

News for Women

Pain During Sex & Vaginal Dryness May Contribute To Decreased Frequency Of Sex During Menopause



(NAPSA)—More than half of U.S. women ages 35 and over are having less sex during menopause than before menopause. According to the recent Sex & Menopause Survey, commissioned by the Red Hot Mamas®, a leading menopause patient organization, sponsored by Duramed Pharmaceuticals, Inc., and conducted by Harris Interactive®, 54 percent of those polled reported a decrease in the frequency of sex after entering menopause.

Not every woman's menopause is the same. Some women may experience vasomotor symptoms such as hot flashes or night sweats and others may also experience vaginal atrophy (vaginal narrowing or shrinkage), which can cause vaginal dryness and painful sex. According to the North American Menopause Society (NAMS), an estimated 10-40 percent of postmenopausal women suffer from symptoms related to vaginal atrophy. Two of the most common symptoms of atrophy are dryness and pain with intercourse. The symptoms are generally associated with the diminished estrogen levels that accompany menopause. If left untreated, vaginal atrophy may result in years of discomfort.

The survey also revealed that women who experienced vaginal atrophy are more likely to also report a decrease in frequency of sex. Seventy-five percent of these women reported having less sex since entering menopause and 68 percent reported experiencing pain during active sex.

ENJUVIA™, (synthetic conjugated estrogens, B) is a plant-derived estrogen therapy, approved by FDA for the treatment of moderate-to-severe vaginal dryness and pain with intercourse, symptoms of vulvar and vaginal atrophy associated with menopause. It is the first and only estrogen approved by FDA for the treatment of these specific symptoms associated with vaginal atrophy.

"There is no one-size-fits-all treatment for menopausal symptoms," stated James A. Simon, M.D., Clinical Professor of Obstetrics and Gynecology at George Washington University and Medical Director, Women's Health & Research Consultants. "Women with symptoms should talk to their healthcare professional about finding a therapy that is right for them. For moderate-to-severe hot flashes and night sweats and moderate-to-

severe vaginal atrophy, hormone therapy may be appropriate. If taking estrogen only for the symptoms of vaginal atrophy, topical treatment should be considered."

ENJUVIA™ is also approved for treatment of moderate-to-severe vasomotor symptoms such as hot flashes and night sweats.

About Menopause:

Menopause is the time in a woman's life when the menstrual period ceases and the ovaries permanently stop releasing eggs. Menopause is considered complete when a woman has been without her period for a full year. While some women experience no menopausal symptoms, others suffer severe symptoms that require treatment. Vasomotor symptoms (night sweats, hot flashes) and vaginal symptoms such as vaginal dryness and pain with intercourse are common menopausal symptoms. Although the majority of women experience "natural" or spontaneous menopause, some women may experience menopause due to a medical intervention such as surgery, chemotherapy or radiation.

For more information on menopause, visit the Web site at www.ENJUVIA.com.

Important Information: ENJUVIA is a medicine that contains estrogen hormones. It is prescribed for relief of moderate-to-severe symptoms hot flashes and night sweats, and moderate-to-severe vaginal dryness and pain with sex, associated with menopause.

Important health information you should know when taking estrogens like ENJUVIA:

Estrogens increase the risk for cancer of the uterus (womb). If you experience persistent or recurring vaginal bleeding while taking estrogens let your doctor know right away, as this could be a warning sign for cancer. Your doctor should check for the cause of any unusual vaginal bleeding after menopause.

Estrogens (alone or in combination with progestins) should not be used to prevent heart disease, heart attacks, strokes, or dementia.

Estrogens (alone or in combination with progestins) may increase the risk of heart attack, stroke, blood clots, and breast cancer. Estrogens (alone or in combination with progestins) may increase your risk of dementia, based on a study of women age 65 or older. Because of these risks, estrogens should be used at the lowest dose for the shortest period of time. You and your doctor should talk regularly to determine whether you still need treatment with ENJUVIA.

Who should not use ENJUVIA?

Do not use ENJUVIA if you:

may be pregnant

have unusual vaginal bleeding

have a history of certain cancers, blood clots, or liver problems

have had a stroke or heart attack in the past year

are allergic to ENJUVIA or any of its ingredients

What are the common side effects with ENJUVIA?

You may experience headache, breast pain, irregular vaginal bleeding or spotting, stomach/abdominal cramps and bloating, nausea and vomiting, or hair loss.