faster, blood vessels in the skin dilate (open up) and sweat glands release sweat.

When estrogen (hormone) levels change during menopause or cancer treatment, the hypothalamus may send and receive incorrect signals. This may cause flushing (hot flashes).

### Length

Each person responds differently to hot flashes. This relates to when they start, how long they last, how often and the nature.

Women may have hot flashes for several months up to years. Most women can bear them after a year. In some cases, medical attention is needed.

Medicines, such as tamoxifen (Novaldex®), raloxifene (Evista®) and aromatase inhibitors can increase the number and intensity of hot flashes. However, how often hot flashes occur may decrease after the first few months of use.

### Treatment

Lifestyle changes are a safe and effective way to manage hot flashes. These suggestions can help.

Avoid:

- Smoking
- Alcohol
- Caffeine
- Spicy or hot food

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- Diet pills
- Hot tubs
- Saunas
- Hot showers and baths
- Stressful situations

Research studies have shown that women who smoke tend to have more severe hot flashes than those who do not.

If you cannot avoid stressful situations, try to reduce the impact on your body. Try to manage stress with: meditation, breathing exercises and regular exercise. Research studies have shown that women who exercise have more stable hormone levels. This helps prevent hot flashes.

## **Wear:**

- Layers for easy removal when you get too warm
- Cotton or other lightweight/breathable fabrics
- Open-neck shirts

## **At bedtime:**

- Use cotton sheets (not synthetic fabrics)
- Take a cool shower before bed
- Wear cotton pajamas
- Keep a glass of ice water near the bed
- Lower the thermostat and/or use a fan
- Use a thick mattress pad if you have a supportive foam mattress (such as Tempurpedic®)

## **Medicines**

**Hormone Therapy (HT)** – HT is the use of prescription estrogen, progesterone and less commonly, testosterone. The purpose of HT is to use the least amount of hormones possible to reduce symptoms. It is not meant to replace hormones. Women who have had a hysterectomy (removal of the uterus) are often prescribed estrogen. Women who still have their uterus may be prescribed both progesterone and estrogen.

There are risks with taking hormone therapy. They include stroke, heart disease, blood clots and increased risk of breast and uterine cancer.

**Antidepressants** – Medicines such as venlafaxine HCl (Effexor XR®, Cymbalta®), paroxetine HCl (Paxil®) and fluoxetine (Prozac®) may also be prescribed. They help balance the brain's response to the hot flash alarm, moodiness and irritability. Women on tamoxifen (Nolvadex®) should talk with their doctor before taking antidepressants to manage hot flashes. Some may stop tamoxifen from working.

Possible side effects:

- Dry mouth
- Nausea (try taking with food)
- Loss of appetite
- Insomnia and daytime sleepiness
- Nervousness
- Inability to reach orgasm
- Headache

Side effects last a few weeks but may last longer. If you cannot tolerate these side effects or if others occur, tell your health care team.

**Anticonvulsants** – Neurontin (Gabapentin®) is used for seizure control and nerve related pain. In low doses, it can be used to help hot flash symptoms.

Other side effects may include:

- Dizziness
- Loss of balance
- Swelling
- Sleepiness and fatigue

If you have any of these side effects, tell your health care team.

**Blood pressure medicines** – Clonidine hydrochloride changes the blood vessel response to the brain's command to give off heat. It may cause low blood pressure. It is important to have your blood pressure monitored once treatment begins.

***Do not mix prescribed medicines with alcohol.***

### **Over-the-Counter Supplements**

Not all plant estrogens or “natural” supplements are safe. Some should not be used with certain prescription medicines.

Anyone with a hormone based cancer, such as estrogen receptor positive (ER+) breast cancer, should talk with their health care team before using supplements.

Vitamin B-complex is another common supplement used to treat hot flashes. If you use this, check the product label. It should read 100% of the daily value.

# Patient Education



## Resources

### **American College of Obstetricians and Gynecologists (ACOG)**

202-638-5577

[www.acog.org](http://www.acog.org)

### **National Cancer Institute (NCI) Cancer Information Service (CIS)**

800-4-CANCER (800-422-6237)

<http://cis.nci.nih.gov>

### **North American Menopause Society**

404-442-7550

[www.menopause.org](http://www.menopause.org)

### **Planned Parenthood Federation of America, Inc.**

800-230-PLAN (800-230-7526)

[www.plannedparenthood.org](http://www.plannedparenthood.org)

### **The National Heart, Lung, and Blood Institute (NHLBI) Information Center**

301-592-8573

[www.nhlbi.nih.gov](http://www.nhlbi.nih.gov)

### **The National Institute on Aging (NIA)**

800-222-2225

[www.nia.nih.gov](http://www.nia.nih.gov)

### **U.S. Department of Health and Human Services Office of Women's Health**

<http://www.4women.gov/menopause/>

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