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Thank you for entrusting in the compounding services at Madison Medical Compounding Pharmacy to help meet the unique medication needs of your patients. We are excited to share our monthly newsletter with you and look forward to working with you. Please don't hesitate to let us know how we can assist you and your practice.

LeAnn Chambers, Pharm.D. and Matthew Chambers, Pharm.D.

Micronized Progesterone for Treatment of Vasomotor Symptoms

A randomized double-blind placebo-controlled trial in post-menopausal women compared oral micronized progesterone with placebo as therapy for postmenopausal hot flushes and night sweats (vasomotor symptoms; VMS).

Healthy community women (n=133, ages 44 to 62 years) who were 1 to 10 years post final menstruation were recruited for a trial of progesterone (300 mg daily at bedtime) versus placebo, and were screened for clinical, physical, or laboratory evidence of cardiovascular risks. Women recorded daily frequency and severity of VMS in the Daily Menopause Diary during run-in (4 weeks) and intervention (12 weeks). Average daily VMS score during final 28 therapy days was the primary outcome.

The VMS scores of women taking progesterone were significantly better than placebo. The researchers concluded that oral micronized progesterone is effective for treatment of hot flushes and night sweats in healthy women early in postmenopause.



[ClinicalTrials.gov NCT00152438](https://clinicaltrials.gov/NCT00152438).
[Menopause. 2012 Aug; 19\(8\):886-93](#)

Hot Flashes Linked to Heart Disease and Diabetes

Hot flashes are the most common vasomotor symptom of menopause. Not only are vasomotor symptoms inconvenient and uncomfortable, hot flashes may increase the risk of health problems including heart disease and diabetes. Data was analyzed from over 150,000 postmenopausal women who participated in the Women's Health Initiative: 33% of the women had hot flashes, which was associated with an 18% increased risk of diabetes. The risk increased with greater duration and severity of hot flashes. When night sweats were factored in, the risk of health problems increased further, especially in cases where the onset of hot flashes developed late into the menopausal transition.

Compared to men with diabetes, women with diabetes have a higher risk of being hospitalized for or dying from diabetes and its complications, which makes the timely identification and management of diabetes through lifestyle intervention or medical management critical.

Dr. JoAnn Pinkerton, executive director of the North American Menopause Society, said: "This study showed that, after adjustment for obesity and race, women with more severe night sweats, with or without hot flashes, still had a higher risk of diabetes... For symptomatic women, hormone therapy started near menopause improves menopause symptoms and reduces the risk of diabetes."

[Menopause. 2018 May;25\(5\):520-530.](#)

Ask our pharmacist about the benefits of customized hormone replacement therapy.

Estrogen Therapy May Reduce the Risk of Diabetes in Postmenopausal Women

It is known that younger women are less likely than men to develop type 2 diabetes. But after menopause, the trend reverses dramatically and women are at higher risk of diabetes due to declining levels of estrogens, specifically, estradiol, which exerts specific actions on the pancreas and insulin biosynthesis and secretion. Clinical and experimental data from research done at University Hospital/Diabetes Center and University of Geneva Medical School, Geneva, Switzerland indicate a beneficial effect of estrogens on energy and glucose homeostasis associated with improved insulin sensitivity. Dr. Sandra Handgraaf noted: "A number of scientists are working on the effect of estrogens on pancreatic insulin-producing cells. But its effect on glucagon-producing cells, another hormone regulating blood sugar, had never been explored before... Besides their pivotal role in sexual development and reproduction, estrogens prevent the occurrence of visceral obesity, insulin resistance, and glucose intolerance in women." Study leader Jacques Philippe, MD, a Harvard University/Mass General Hospital-trained endocrinologist, said: "It is important to remember hormonal substitution, when taken at the beginning of menopause and for a few years only, does not cause any particular risk of cardiovascular events." The study concluded that a woman receiving hormone replacement therapy is up to 35 percent less likely to develop type 2 diabetes.

[JCI Insight. 2018;3\(7\):e98569.](#)

