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References

Drug treatment of psychiatric symptoms in the context of other conditions CHAPTER 10 Starting treatment Start HRT at 25–50mcg estradiol patch dose equivalents (1mg estradiol tablet/1–2 pumps estradiol 0.6mg/g gel). Increase after 6–8 weeks if symptomatic. Higher doses of estradiol may require additional progesterone for endometrial protection.²⁴ HRT is not a contraceptive. Management of adverse effects Table 10.25 outlines the management of the possible adverse effects of HRT. References

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15. Sommer IE, et al. Women with schizophrenia-spectrum disorders after menopause: a vulnerable group for relapse. *Schizophr Bull* 2022; 49:136–143. Table 10.25 Management of adverse effects of hormone replacement therapy (HRT). Adverse effect Comments
Breast tenderness Bloating Spotting Common within first 3–6 months, or on dose adjustment, normally transient. Headaches Nausea Common in first 3 months of starting or dose increase. May need slower titration. Mood swings Increase in PMS symptoms Increased anxiety/agitation Often common when starting for first month, then transient. Consider progesterone intolerance if beyond 1 month or severe. Irregular bleeding Common for the first 3 months. Refer for investigation if after 4–6 months it has not settled or patient has been on HRT for a while and it is a new presentation. PMS, premenstrual syndrome.

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Revision #1

Created 2026-01-04 20:18:00 UTC by Omar Ayman

Updated 2026-01-04 20:18:00 UTC by Omar Ayman