

**Table 2: Drugs Used for the Management of Menopausal Symptoms**

<b>Class</b>	<b>Drug</b>	<b>Dose</b>	<b>Adverse Effects</b>	<b>Comments</b>	<b>Cost<sup>a</sup></b>
<b>Combined estrogens and progestins, oral</b>	<i>estradiol hemihydrate/norethindrone acetate</i> Activelle, Activelle LD	<i>In patients with intact uterus:</i> 1 tablet daily continuously (1 mg/0.5 mg or 0.5 mg/0.5 mg)	Breakthrough bleeding/spotting, nausea, vomiting, bloating, chloasma, breast tenderness, mood changes, e.g., depression, headaches.	Amenorrhea occurs (gradual reduction in blood flow over time) with continuous use.	\$\$\$
	<i>estradiol-17β/drospirenone</i> Angeliq	<i>In patients with intact uterus:</i> 1 tablet daily continuously (1 mg/1 mg)	See estradiol hemihydrate/norethindrone acetate.	Amenorrhea occurs (gradual reduction in blood flow over time) with continuous use. Risk of hyperkalemia in patients prone to ↑ K <sup>+</sup> (e.g., renal disease, concomitant ACEI, ARB, potassium-sparing diuretics, NSAIDs). Check K <sup>+</sup> after 1st cycle.	\$\$
<b>Add this row:</b>	<i>ethinyl estradiol/norethindrone acetate</i> femHRT	<i>In patients with intact uterus:</i> 1 tablet daily continuously (5 µg/1 mg)	See estradiol hemihydrate/norethindrone acetate.	See estradiol hemihydrate/norethindrone acetate.	\$\$
	<i>conjugated estrogen/medroxyprogesterone acetate</i> Premplus	<i>In patients with intact uterus:</i> 0.625 mg CE daily for first 14 days of cycle, then 0.625 mg CE plus MPA (2.5 or 5 mg) daily for last 14 days of cycle	See estradiol hemihydrate/norethindrone acetate.	See estradiol hemihydrate/norethindrone acetate.	\$