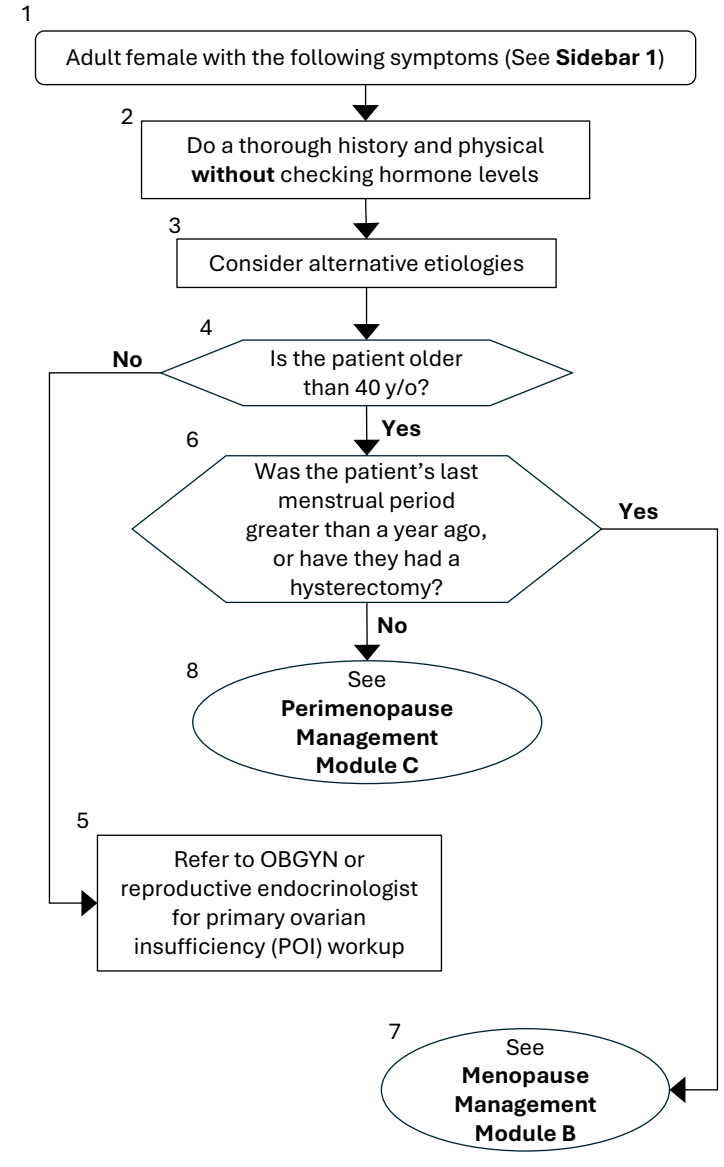
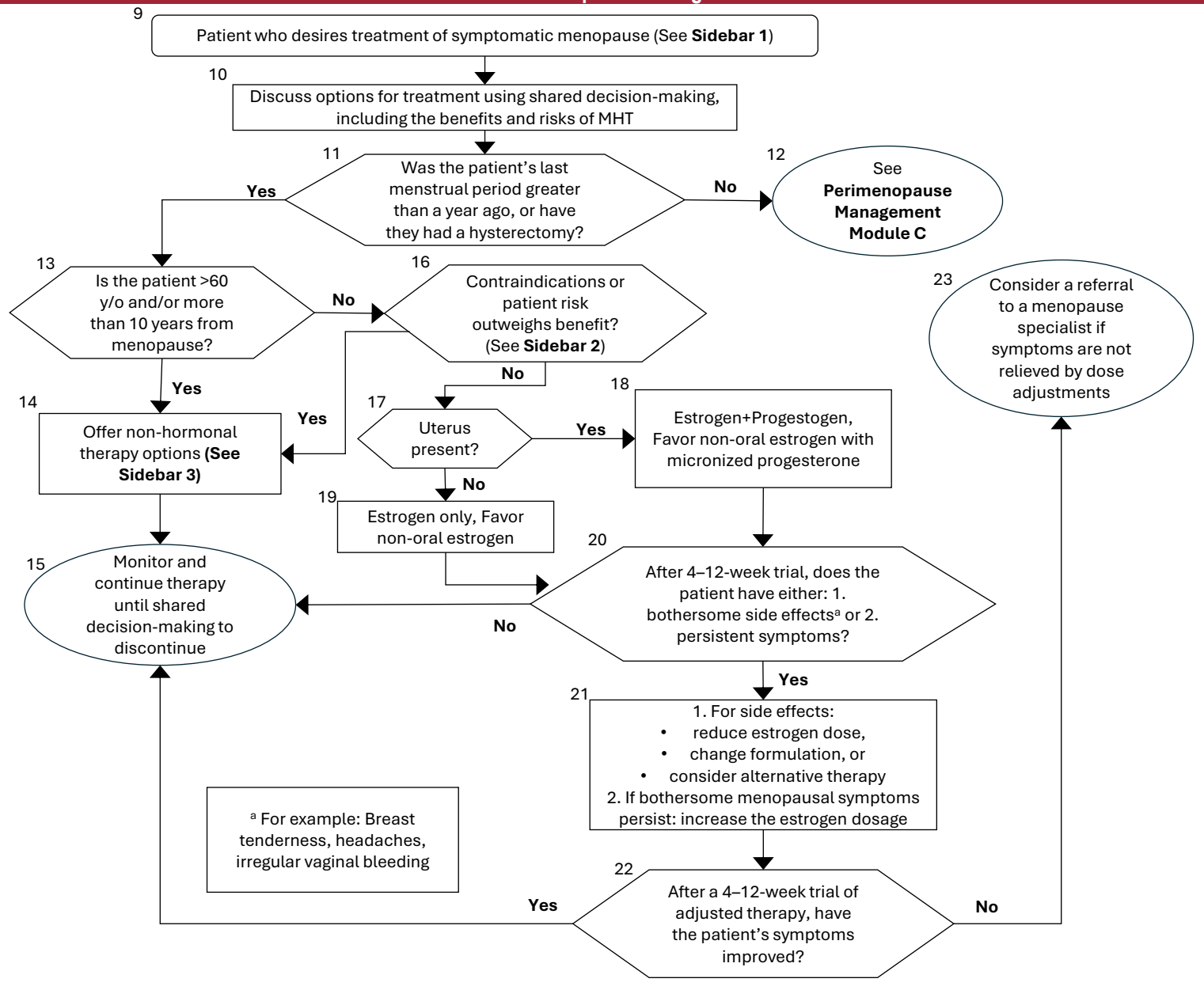
Menopause

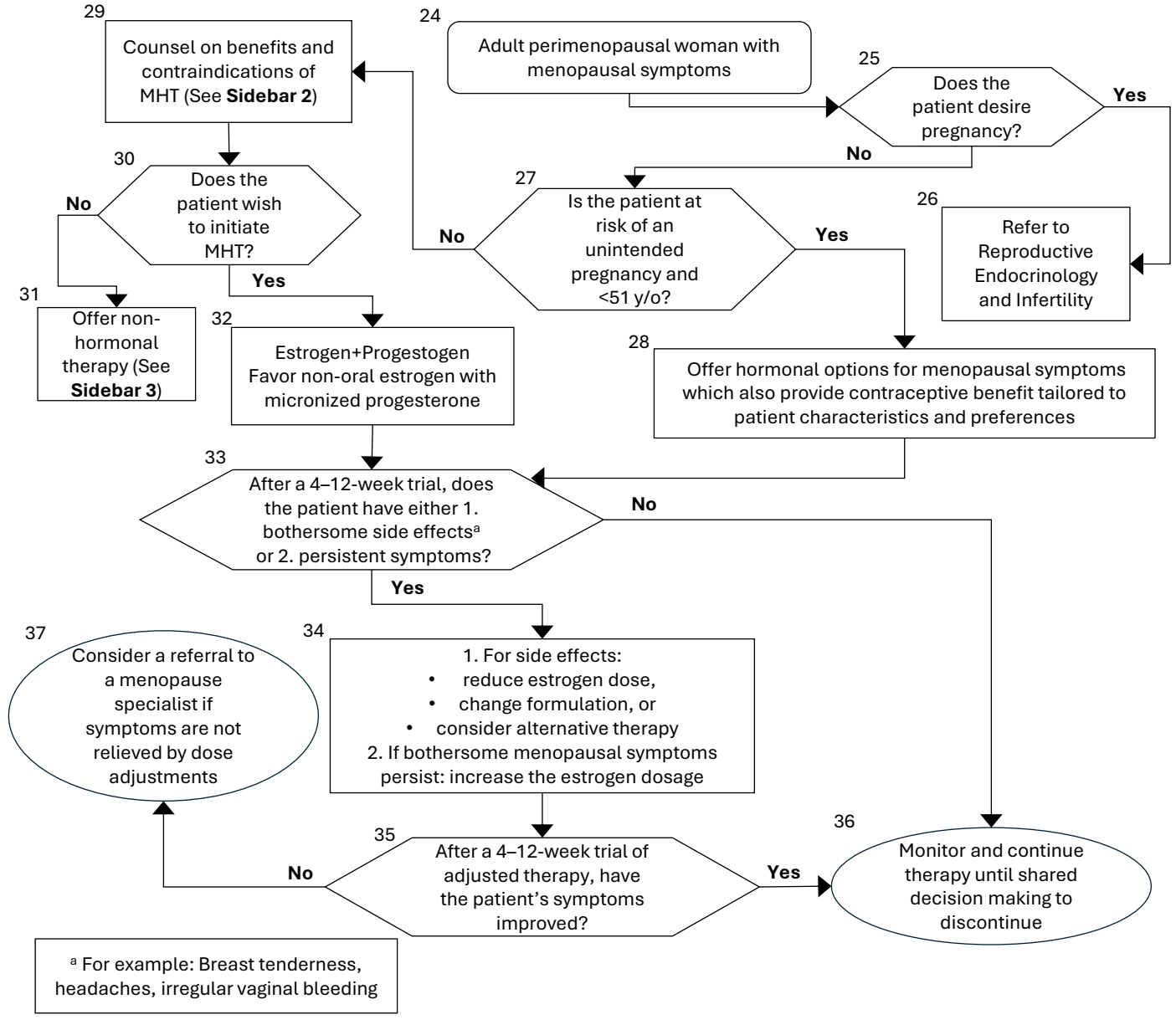
Module A: Perimenopause and Menopause Diagnosis



Module B: Menopause Management



Module C: Perimenopause Management



[a] For example: Breast tenderness, headaches, irregular vaginal bleeding

Sidebar 2: Contraindications to Systemic Menopausal Estrogen Therapy

Absolute Contraindications:

- Active or recent arterial thromboembolic disease (e.g., stroke and MI)
- Active or recent DVT or PE
- Active or severe hepatic impairment or disease
- Known CVD and age > 60 years old and/or >10 years after menopause onset
- Breast cancer or history of breast cancer, except in appropriately selected patients being treated for metastatic diseases
- Estrogen-dependent neoplasia
- Known anaphylactic reaction or angioedema related to estrogen use
- Known or suspected pregnancy
- Protein C, protein S, or antithrombin deficiency, or other known thrombophilic disorders
- Undiagnosed abnormal genital bleeding

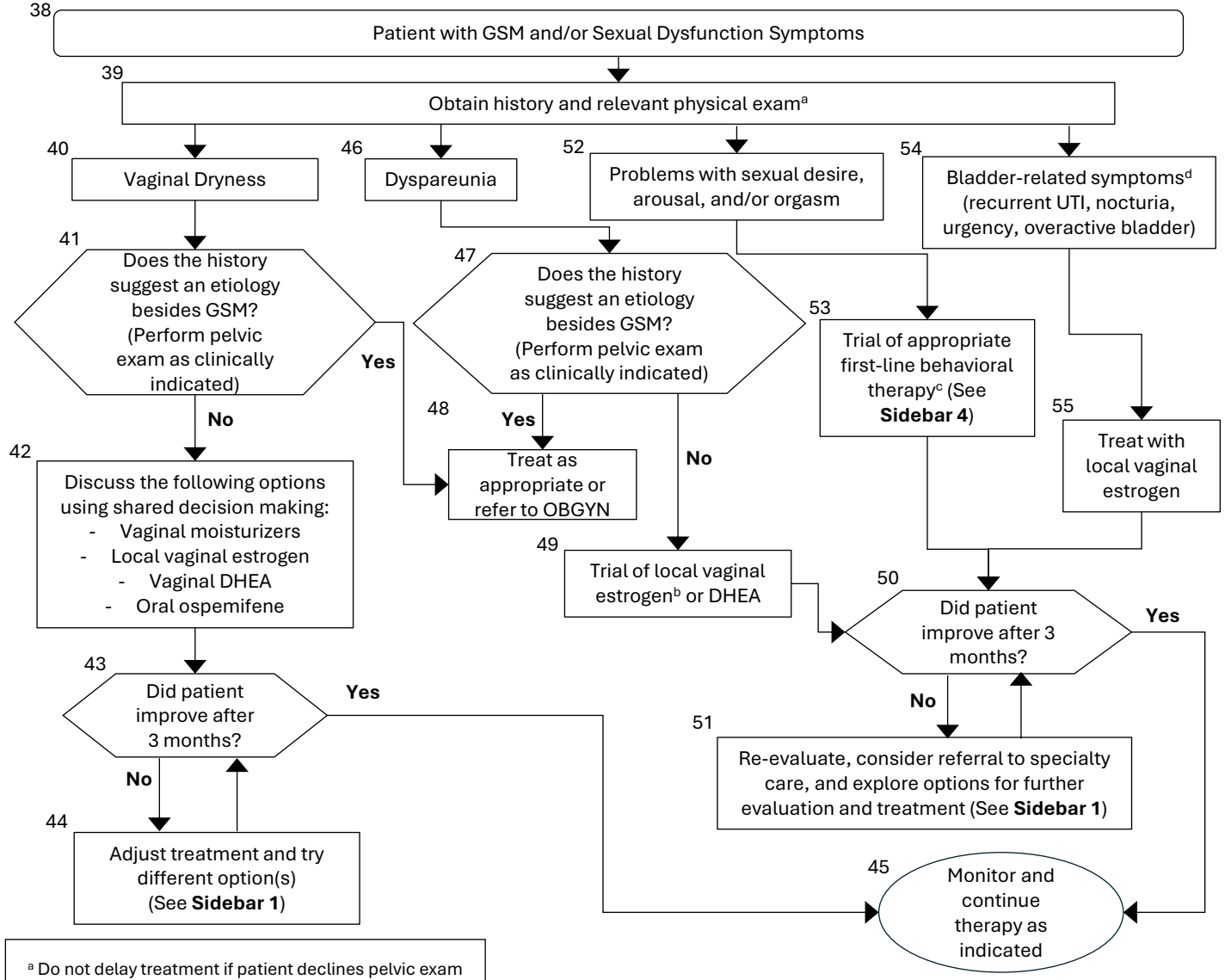
Exercise caution for:

- Patients at risk of CVD, and utilize validated cardiovascular risk calculator (PREVENT[a], ASCVD, and/or VA Women CVD Risk Score[b])
- Patients on thyroid replacement therapy should have thyroid function monitored
- Patients with gallbladder disease (as estrogens increase the risk of gallbladder disease)
- Patients with history of DVT, PE, stroke, or MI
- The development of severe hypercalcemia, loss of vision, severe hypertriglyceridemia or cholestatic jaundice (discontinue estrogen)

For patients with absolute contraindications or where caution should be exercised, refer to the appropriate specialist(s) for individualized counseling and shared decision-making.

Abbreviations: ASCVD: atherosclerotic cardiovascular disease; CVD: cardiovascular disease; DVT: deep vein thrombosis; MI: myocardial infarction; PE: pulmonary embolism; PREVENT: Predicting Risk of Cardiovascular Disease EVENTs; VA: Veterans Affairs

Module D: Genitourinary Syndrome of Menopause (GSM) and/or Sexual Dysfunction Symptoms Treatment



[a] Do not delay treatment if patient declines pelvic exam
[b] See Pharmacotherapy Appendix
[c] Consider MHT if other concomitant symptoms
[d] Evaluate UTI and treat with antibiotics as appropriate

Sidebar 4: Treatments for Genitourinary Symptoms of Menopause and Sexual Dysfunction

Vaginal Dryness

- Vaginal moisturizers/vaginal lubricants
- Local vaginal and/or systemic estrogen
- Vaginal DHEA
- Oral ospemifene

Dyspareunia

- Local Vaginal Estrogen
- Vaginal DHEA
- Vaginal moisturizers
- Pelvic floor physical therapy

Diminished or Absent Desire, Arousal, and/or Orgasm

- Behavioral Therapy (ACT, Couples Therapy, Sex Therapy, CBT)
- Transdermal Testosterone
- For patients meeting criteria of HSDD/FSAID and <age 65, offer Flibanserin

Bladder-related Symptoms

- Evaluate for active urinary tract infection and treat as appropriate
- Local vaginal and/or systemic estrogen
- Pelvic floor physical therapy
- Bladder training

Abbreviations: ACT: Acceptance and Commitment Therapy; CBT: cognitive behavioral therapy; DHEA: dehydroepiandrosterone; FSIAD: Female Sexual Interest and Arousal Disorder; HSDD: hypoactive sexual desire disorder

Sidebar 1: Treatment Options for Menopausal Symptom Management

Symptoms	Behavioral Interventions	Dietary Interventions	Exercise & Physical Therapy	Local Hormonal Therapies	Systemic Menopausal Hormonal Therapy	Other Prescription Therapies	Over-The-Counter & Non-prescription Therapies
Vasomotor Symptoms (hot flashes, night sweats)	✓				✓	✓	
Urinary Symptoms (incontinence, overactive bladder, recurrent urinary tract infections)	✓	✓	✓	✓		✓	✓
Sleep Disturbance or Insomnia	✓		✓			✓	✓
Depressive/Anxiety Symptoms	✓		✓		✓*	✓	
Altered Cognition (“Brain Fog”, poor memory)	✓		✓				
Dyspareunia	✓		✓	✓	✓		✓
Vaginal Dryness				✓	✓	✓	✓
Sexual Concerns (Difficulty with Arousal/Libido/Orgasm)	✓					✓	
Loss of Bone Density/Fractures	✓	✓	✓		✓		✓
Weight Gain/Difficulty Losing Weight		✓	✓			✓	
Abnormal Uterine Bleeding					✓*	✓*	✓*

*For perimenopausal patients only
See Sidebar 1 in the full VA/DOD Menopause CPG for additional details on treatment options for each symptom.

Sidebar 3: Non-hormonal Treatment Options for Vasomotor Symptoms

Generic Name	Brand	Usual Dosing
Fezolinetant	VEOZAH	45mg daily
Elinzanetant	LYNKUET	120mg daily at bedtime
Citalopram*	CELEXA	10 to 20mg daily (start with 10mg daily)
Escitalopram*	LEXAPRO	10 to 20mg daily (start with 10mg daily)
Paroxetine*	PAXIL	10 to 25mg daily
Paroxetine mesylate	BRISDELLE	7.5mg daily
Desvenlafaxine*	PRISTIQ	100 to 150mg daily Start with 25 to 50mg daily
Venlafaxine*	EFFEXOR	37.5mg to 150mg daily Start with 37.5mg daily
Gabapentin*	NEURONTIN	900 to 2400mg daily Start with 100 to 300mg daily at bedtime; increase to twice daily

Recommendations can be accessed in the full guideline.
Available at: https://www.healthquality.va.gov/

Sidebar 5: Common Menopausal Hormone Therapies (Standard Dosing)

Hormone & Route	Brand	Components	Usual Dosing
Local therapies			
Estrogen (vaginal cream)	• ESTRACE • PREMARIN VAGINAL	• Estradiol 0.01% • Conjugated Equine Estrogen (0.624mg/g)	0.5-1g vaginally daily for 2 weeks, then 1-3x per week
Estrogen (vaginal ring)	ESTRING	2mg estradiol ring (7.5mcg/day)	One ring every 90 days
Estrogen (vaginal insert)	• VAGIFEM • IMVEXXY	4mcg or 10mcg (Imvexxy only) estradiol insert	One insert daily for 2 weeks, then 1 insert 2x per week
Systemic therapies			
Estrogen only (oral)	• ESTRACE • MENEST • PREMARIN	• Estradiol • Esterified Estrogen • Conjugated Equine Estrogen (CEE)	One tablet daily (doses vary)
Estrogen only (patch)	• MINIVELL • VIVELLE-DOT • CLIMARA • MENOSTAR	Estradiol	One patch once or twice weekly (doses vary)
Estrogen only (vaginal ring)	FEMRING	Estradiol	0.05 or 0.1mg/day ring every 90 days
Progesterone/ Progestin only (oral)	• PROMETRIUM • PROVERA	• Micronized progesterone • Medroxyprogesterone acetate	One tablet daily or in cyclic fashion (doses vary)
Progestin only (intrauterine)	• MIRENA • LILETTA	Levonorgestrel 52mg IUDs	One device for up to 5 yrs
Combination Estrogen and Progesterone/ Progestin (oral)	• BIJUVA • ANGELIQ • FEMHRT • PREMPRO • PREMPHASE • ACTIVELLA	• Estradiol/progesterone • Estradiol/Drospirenone • Ethinyl estradiol/ Norethindrone acetate • CEE/Medroxyprogesterone • CEE/Medroxyprogesterone • Estradiol/Norethindrone acetate	One tablet daily (doses vary)
Combination Estrogen and Progestin (patch)	• COMBIPATCH • CLIMARAPRO	• Estradiol/norethindrone • Estradiol/levonorgestrel	One patch once or twice weekly (doses vary)

Note: In women with a uterus, systemic (not local) estrogen therapy **must** be dosed in combination with a progestogen (progestin or progesterone), either as a combination product or estrogen only with a progestogen-only option. See Appendix H in the full Menopause CPG.