

Progesterone as part of HRT

It's vital that you have progesterone with your estrogen as part of your HRT to stop your uterus lining (endometrium) becoming over thickened which can lead to endometrial cancer.

In the UK you will be able to use the following progesterone options:

Utrogestan

Prometrium

Mirena coil

Provera

The combined patch

You may be offered Lutigest or Cyclogest which is actually a vaginal progesterone used for fertility treatment. It is still acceptable and Lutigest is popular with vegans as it is a vegan product.

***The contraceptive pill is not an acceptable level of protection**

(If you have had a hysterectomy, you do not require progesterone for uterus health but may need it for other reasons)

In non-UK countries, the above are often still available but some types are more favoured than others and Prometrium is a popular option.

Still having periods?
What dose do you need?

**In many cases it is appropriate to have a continuous regime of progesterone even when still peri menopausal and therefore having periods; such as for contraception (mirena coil) or to control heavy bleeding or mood issues, but in general you will start on a sequential regime (see below)*

200mg (2 tablets) taken orally for only 12-14 days of the month.
Start them 15 days after you have started taking estrogen.
(This is known as sequential)

Periods stopped?
What dose do you need?

100mg (1 tablet) taken orally every day
(This is known as continuous)

It is usual to take the Utrogestan or Prometrium tablets at night as they can make you sleepy

You may have erratic bleeds for a few months with either of the above regimes, but this will settle.

Vaginal use:

If you experience very low mood, bloating or feel poorly when taking Utrogestan orally (progesterone intolerance), you may consider vaginal use. (These side effects do however wear off for most women)

It is accepted by many menopause experts, that although not licensed to take vaginally, it is perfectly safe and effective to do so. Many experts are advocates of halving the dose when taken vaginally as it is placed where it needs to be, but others prefer a more 'belt and braces' approach so will suggest the same dose both orally and vaginally.

In October 2021 key clinicians stated that Utrogestan used vaginally can be halved, as the usual reason for vaginal use is intolerance to oral Utrogestan.

However, if you are choosing to use the Utrogestan vaginally for other reasons, not related to an intolerance then then it is better to stick to the same dose as taking orally.

Combined patches when you're still having periods?

You will usually start on the most commonly used combined patch called EVOREL SEQUI

This box of patches contains 2 types of patches which need to be used in the correct order as half of them contain estrogen only and the other half contain both estrogen and progesterone.

The instructions are on the box but essentially you start with 2 weeks of EVOREL 50 (Estrogen only) patches followed by 2 weeks of EVOREL CONTI (Estrogen & Progesterone) patches.

You will have a bleed (once you are settled) during the EVOREL 50 weeks.

Combined patches when you're periods have stopped

Unlike the above example you will most likely have the combined patches called EVOREL CONTI where all the patches are the same and contain both Estrogen and Progesterone

You may have erratic bleeds for a few months with either of the above regimes, but this will settle.

TIP!

You are unique and need to find the right approach for you but not taking progesterone is not an option if you have your uterus.

If you are struggling there's always a way

