

Estrogen in patches, gels or sprays

What is the difference?

Estrogen is the main hormone in hormone replacement therapy (HRT). Lack of estrogen is usually the cause of most perimenopausal and menopausal symptoms. The estrogen in HRT can be given as a tablet, patch, gel or spray. When you receive estrogen through the skin it is known as transdermal estrogen and it is body identical. When estrogen is given separately to any other hormones you may need, the dose can be more easily adjusted.

How are the patches used?

The patches are usually changed twice a week – for example, if you put one on a Monday then you change it on a Thursday.

They should be stuck onto the skin below your waist. Most women stick them to the skin on their bottom or upper outer thigh.

The patches usually stick on well and stay in place in the shower, bath or when exercising. A plaster mark sometimes occurs when they are removed. Using baby oil or eye make-up remover and a dry flannel is usually effective at removing these marks.

How is the gel used?

The estrogen gel usually comes in a pump-action bottle called a 'pump pack' (it also comes in small sachets of gel). The gel should be applied to the outer part of your arm from your shoulder to your elbow and to your inner thigh. It can also be rubbed on other sites of your body (although not advisable on your breasts). Despite what the leaflet insert says, it is preferable to rub the gel into the skin as this aids absorption.

Your clinician will recommend how many pumps of the gel or number of sachets you need to use. Some women use the gel in the morning, others in the evening and some women use it in both the morning and evening.

Most women use between two and four pumps of gel (or one or two sachets of gel) each day, but the actual amount varies from person to person. Generally, younger women need more estrogen than older women.

The gel usually gets absorbed into your body very easily. You should avoid using other products on your skin for an up to an hour after you have rubbed in the gel and ensure you wash your hands well after applying it.

How is the spray used?

The spray should be applied to clean, dry, healthy skin of the inner forearm, in areas that do not overlap. If that is not possible, it should be applied on the inner thigh. Absorption is lower if you apply it

to your abdomen, and it should not be applied to the breasts. Your clinician will recommend how many sprays to use and how often.

The most common dose for Lenzetto is between one and three sprays a day, however, absorption of the spray can be unreliable or inconsistent so it can be common to need higher doses of the spray. It is also common for younger women to need higher doses of Lenzetto and this is safe.

You can get dressed 2 minutes after applying the spray but leave 60 minutes before bathing or washing. There is usually no need to rub the spray in.

What are the advantages of estrogen as a patch, gel or spray?

Benefits of estrogen through the skin are:

- The estrogen is absorbed straight into your body and does not have to be digested.
- There is no increased risk of clot or stroke using transdermal estrogen. Taking synthetic estrogen as a tablet leads to the liver clotting factors being activated, so there is a small increased risk of clot and stroke in women who take synthetic estrogen in tablet form. (Bijuve® is a tablet containing body identical combined HRT and has not been shown to increase the risk of clot or stroke).
- Transdermal estrogen can be used by women with migraines. Migraines can often become more severe and more frequent in the perimenopause and menopause – HRT usually improves migraine symptoms. As there is a small increased risk of stroke in some women who have migraine, it is safer and advisable to take estrogen as a patch, gel or spray.
- Transdermal estrogen does not worsen libido. Taking estrogen as a tablet, however, can increase levels of Sex Hormone Binding Globulin (SHBG) which binds to testosterone – this effect can result in a lower libido. Taking estrogen as a patch, gel or spray does not have this effect.
- The dose of transdermal estrogen can be changed easily. It is very common that younger women need to have higher doses of estrogen than older women. In addition, many women find that their estrogen requirements change with time. It is very easy to either adjust the strength of the patch, or the amount of gel or spray used.

If you still have your uterus (womb), you will also need to take progesterone or a progestogen to protect the lining of your womb, as taking estrogen by itself can thicken the lining of the womb and increase the risk of uterine cancer. Progesterone reverses this effect and risk. Micronised progesterone is the safest form of progesterone and comes in a capsule form that you swallow. Progesterone can also be given in the form of a Mirena inserted into the womb (uterus). This can be beneficial to those women who also need contraception.

Increasing the dose of your estrogen does not usually mean that you need to change the dose of your progesterone. You may be advised to increase the dose of your progesterone if you experience any bleeding while taking HRT.

Note: There are many different preparations of HRT and if one type does not suit you it is very likely that another type will suit you.

