

## Highlighting: Women's Health

# Relieving Vaginal Atrophy

In this occasional series, industry experts with an interest in different therapy areas offer advice on addressing particular health problems. Here menopause mentor **Kathryn Colas** explains more about relieving the symptoms of vaginal atrophy

### The Problem

Vaginal Atrophy (VA) affects around 40% of women at menopause and beyond, and with the myriad symptoms of menopause, it is difficult for women to understand what is going on.

The atrophic symptoms caused by oestrogen deficiency affecting the vagina and lower urinary tract, are part of a natural phase of ageing that includes itching, burning, dyspareunia, possible bleeding and spotting.<sup>1</sup> All these symptoms can compromise libido and sexual activity and be a major problem for women over 45.

From a personal perspective, as a non-medical lay person seeking answers to menopause, I thought I had a disease until I attended a BMS (British Menopause Society) conference and found out more about VA.

So now my condition had a name, but I was still in the dark regarding treatment options. My relationship with my husband was severely affected and we were on course for the divorce courts.

Of the 40% of women experiencing symptoms, only a minority (25%) will seek medical help, but few are treated due to embarrassment, underdiagnosis and more attention being given to other menopause symptoms.<sup>1</sup>

70% of women admit to avoiding intimacy and treatment of VA is restricted by lack of knowledge. The effect on relationships is



devastating for both women and their partners; both of whom are in the dark as to the cause. Women continue to suffer in silence.

Once the subject is discussed, women expect medical advisors to be knowledgeable about treatments available in order for them to make an informed decision. However, unfortunately this is not always the case and this scandalous situation affects millions of women and their partners.

### A Healthy Vagina

A typical healthy vaginal environment is moist and acidic. Under normal circumstances, a low pH of around pH4 is microbicidal for many sexually transmitted diseases (the acidity kills microbes and prevents infection) and Lactobacillus occurs naturally.<sup>2</sup> In other words, the environment surrounding the vagina is healthy and everything is functioning normally.

What happens at menopause is distressing for many reasons: oestrogen deficiency causes the pH balance to naturally rise, leading to atrophy, vulnerability to infection and disease and remains a challenge for the remainder of women's lives.

Sadly, many GPs and pharmacists appear ignorant of many aspects of menopause and seem embarrassed to discuss VA. And women are too embarrassed to ask so they seek out unreliable information from magazines and online. It's a classic case of the blind leading the blind.

## Highlighting: Women's Health – Relieving Vaginal Atrophy (cont'd)

### The Solution

This is simple. There are products available on prescription and OTC that can successfully reduce symptoms but there are some vital points to bear in mind when offering advice about products to help your patients avoid irritation and damage to the vagina and surrounding tissue.

### Please avoid recommending intimacy products that contain:

- **glycerine**, glycols or Nonoxynol-9. Or products that contain oestrogen mimics, such as:
- **parabens** (methyl, propyl, ethyl and isobutyl parabens)<sup>3</sup>

Intimacy product labels should always be checked for pH. It should say pH buffered to match vaginal pH. If pH is not mentioned, avoid the product.

Any recommended product should state that it addresses the symptoms of Vaginal Atrophy. It is important to distinguish between products that act as intimate moisturisers and the more common ones designed as lubricants only. Avoid ordinary lubricants such as KY and Sensilube because they are known to cause tissue damage.<sup>3</sup>

### The most popular prescribed and OTC vaginal moisturisers are:

- **Yes Yes Yes** ([www.yesyesyes.org.uk](http://www.yesyesyes.org.uk)) – oil and water based, organic, side-effect free with none of the nasties, pH matched to the vagina, Soil Association approved
- **Sylk** ([www.sylk.co.uk](http://www.sylk.co.uk)) – no parabens, contains vegetable glycerine, matches pH balance of healthy vagina
- **Replens** ([www.replens.co.uk](http://www.replens.co.uk)) – contains vegetable glycerine, glyceride and parabens: methylparaben

### Oestrogen-based products on prescription:

- **Systemic HRT** (my preference is for individualised prescriptions of oestrogen, progesterone [when uterus present] with the added bonus of testosterone – the latter being the magical, vital ingredient that addresses VA symptoms and generally puts the lights back on!)
- **Non-systemic, locally applied, extra low-dose oestrogen**, in the form of pessaries

I describe the hormone supplements as little miracle workers. They have the effect of plumping up the vulva (lips) around the vagina and keeping the vaginal walls healthy, restoring lost mucous. The other major benefit is improvement to the muscles of the urinary tract/bladder, thus avoiding that other embarrassing



problem of leakages when coughing, running or jumping.

All the treatments show best results when combined with exercise, specifically the pelvic floor. There you have it, two problems dealt with easily and effectively.

Women go through a metamorphosis at menopause. It's a major event in a woman's life, which can be a liberating experience if she is given better information about what is happening to her body and she is made aware of the solutions available. By using the right products, her symptoms will be relieved and the bedroom will soon become a happier place.

### Best Practice

Join the British Menopause Society to update menopause knowledge – [www.thebms.org.uk](http://www.thebms.org.uk)



### References

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  - b. Cardozo L *et al* Meta-analysis of estrogen therapy in the management of urogenital atrophy in postmenopausal women: second report of the Hormones and Urogenital Committee. *Obstet Gynecol* 1998; 92:722-727
  - c. Rioux JE *et al* 17B-estradiol vaginal tablet versus conjugated equine estrogen vaginal cream to relieve menopausal atrophic vaginitis. *IMenopause* 2000; 7(3):156-161
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3. Begay O, Jean-Pierre N, Abraham CJ *et al* Identification of personal lubricants that can cause rectal epithelial cell damage and enhance HIV Type 1 replication in vitro. *AIDS Research and Human Retroviruses* 2011; 27(9):1019-1024

Kathryn Colas is an East Sussex-based menopause mentor and member of the BMS Advisory Council. She set up [www.simplyhormones.com](http://www.simplyhormones.com) and [www.mentoringthroughmenopause.com](http://www.mentoringthroughmenopause.com) as a result of her own distressful time.

SimplyHormones offers information and support effectively providing a helping hand through the minefield symptoms of menopause and where audio/visual programmes are a regular feature.



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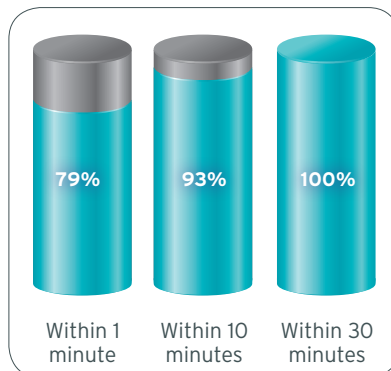
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### Any questions?

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\* data from Drug Tariff and publicly available information August 2014



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### Prescribing details

#### Drug Class

Vaginal moisturisers Part IX A of Drug Tariff

#### Dosage

Typically, 1 application intravaginally every 2–3 days

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