

# USE OF VAGINAL ESTROGEN IN WOMEN WITH PELVIC FLOOR DISORDERS

## Patient Fact Sheet

### Introduction

Estrogen is a normal human hormone. Estrogen levels fall quickly after menopause. In some younger women, they fall earlier because of certain health conditions, medicines, or treatments. Low levels of estrogen can cause uncomfortable problems, like hot flashes, vaginal dryness, or pain with sexual relations. Low levels can also cause more serious problems, like bone thinning (osteoporosis). Some women are prescribed added estrogen as treatment for these kinds of problems. Because estrogen use causes a small increase in the risk of blood clots or cancer of the breast or uterus, use of estrogen should always be carefully considered.

### Why Use Estrogen Vaginal Cream as a Treatment?

When estrogen levels fall, the vagina and genital skin (the area between the legs), begins to thin. It also becomes drier as the blood supply decreases. Support muscles weaken. We call these changes atrophy. Atrophy can increase problems like pain with sexual intercourse; urine urgency (a sudden, frequent need to pass urine), burning, or bladder infection; incontinence (leaking urine or feces); and prolapse (dropping of the bladder, uterus, and/or bowel). Atrophy can also make it harder to heal if surgery is needed. And for women who use a support pessary, atrophic vaginal tissue is more likely to be injured by pressure from the pessary.

Vaginal atrophy is caused by lack of estrogen, and vaginal estrogen can be an important part of care. Low doses of vaginal estrogen can help improve comfort, control, and healing.

### What Do Experts Say About The Safety Of Vaginal Estrogen?

Recent reports of small increases in rates of breast cancer, heart attack, or stroke in women using estrogen as a pill by mouth have worried many women. It is important to know that estrogen used vaginally in small amounts is different.

For many years, vaginal estrogen has been approved by the U.S. Food and Drug Administration to treat problems like discomfort with sex or urination, if they are caused by atrophy. In 2010, both the North American Menopause Society and the Endocrine Society looked again at all the studies available, and agreed that low dose vaginal estrogen is safe for most women, and lessens sexual discomfort, urge-related urine loss, and urinary tract infections, without increasing the risk of uterine cancer. Although levels of estrogen in the blood may go up slightly with most vaginal estrogen use, levels stay much lower than those in women taking pills by mouth or having menstrual periods. This means a woman's risk of blood clots, breast or uterine cancer is about the same whether she uses low dose vaginal estrogen or not.

For a woman who has already had breast cancer, her own oncologist (cancer doctor) is probably the best person to advise her about whether vaginal estrogen use is safe for her.

### What Are Other Choices If Vaginal Estrogen Is Not Used?

If a woman can't or doesn't want to use vaginal estrogen, there are other choices to treat problems due to atrophy. For example, vaginal moisturizers or lubricants may help sexual discomfort. Repeated urinary tract infections may be helped with antibiotics and cranberry products. If a pessary causes vaginal sores, the pessary can be left out until the sores heal. It is not yet known whether or exactly how much vaginal estrogen might help with things like healing after surgery. None of these other treatments actually treats the atrophy itself.

### Who Should Not Use Vaginal Estrogen?

Generally, women who are pregnant, have bleeding from the vagina for an unknown reason, or have a history of breast cancer, severe heart disease, stroke, or blood clots are advised to be especially careful about estrogen use. If you have any of these added health problems, it is often best to talk to all your providers before you decide what to do.

### How Do You Use Vaginal Estrogen?

There are 3 choices, two are placed in the vagina at bedtime, and one is used all the time:

- 1. Cream:** There are two brands, Estrace™ and Premarin™. With creams, you measure the dose into an applicator to insert in your vagina at bedtime. Sometimes we also ask you to apply cream to the outside skin using your finger. Creams absorb easily, giving you the quickest comfort if you feel dry. However, creams are easier to over-use, and the easy absorption means higher blood levels compared to other choices. Creams are often used nightly to start and then used less often as atrophy lessens. They usually cost the least.
- 2. Tablets:** A vaginal pill (Vagifem™) is also typically used every night for 2 weeks and then twice a week. Each pill may have its own plastic throw-away inserter. Pills absorb more slowly, and very little estrogen goes into your blood stream. Some women say pills are less messy, but others say the pill falls out if it is not placed deep in the vagina or if the vagina bulges (prolapse).
- 3. Ring:** Another choice is a ring (Estring™) that is placed in the vagina and slowly releases vaginal estrogen over 3 months. This provides a steady, very low level of estrogen. You can insert and remove the ring yourself, or your health care

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provider can do this for you at an office visit. If you have an untreated bulge or weak vaginal muscles, the ring may not stay in place.

**How Long should Vaginal Estrogen Be Used?**

Most vaginal estrogen studies to date have only followed women for 1 year, so we only know they are low risk for that period of time. However, many post-menopausal women use these low dose medications for many years. Some other women choose to use them for a few months at a time or whenever they have symptoms.

**WHAT WOULD BE A GOOD CHOICE FOR YOU?**

TYPE: \_\_\_\_\_

HOW TO USE IT: \_\_\_\_\_

HOW LONG TO USE IT: \_\_\_\_\_

*Please discuss any questions you have  
with your health care provider.*