SEXUAL MEDICINE

Transdermal oestrogen is effective

New data from an ancillary study of the Kronos Early Estrogen Prevention Study (KEEPS) on sexual function show that treatment with transdermal oestrogen can moderately improve sexual function in women who have recently undergone menopause.

In total, 727 menopausal women were recruited to the KEEPS at nine centres in the USA, of which 670 took part in the ancillary study. Patients were randomized in a ratio of 4:4:5 to one of three groups: 209 received oral oestrogen, 204 had transdermal oestrogen, and 257 were given placebo. Sexual function information was collected at baseline and 18, 36, and 48 months after initiating treatment using the Female Sexual Function Inventory (FSFI) questionnaire, with sex-hormone-binding globulin (SHBG) also being measured at 36 and 48 months.

Women receiving transdermal oestrogen experienced a small but significant increase in mean FSFI score from baseline to 48 months compared with women in the placebo group (2.6 points, $P=0.002$). For women taking oral oestrogen, mean FSFI score increased by an insignificant 1.4 points compared with placebo across 48 months; however, mean increase peaked at 36 months (2.3 points, $P=0.008$), returning to baseline at 48 months.

No differences in FSFI score were observed between the transdermal and oral oestrogen groups. In the six specific FSFI domains, women receiving transdermal oestrogen showed significant increases in desire, arousal, orgasm, and satisfaction scores at 18 months compared with placebo. Furthermore, these women had significant improvements in lubrication and pain scores at all three time points. Compared with

women taking oral oestrogen, women in the transdermal oestrogen group had improved scores in the desire and arousal domains at 18 months.

SHBG levels remained stable for women in the transdermal oestrogen and placebo groups, whereas levels significantly increased for women taking oral oestrogen. An amelioration in low sexual function from baseline levels was only observed in women receiving transdermal oestrogen. Sexual function status at baseline was the only baseline characteristic that affected the efficacy of oestrogen treatment, significantly improving status for women with low sexual function.

These results show that transdermal oestrogen might improve sexual function for women who have recently experienced menopause, especially for those with low sexual function.

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“women receiving transdermal oestrogen showed ... increases in desire, arousal, orgasm, and satisfaction”

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