

Bio-Identical Hormone Replacement Consent Form

Name: _____

Conventional +/- CAM Diagnosis: _____

Rationale/Symptoms: _____

Treatment: I prescribe bioidentical **topical estradiol & oral micronized progesterone**.

Hormone therapy is a conventional treatment for menopausal hot flushes and ovarian failure.

Evidence for hormone therapy is good, but there is **less evidence for bio-identical** than synthetic hormones. Hormone therapy **may not be conventional** for the use of:

- Bio-identical progesterone (conv: synthetic progestin). Progesterone monotherapy.
- Progesterone in women without a uterus. Progesterone before menopause.

ESTROGEN may improve:

- Hot flushes (approved indication)
- Cognitive symptoms such as: moodiness/irritability, brain fog.
- Reduced osteoporosis & hip fracture
- Reduced risk of colon cancer

ESTROGEN Risks: *

- **Breast Cancer**
- **Heart attack & Stroke (CVD)**
- **Blood clots (DVT & PE)**
- **Endometrial cancer**

* Risks are *higher* with oral, synthetic E.

PROGESTERONE may improve:

- Reduced risk of endometrial cancer from supplemental estrogen
- PMS symptoms (pre-menstrual synd.)
- Hot flushes (for peri-menopausal)
- Sleep +/- calming effect

PROGESTERONE Side Effects:

- Moodiness/irritability
- Breast tenderness, edema
- **Cyclical bleeding** restoration

Risks are *lower* with topical E, concurrent P.

Risks *may* be lower with bio-identical P.

Contraindications & Special Considerations:

Please declare immediately if you have or develop any of the following:

- o **Peanut allergy** (obtain progesterone from compounding pharmacy)
- o **Migraines with aura** **Stroke** **Blood clots (DVT or PE), thrombophilia**
- o **Liver disease** **Smoking** **High blood pressure**
- o **Vaginal bleeding** **Pregnancy** **Breast, Ovarian, Uterine cancer OR FHx**

Alternatives: No treatment (symptoms may persist). *Conventional:* synthetic progestins.

- o *Lifestyle:* Acupuncture/Hypnosis Avoid caffeine, alcohol, smoking
- o *Environmental modifications* for hot flushes: clothing, fans, cold showers, exercise, sleep
- o *Medications:* anti-depressant SNRIs, Gabapentin, and clonidine
- o *Herbal phytoestrogens* i.e. black cohosh, st johns wort, red clover, rhapontic rhubarb, soy isoflavones. *Herbal phyto-progesterones* i.e. chaste berry.
- o *Estriol:* Bi-Est (80% estriol with 20% estradiol, or 50/50 mix) – less researched.
- o *Topical progesterone:* with yearly pelvic U/S – less protection endometrial cancer.

We aim to use the **lowest effective dose** for the **shortest required time**. Safe to ~10 yrs.

Please continue routine cancer screening (PAP & mammography) with your family doctor.

Progesterone is **mandatory** for women with a uterus. Continuous (100mg) or cyclical (200mg).

I have read & understand the above material. I have had the opportunity to ask questions.

I give my voluntary informed consent to treatment. I may request a paper copy anytime.

Signature: _____

Date: _____