

Are local hormones really important in genitourinary urinary tract?

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Although hot flashes and night sweats usually are reduced spontaneously over time, the atrophic symptoms that affect the vagina and lower urinary tract are often progressive and often require treatment. The prevalence of vaginal dryness increases as the woman advances in the postmenopausal years, causing itching, burning sensation and dyspareunia, frequently ending up affecting sexual activity. Despite various safe and effective treatment options, only a minority of women will seek medical advice in this topic.

Vaginal dryness can be reduced with simple lubricants, but the best and most logical and efficient treatment for urogenital atrophy is the use of local estrogens.

According to the International Menopause Society (IMS) 's advice:

- Treatment should be started early and prior to irreversible atrophic changes.
- The treatment must be continued to maintain the benefits.
- All local estrogen preparations are effective and the patient's preference usually determines the type of treatment to be used.
- It is not necessary to indicate an additional progestin to the use of local estrogens in low doses, although there is no data on long-term treatments (more than 1 year).
- It is essential that healthcare providers engage in their routine care to start an open and sensitive discussion with postmenopausal women about their urogenital health, to ensure the early detection and proper management of symptomatic vaginal atrophy.

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