

## Change to the Progestogen dose for Endometrial Protection in HRT

*This information relates to a specific change in guidance. For general information about HRT, please see [www.nhs.uk/medicines/hormone-replacement-therapy-hrt/](http://www.nhs.uk/medicines/hormone-replacement-therapy-hrt/)*

In April 2024, the British Menopause Society released a new joint guideline which has suggested changes to the dose of progesterone for women on oestrogen for HRT.

This was in response to a significant increase in women presenting with unscheduled bleeding on HRT. See full guideline below.

<https://thebms.org.uk/publications/bms-joint-guidelines/management-of-unscheduled-bleeding-on-hormone-replacement-therapy-hrt/>

Joint guideline produced by the British Menopause Society (BMS) in partnership with the British Society of Gynaecological Endoscopy, British Gynaecological Cancer Society, Faculty of Sexual & Reproductive Healthcare, Getting It Right First Time (GIRFT), Royal College of General Practitioners and the Royal College of Obstetricians & Gynaecologists.

The progesterone dose adjustment only applies to women on **high dose oestrogen regimes**.

Route of administration	Dose per day
Oestrogel	4 pumps
Patch	100mcg
Oral Oestradiol	4mg*

If you are on a high dose of oestrogen, the progesterone dose needs to be adjusted to reduce the risk of endometrial cancer and unscheduled bleeding.

If you think that your dose needs to be adjusted, then please contact St John's in the usual way to discuss this with one of our medical or pharmacy team.

Micronised progesterone (e.g. Utrogestan)		Medroxyprogesterone (e.g. Provera)		Norethisterone		Mirena
Daily	2 weeks on 2 weeks off	Daily	2 weeks on 2 weeks off	Daily	2 weeks on 2 weeks off	Continuous
200mg	300mg	10mg	20mg	5mg	5mg	5 years use

\*Off licence use – not recommended by BMS.