

Family Tree Clinic Estrogen and Androgen Blocker Medications/Labs Basic Guidelines

Medication	Starting Dose	Typical Dose	Max dose
<p>Estradiol (transdermal patch) (change patches every 3-4 days)</p> <p>1 box = 8 patches of semi-weekly patches</p>	<p>0.1mg/24 hour patch; 1 patch at a time, change every 3-4 days = 2 patches total per week</p> <p>Also available as a weekly patch = 1 patch/week</p>	<p>0.1mg/24 hour patch; 2 patches at a time change every 3-4 days = 4 patches total per week</p> <p>Also available as a weekly patch = 2 patches/week</p>	<p>0.1mg/24 hour patch; 3 patches at a time change every 3-4 days = 6 patches total per week</p> <p>Also available as a weekly patch = 3 patches/week</p>
<p>Estradiol (tablet form)</p> <p>If using sublingual needs to be micronized form of estradiol</p>	2 mg/day PO	4mg/day PO or SL (divided doses)	8 mg/day PO or SL (divided doses)
<p>Estradiol valerate (Delestrogen) or cypionate (depo-estradiol)</p> <p>5mL vials</p>	<p>2 mg IM weekly</p> <p>OR</p> <p>4 mg IM every OTHER week</p>	<p>4-6mg IM weekly</p> <p>OR</p> <p>8-12 mg IM every OTHER week</p>	<p>10mg IM weekly</p> <p>OR</p> <p>30mg IM every other week (consult with care team if higher)</p>
<p>Spironolactone (tablet)</p>	50-100 mg PO QD (single or divided doses)	50-100 mg BID or 100-200mg PO QD (single or divided doses)	300mg PO QD (single or divided doses -- consult with care team if higher)
<p>Finasteride or Dutasteride (if not tolerating Spironolactone or can't take Spironolactone or needing more effect with Spironolactone or wanting more head hair regrowth)</p> <p>Finasteride comes as 1mg or 5mg tablets</p>	<p>2.5mg PO QD Finasteride</p> <p>OR</p> <p>0.5mg PO QD Dutasteride</p>	<p>5mg PO QD Finasteride</p> <p>OR</p> <p>0.5mg PO QD Dutasteride</p>	<p>5 mg PO QD Finasteride</p> <p>OR</p> <p>0.5mg PO QD Dutasteride</p>
<p>Progesterone – not recommended routinely (anecdotal benefit, may be tried on individual basis)</p> <p>**Prometrium is in peanut oil**</p>	<p>Micronized progesterone (Prometrium):</p> <p>100mg PO Q HS</p>	<p>Micronized progesterone (Prometrium):</p> <p>200mg PO Q HS</p>	<p>Micronized progesterone (Prometrium):</p> <p>400mg PO Q HS</p>

Estrogen and Androgen Blocker Baseline/follow-up labs:

Time Period	Labs needed	Optional
Baseline	<ul style="list-style-type: none"> • <u>Basic Metabolic Panel</u> 	<p><u>AST/ALT</u> (if starting finasteride/dutasteride)</p> <p><u>STI screen</u> (per risk factors and CDC guidelines)</p> <p><u>TSH</u> per risk factors; s/s; and preventive health guidelines</p> <p><u>Fasting Glucose or A1C</u> per risk factors and preventive health guidelines</p> <p><u>Prolactin</u> (if symptoms of prolactinoma)</p> <p><u>Lipid panel</u> (fasting ideal) per preventive health guidelines if pt has no PCP</p>
3 months after medication start	<ul style="list-style-type: none"> • <u>Potassium</u> (only needed if on Spiro) • <u>Estradiol</u> (consider 3-6 months after med start; after dose increase; or if never checked prior; or if no response at expected time intervals) • <u>Testosterone</u> (consider 3-6 mos. after med start; after dose change; or if no response at expected time intervals) 	<p><u>STI screen</u> (as needed)</p> <p><u>AST/ALT</u> (after Finasteride or Dutasteride start)</p>
6-9 months after medication start	<ul style="list-style-type: none"> • <u>Potassium</u> (only needed if on Spiro) • <u>Estradiol</u> (consider check after dose increase; if on injectable estradiol; or if no response at expected time intervals) • <u>Testosterone</u> (consider check until adequately suppressed; after dose change; or if no response at expected time intervals) 	<p><u>STI screen</u> (as needed)</p>
12 months after medication start AND Every 6-12 months after maintenance dose achieve	<ul style="list-style-type: none"> • <u>Potassium</u> (only needed if on Spiro) • <u>Estradiol</u> (check at 3 mos after dose increase; or if no response at expected time intervals; consider annually) • <u>Testosterone</u> (check Q 3 mos until adequately suppressed or if no response at expected time intervals; consider annually) 	<p><u>SAME AS BASELINE LABS (see above)</u></p> <p><u>AST/ALT</u> if on Finasteride or Dutasteride</p>