

What Progesterone dose do I need with my estrogen dose.

This is probably one of the most often asked questions in our menopause community and it is not going to be fully answered in this short guide as each HRT regime is individual and the dose will depend entirely on individual needs and health history.

Combined patches estrogen increases:

The first and main query is around increasing the progesterone dose when we increase our estrogen whilst on combined patches so, as always I am going to try to offer you a balanced and simple view on this quandary (bearing in mind that there is rarely only one view of best practice so I aim to give a balanced view based on experience, research and good old logic)

So here it is:

The combined HRT patches (Evorel Sequi and Evorel Conti) are all 50mcg of estrogen.

The maximum 'licensed' dose of estrogen is 100mcg. Increasing whilst on a combined patch is a bit awkward as the progesterone is set in the patch specifically for the 50mcg dose.



Sequential combined patches only have progesterone for 2 weeks of the month so although many menopause specialist doctors are more than happy to allow the increase up to 100mcg (adding another patch or an equivalent), which is often prescribed very effectively; there are many who prefer the approach of changing the HRT regime to separate estrogen only patches alongside another progesterone option.

There is evidence of both being good options but we prefer the second approach, and our job is to inform you and to give you options.

If you are hoping to increase the estrogen dose of an Evorel Conti patch then this is not quite the same.

Sequi offers 11.2 mg of a progesterone for only 2 weeks a month

Conti offers the same 11.2mg but all patches are the same, so this dose is every day of the month.

For this reason, logic dictates that increasing a Conti patch has a better protection profile than sequi but the same comments still apply to the general approach.



It is good practice to increase your Utrogestan, Prometrium or Provera dose if you take above the maximum estrogen dose as this ensures uterus protection.

The Mirena coil is considered very effective due to its placement and continuous dose so unless you are on very high doses of estrogen a small increase above maximum is not considered to be an issue.

Overall it is best to increase progesterone when going over the maximum licensed dose of estrogen as we do not have enough evidence of uterus safety at the higher estrogen doses, but do speak to your menopause specialist as always before increasing your estrogen.