

Hormone replacement therapy

Medical options

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NICE Treatment Guidelines

- Vasomotor symptoms: choice of **HRT preparations**
 - Psychological symptoms: **consider HRT** alleviate low mood
 - CBT for anxiety/low mood not SSRI as result of menopause
 - Libido **use testosterone** if HRT unsuccessful
 - Urogenital atrophy: **Vaginal estrogens**
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- Do not offer SSRI/SNRI for vasomotor symptoms alone
 - Isoflavones and black cohosh may relieve symptoms, however safety is uncertain and preparations may vary

This is 90% of my (systemic) prescribing

	Sequential	Continuous
Oral	Femoston 1/10 or 2/10 <u>DYDROGESTERONE</u>	Femconti
Patch	Evorel Sequi	Evorel Conti
Transdermal * + Mirena	Estrogel (up to 4 pumps per day) Estradiol Patch from 25ug to 100ug	
Transdermal* + Oral Progesterone	Utrogestan 200mg first 14 days of calendar month	Utrogestan 100mg every day
Testosterone	Tostran 2 pumps per week	

*Gel or Patch

Prescribing helping

British Menopause Society

<https://thebms.org.uk/wp-content/uploads/2018/08/HRT-Practical-Prescribing-AUG2018.pdf>

Routes of therapy	
Oral	> Tablets (estrogen only or combined)
Transdermal	> Patches (estrogen only or combined) / gels (estrogen only)
Sub-cutaneous	> Implants (estrogen only)
Vaginal	> Ring / tablets / creams (all estrogen only)
Intrauterine	> IUS (progestogen only)

Estradiol – equivalent doses				
	Ultra low	Low	Medium	High
Oral	0.5mg	1.0mg	2.0mg	3.0mg
Patch	Half 25	25	50	75-100
Gel-pump	½ pump	1 pump	2 pumps	3-4 pumps
Gel-sachet	½ x 0.5mg sachet - 0.25mg	0.5mg	1mg	1.5-2mg

Mylan

<https://navigator.mywayhub.co.uk/>

References

Prescribing Information

Individual Women,
Individual HRT

A combined portfolio of HRT
treatment options

Mylan's HRT Treatment Navigator

An individual menopausal woman, needs an individual HRT treatment.

For women with an indication for HRT, this tool will help you tailor individual therapy, from Mylan's broad range of treatment options, to suit the individual patient.

Watch a [video here](#) to see how it works.

START NAVIGATOR

VIEW HRT RANGE AND
STOCK AVAILABILITY

West Midlands Menopause Society

<https://www.menopausesociety.co.uk/hrt-guidance/>

Estrogens

There are 3 types of natural estrogen

Estrone (E1) Menopause

Estradiol (E2) Reproductive

Estriol (E3) Estestrol (E4) Pregnancy

There are 3 types of prescribable estrogens in HRT

Estradiol (oral (prodrug)/ transdermal)

Estrone (PV)

Conjugated estrogens (oral)

Estrogens

..... conjugated equine estrogens and 17 beta estradiol have significant differences.....

Estrogens

.....the risk of VTE associated with HRT is greater for oral than transdermal preparations

the risk associated with transdermal HRT given at standard therapeutic doses is no greater than baseline population risk.....

Estradiol transdermal

Progestins

There are 7 types of progestins prescriptible in HRT

Stand Alone

Micronized progesterone

oral – Utrogestan

PR/PV- Cyclogest

Medroxyprogesterone Acetate (Provera)

Norethisterone

Combined

Dydrogesterone

Drospirenone

Norgestrel

Levonorgestrel

<https://www.endocrine-abstracts.org/ea/0059/ea0059cmw4.1>

Progestins

....many progestogenic compounds also

- bind to the glucocorticoid, mineralocorticoid and androgen receptors
- unfavourable glucose metabolism, fluid retention, acne, weight gain*

Stand Alone

Medroxyprogesterone Acetate (Provera)

Norethisterone

Combined

Drospirenone

Norgestrel

Levonorgestrel

Progestins

...Natural progesterone and dydrogesterone do not attenuate the beneficial effects of estradiol in reducing insulin resistance and arterial compliance...neutral affect on breast tissue

Stand Alone

Micronized progesterone

oral – Utrogestan

PR/PV- Cyclogest

Combined

Dydrogesterone

Bio-identical hormones

“Bio-identical NHS is available on the NHS”

- Transdermal Estrogen
- Micronised Progesterone

Probably safer

Quality controlled

Traceable contents

Identifiable laboratories

