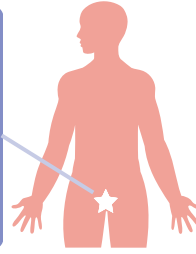


INFORMATION FOR PATIENTS

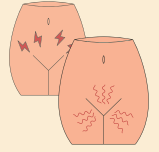
LOCAL HORMONE THERAPY BASICS

Local Hormone Therapy

Refers to hormone treatment, **typically estrogen**, used directly in the vagina, for relief of common symptoms related to genitourinary syndrome of menopause (GSM)



GSM is a condition that can include symptoms such as vaginal dryness, irritation and burning



Q: What are different ways local hormone therapy can be given?

Local hormone therapy comes in a **vaginal ring** (e.g., *Estring*), **tablet** (e.g., *Vagifem*) or **cream** (e.g., *Premarin*, *Estragyn*).

Vaginal Ring

A form of estrogen called 17β estradiol, also known by the trade name as ***Estring***.



- It has the **least amount of estrogen**
- It is placed in the vagina for 3 months and subsequently changed for a new ring
- This is typically done by the patient but it can also be carried out in the office setting by a physician.

Vaginal Tablet

17β estradiol vaginal tablets (e.g., ***Vagifem***) are typically inserted into the vagina every night for two weeks (priming period) then twice per week thereafter.



- Each tablet comes individually wrapped with its own applicator.

Prasterone (DHEA) vaginal tablets (e.g., ***Intrarosa***) are inserted into the vagina every night.

- Each box comes with a single applicator.
- Place the medicine in the applicator each night before use.

Vaginal Cream

Available in Canada as conjugated estrogen cream (e.g., ***Premarin***) or estrone cream (e.g., ***Estragyn***)



- Doses will vary but typically people use ¼ applicator twice per week
- Your doctor may recommend a **priming period** before this
- The cream can be squeezed into the applicator tube and inserted into the vagina with the plunger used to dispense the medication

Prasterone (e.g., ***Intrarosa***), also known as DHEA, is a vaginal insert that converts to androgen and estrogen in the vaginal tissues.

Local hormone therapy is typically safe for long-term use. This is different than systemic hormone therapy where risks increase as someone ages.

Q: Do I need to use progesterone if I am using a local estrogen therapy?

With typical dosing of these local estrogen products, most doctors **do not prescribe** a progesterone because the amount of estrogen absorbed into the blood is not typically high enough to stimulate the lining of the uterus.

This is different from “whole body” or systemic estrogen use that does typically require a progesterone in people who still have a uterus.



Side effects are uncommon but can include vaginal discharge.

Occasionally, people report headache, breast pain, vaginal bleeding or nausea.

If you have unexpected vaginal bleeding, discuss this with your doctor.

Q: Who should NOT use local hormone therapy?

These medications should not be used by people who are/have:



Pregnant



Unexplained vaginal bleeding



Active breast cancer

It is also not typically used by those who have an **active blood clot** or people with untreated **endometrial precancer or cancer cells**.



Local estrogen should not be used as first-line therapy for people with certain conditions such as a history of breast cancer.



Ensure your doctor is aware of your past medical history before starting any of these medications

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LOCAL HORMONE THERAPIES AVAILABLE IN CANADA

Estring (17 β Estradiol Vaginal Ring)



Typical Use

- Ring inserted into the vagina and changed every 3 months by the patient or by a physician in the clinic setting.

Other Considerations

- Lowest dose of vaginal estrogen

Most Common Side Effects

- Foreign body sensation felt by user

Vagifem (17 β Estradiol Vaginal Tablet)



Typical Use

- 10mcg tablet
- One tablet inserted using the applicator every night for 2 weeks then twice per week thereafter

Other Considerations

- Most packaging of all the options as each tablet comes with its own applicator

Most Common Side Effects

- Nausea and breast tenderness, although very uncommon

Premarin (Conjugated Estrogen Vaginal Cream)



Typical Use

- 0.625mg per gram of vaginal cream
- 0.5g of cream (1/4 applicator) inserted vaginally for 14 days then 0.5g inserted 2-3 times per week
- Different regimens available – *speaking to your doctor*

Other Considerations

- Refillable applicator included with each tube
- Lilac scent

Most Common Side Effects

- Nausea and breast tenderness, although uncommon
- Discharge associated with use of any vaginal cream

Estragyn 0.1% (Estrone Vaginal Cream)



Typical Use

- 1mg estrone per gram of vaginal cream
- 0.5 g of cream applied using the applicator two nights per week
- Different regimens available – *speaking to your doctor*

Other Considerations

- Refillable applicator included with each tube
- Unscented

Most Common Side Effects

- Nausea and breast tenderness, although uncommon
- Discharge associated with use of any vaginal cream

Intrarosa (DHEA Vaginal Tablet)



Typical Use

- 6.5mg tablet
- One table inserted vaginally daily at bedtime

Other Considerations

- Approved for use in Canada in 2022 for treatment of moderate-to-severe pain with intercourse
- Individually wrapped vaginal inserts applied using reusable applicator included with each box

Most Common Side Effects

- Vaginal discharge

Q: Are there any oral pills that can treat GSM?

Yes, ospemifene (i.e., **Osphena**) is available in tablet form. It is a **Selective Estrogen Receptor Modulator (SERM)**. It acts like an estrogen in some parts of the body but an anti-estrogen in other parts.



- In the case of ospemifene, estrogen receptors in the **vaginal tissues and bones are stimulated** but not those in the breast or uterus.
- It is taken daily and can be a good option for people who find it difficult to insert anything into the vagina.
- **Side effects** can include hot flashes, night sweats and vaginal bleeding. Some people cannot take this medication. Make sure your doctor is aware of your medical history.

Reference: Guideline no. 422b: Menopause and Genitourinary Health. Johnston S, Bouchard C, Fortier M, Wolfman W. J Obstet Gynaecol Can. 2021 Nov 1;43(11):1301-7. doi: /10.1016/j.jogc.2021.09.001. Epub 2021 Sept 8.

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