

1040 N.W. 22nd Avenue ~ Suite 330 ~ Portland, OR 97210 Phone 503 274-9936 ~ Fax 503 274-2660 www.CascadeWomensHealth.org

MANAGING VAGINAL DRYNESS

As women approach and enter the menopause, vaginal dryness is a common concern. This can make sexual activity less comfortable and even painful. Often this is the only menopausal symptom that requires treatment. Luckily there are many options for treatment and most women can expect to be able to resume comfortable sexual activity.

- Nonhormonal lubrication --Astroglide, KY jelly or saliva can be used at the time
 of intercourse. Replens can be used every two days to add moisture to the
 vaginal cells. These have no hormone base and almost no side effects.
- Vagifem tablets –These are low dose estrogen tablets for the vagina. They have ultra low systemic absorption and can be used for women with a history of breast cancer if the oncologist approves. They are usually used nightly for two weeks and then twice a week at bedtime thereafter.
- Vaginal estrogen creams –There is more systemic absorption with these than
 the Vagifem. However, they can be used on outside vulvar areas where dryness
 is a problem or inserted into the vagina in individualized titrations of dose. Some
 women find estrogen cream messy to use. Depending on the dosage of cream,
 you may need to take progesterone to protect your uterus from the elevated risk
 of endometrial hyperplasia and cancer caused by systemic estrogen.
- Vaginal rings –These rings, designed to stay in the vagina for three months, slowly release small amounts of estrogen. There is likely to be some systemic absorption and probably some bone protection. The woman who uses a ring needs to take progesterone if she has a uterus.
- Estrogen patches, skin gels and oral estrogen preparations —These medications are generally used only for the woman who needs other menopausal symptoms controlled (i.e. hot flashes). Again with a uterus in place they require progesterone opposition.