

# Transdermal estradiol shows promise in treating and preventing perimenopausal depression

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Did you know you're two-to-four-times more likely to suffer from depression during the menopause transition? A new study suggests that transdermal estradiol could be the key to not only treating existing perimenopausal depression, but also possibly preventing it, and the chances that it will benefit your mood are greater the more stress you're under. The study results will be presented during The North American Menopause Society (NAMS) Annual Meeting in Philadelphia, October 11-14, 2017.

It's no secret that [depression](#) is a commonly reported symptom of the [menopause](#) transition. Several small trials have previously suggested that transdermal [estradiol](#) therapy (i.e., an estrogen patch) effectively treats perimenopausal depression. But this is the first study to examine its effectiveness in preventing the onset of perimenopausal depression among women who were previously not depressed. Estradiol is the primary estrogen (female sex hormone) that is produced during a woman's reproductive years, impacting reproduction as well as sexual function.

A 12-month intervention conducted by Drs. David Rubinow and Susan Girdler and their team at the University of North Carolina at Chapel Hill demonstrated that transdermal estradiol was more effective than placebo in maintaining a more positive mood and in preventing the emergence of clinically significant depression particularly among women in the early menopause transition (as opposed to women in the late menopause transition or postmenopausal period). The effectiveness of treatment on mood was also stronger in women who reported a greater number of stressful events in the six months preceding enrollment.

"This study suggests that the stabilization of

fluctuating estradiol levels, which are characteristic of the menopause transition, with transdermal estradiol may represent one option for preventing the development of [depressive symptoms](#) in the [menopause transition](#)," says Dr. Jennifer Gordon, a lead researcher on the study team from the University of Regina in Saskatchewan, Canada.

"An interesting finding in this study is the impact of recent life events, which signals that healthcare providers may need to inquire about such events when determining whether or not to prescribe transdermal estradiol to influence mood in perimenopausal women experiencing depressive symptoms," says Dr. JoAnn Pinkerton, NAMS executive director."

Drs. Gordon and Pinkerton are available for interviews before the presentation at the Annual Meeting.

Provided by The North American Menopause Society

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