

# New study demonstrates effectiveness and safety of vaginal estrogen

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Despite its proven effectiveness in treating the genital symptoms of menopause, low-dose vaginal estrogen therapy remains underused largely because of misperceptions regarding its safety. However, a new study that followed women from the Nurses' Health Study demonstrates that its use is not associated with a higher risk of cardiovascular disease or cancer. Results are published online today in *Menopause*, the journal of The North American Menopause Society (NAMS).

Between 25% and 70% of [postmenopausal women](#) are affected by an array of genital and urinary issues collectively known as the genitourinary syndrome of menopause (GSM). Common symptoms include vaginal burning and irritation, a lack of lubrication, pain during intercourse, and urinary tract infections. Unlike hot flashes, which often accompany menopause, GSM symptoms do not resolve over time, are chronic, and can become progressively worse without treatment.

Low-dose vaginal estrogen therapy is the preferred and most [effective treatment](#) for GSM and is recommended by multiple professional societies, including NAMS, the American College of Obstetricians and Gynecologists, and the Endocrine Society. Multiple studies document the superior effectiveness of vaginal estrogen over nonhormone therapies and demonstrate that it provides better symptom relief than oral estrogen therapy.

As a result of misperceptions regarding its safety (which partially stem from the FDA-issued black-box warning that relates to systemic

hormone therapy), vaginal estrogen therapy is not prescribed as often as it could be, leaving many postmenopausal [women](#) to experience a lower quality of life. A new study that followed women from the Nurses' Health Study for more than 18 years, however, concluded that vaginal estrogen was not associated with a higher risk of cardiovascular disease, cancer, or hip fractures. This included risks for [myocardial infarction](#), stroke, and [pulmonary embolism](#), as well as breast, endometrial, ovarian, and colorectal cancers.

Study results appear in the article "Vaginal estrogen use and chronic disease risk in the Nurses' Health Study."

"Over-the-counter vaginal lubricants and moisturizers are often used as first-line treatments for women with symptoms of GSM," says Dr. JoAnn Pinkerton, NAMS executive director. "Persistent symptoms often need therapies such as local vaginal estrogen, intravaginal dehydroepiandrosterone, or oral ospemifene. This study adds to a growing body of data showing the long-term efficacy and safety of low-dose vaginal [estrogen](#), which works primarily locally with minimal systemic absorption."

Provided by The North American Menopause Society

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