

Drug Information Table

Estrogen HRT: Conjugated Equine Estrogen (Premarin), Transdermal Estradiol (Estraderm, Climara, FemPatch), Intravaginal Estradiol (Vagifem)

THERAPEUTIC USE	<ul style="list-style-type: none">• Relief of severe menopausal symptoms (vasomotor) and vulvar and vaginal atrophy• Prevention of postmenopausal osteoporosis
ADVERSE DRUG REACTIONS	<ul style="list-style-type: none">• Nausea• Thromboembolism: thrombophlebitis, pulmonary embolism, stroke, myocardial infarction• Hypertension• Endometrial hyperplasia, endometrial and ovarian cancer
INTERVENTIONS	<ul style="list-style-type: none">• Inform clients that this effect diminishes with time.• Monitor for and report any indications of deep vein thrombosis, pulmonary embolism, myocardial infarction, and cerebrovascular accident.• Encourage clients who smoke to quit smoking.• Use HRT for no more than 3 to 4 years to treat vasomotor or genital symptoms of menopause.• Monitor blood pressure.• Monitor for vaginal bleeding.• Advise a yearly pelvic examination.• Check that clients who have an intact uterus are prescribed progesterone with their estrogen.
ADMINISTRATION	<ul style="list-style-type: none">• Oral:• Take according to the precise dosing schedule, typically continuously to avoid monthly bleeding.• Take pills at the same time each day.• Transdermal estradiol patches:• Apply patches at the recommended interval, typically once or twice per week.• Apply to clean, dry, intact skin on the abdomen or trunk (not breasts or waistline) and press firmly for 10 seconds.• Do not use the same site more than once per week.• Intravaginal estradiol hemihydrate tablets (Vagifem) or vaginal cream (Estrace vaginal cream):• Use according to the precise dosing schedule, typically tablets are inserted once daily for 2 weeks, then twice per week.• Insert tablet using provided applicator at bedtime.• Vaginal cream is applied using a reusable applicator to measure the precise dose; insert into vagina at bedtime.

CLIENT INSTRUCTIONS	<ul style="list-style-type: none"> • Take oral forms with food. • Report leg or chest pain, leg edema, sudden change in vision, severe headache, or shortness of breath. • Do not smoke. • Stop taking at least 4 weeks before any surgery that increases the risk of thromboembolic events. • Exercise regularly and follow a healthy, low-fat diet. • Take, apply, or instill at bedtime. • Obtain regular blood pressure checks. • Report persistent or recurrent vaginal bleeding.
CONTRAINDICATIONS	<ul style="list-style-type: none"> • History of or other risk for thromboembolic events • Suspected or confirmed breast, vaginal, cervical, or endometrial cancer • Liver disease • Undiagnosed vaginal bleeding
PRECAUTIONS	<ul style="list-style-type: none"> • Hypertension • Gallbladder disease • Diabetes mellitus • Heart disease • Migraines • Kidney dysfunction
INTERACTIONS	<ul style="list-style-type: none"> • Rifampin, ritonavir (Norvir), phenobarbital, carbamazepine (Tegretol), primidone (Mysoline), phenytoin (Dilantin), and St. John's wort can reduce the effectiveness of estrogens. • Estrogens can reduce the effects of warfarin (Coumadin) and hypoglycemic drugs. • Estrogens can increase levels of theophylline (Theo-24), diazepam (Valium), chlorthalidone (Hydriurem), and tricyclic antidepressants.