



Oestriol Vaginal Cream

This medicine can be prepared by a compounding pharmacist.

Mode of action*

- Oestrogens relieves symptoms (eg hot flushes, night sweats and urogenital atrophy) caused by reduced endogenous oestradiol production

Indications*

- Menopausal symptoms, eg hot flushes
- Vulvovaginal symptoms due to oestrogen deficiency; others, see full PI

Precautions*

- *Breast cancer or other oestrogen-dependent tumour*—contraindicated. HRT may increase the risk of recurrence if there is a history of breast cancer, seek specialist advice.
- *History of endometriosis*—risk of recurrence or malignancy with HRT is unclear but appears to be low; risk may be higher with unopposed oestrogen. It is uncertain whether a progestogen should be added after hysterectomy as there is no evidence that it will reduce the risks, seek specialist advice; others, see full PI

Cardiovascular*

- Contraindicated in cerebrovascular or coronary artery disease.
- Contraindicated with a history of thromboembolic disorder. Avoid use if known thrombogenic mutation. Assess risk factors for thrombosis; consider avoiding HRT if multiple risk factors are present; others, see full PI

Hepatic*

- Contraindicated in severe liver disease; others, see full PI

Surgery*

- When possible, stop HRT 4-6 weeks before elective surgery that has a significant risk of postoperative thromboembolism, as HRT may increase this risk; if still required, restart HRT after full mobilisation. If HRT is continued, give VTE prophylaxis.

Pregnancy*

- Avoid use; Australian category B1

Adverse effects*

- Breast enlargement and tenderness, abnormal mammogram, headache, depression, change in libido, irregular or breakthrough bleeding, spotting, endometrial hyperplasia, leg cramps, dry eye syndrome; others, see full PI

Dosage*

- *Vulvovaginal symptoms* – 0.5mg (1 applicatorful) inserted into the vagina at night for 2-3 weeks, then maintenance of 0.5mg once or twice a week; others, see full PI

Practice points*

- Practice points from hormone replacement therapy
- Oestrogen-related adverse effects (eg breast enlargement or tenderness, fluid retention, headache, leg cramps, nausea) may occur continuously or at any time during the cycle. If persistent, consider:
 - Reducing the dose
 - Changing the oestrogen
 - Changing the route

- PCCA formula #10623 Oestriol 0.1% VersaBase[®] Cream is oil-free, noncomedogenic, hypoallergenic, and free of parabens, propylene glycol and petrochemicals. *Detailed information regarding the VersaBase[®] range (including cream, gel, lotion, shampoo and foam) is available from the member-only website.*

PCCA formulas are valid only when PCCA Ingredients and Bases are used.

How to Write a Compounded Prescription:
Example prescriptions below

The following formulas are suggested as a guideline for medical practitioners only

Dr. A Prescriber
99 Station Street
Central NSW 2001
Phone: (99) 9999 9999
Prescriber no.: 123456

Patient's Medicare number: 3,9,0,0,7,2,4,6,5,1,1

Patient's full name: Suzie Citizen
Patient's address: 22 Smith Street, Cityside, Postcode 2001

PBS entitlement number: _____
Safety Net entitlement card holder: Concessional or dependant, RPBS beneficiary or Safety Net concession card holder

PBS Non-PBS Brand substitution not permitted

Pharmacist/patient copy

COMPOUNDED OESTRIOL 0.1% in PCCA VERSABASE[®] Cream

Insert required directions

Quantity: _____ Repeats: _____

Privacy note on reverse

Doctor's signature: *A. Prescriber* Date of supply: 03/04/07

I certify that I have received the medication and the information relating to any entitlement to free or concessional pharmaceutical benefits is not false or misleading. 4011 00/06

Patient's or agent's signature: _____ Date of supply: / /

Agent's address: _____

Dr. A Prescriber
99 Station Street
Central NSW 2001
Phone: (99) 9999 9999
Prescriber no.: 123456

Patient's Medicare no.: 3900724651-1

Pharmaceutical benefits entitlement number: _____
 Safety Net entitlement card holder (concession card holder) Concessional or dependant (RPBS beneficiary or Safety Net concession card holder)

Patient's name: Suzie Citizen
Address: 22 Smith Street, Cityside NSW 2001

Date: 03/04/07
XXXXXXXXXXXX non PBS Brand substitution not permitted

COMPOUNDED OESTRIOL 0.1% in PCCA VERSABASE[®] Cream

Insert required directions

Qty: _____ repeat

1 item

Dr. A. Prescriber MBBS

A. Prescriber

Please take care for privacy note

I certify that I have received the medication and the information relating to any entitlement to free or concessional pharmaceutical benefits is not false or misleading.

Date of supply: _____ Patient's or agent's signature: _____

Agent's address: _____ 4011 00/06

PCCA ingredients are quality assured for peace of mind. Learn more about PCCA quality by visiting: www.pccarx.com.au/quality



**Fremantle Central
Pharmacy**

Great service + Great value

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PCCA is endorsed by



**The Pharmacy
Guild of Australia**