

For soothing relief of vaginal and vulvar atrophy...<sup>1</sup>

**be confident when prescribing PREMARIN Vaginal Cream.**



– In a survey of 200 postmenopausal women using PREMARIN Vaginal Cream,<sup>2</sup>

**PREMARIN Vaginal Cream received high marks in both patient satisfaction and soothing relief of symptoms:**

**98%**

**expressed satisfaction with  
PREMARIN Vaginal Cream**

#### **Soothing relief, inside and out**

- 97% described their relief as soothing
- 93% of those who used PREMARIN Vaginal Cream outside the vagina felt that it provided soothing relief

#### **Ease of use**

- 75% considered the PREMARIN Vaginal Cream Gentle Measure<sup>®</sup> Applicator “extremely” or “very” easy to use

#### **Continued satisfaction**

- 3 out of 4 patients surveyed had refilled their prescriptions

Gentle Measure is a registered trademark of Wyeth Pharmaceuticals Inc.

**So many satisfied patients have made PREMARIN Vaginal Cream the #1 prescribed vaginal estrogen therapy.<sup>2,3</sup>**

#### **ESTROGENS INCREASE THE RISK OF ENDOMETRIAL CANCER**

Close clinical surveillance of all women taking estrogens is important. Adequate diagnostic measures, including endometrial sampling when indicated, should be undertaken to rule out malignancy in all cases of undiagnosed persistent or recurring abnormal vaginal bleeding. There is no evidence that the use of “natural” estrogens results in a different endometrial risk profile than synthetic estrogens of equivalent estrogen dose. (See **WARNINGS, Malignant neoplasms, Endometrial cancer** in the **Prescribing Information**.)

#### **CARDIOVASCULAR AND OTHER RISKS**

Estrogens with or without progestins should not be used for the prevention of cardiovascular disease or dementia. (See **CLINICAL STUDIES** and **WARNINGS, Cardiovascular disorders** and **Dementia** in the **Prescribing Information**.)

The estrogen-alone substudy of the Women’s Health Initiative (WHI)

reported increased risks of stroke and deep vein thrombosis (DVT) in postmenopausal women (50 to 79 years of age) during 6.8 years and 7.1 years, respectively, of treatment with oral conjugated estrogens (CE 0.625 mg) per day relative to placebo. (See **CLINICAL STUDIES** and **WARNINGS, Cardiovascular disorders** in the **Prescribing Information**.)

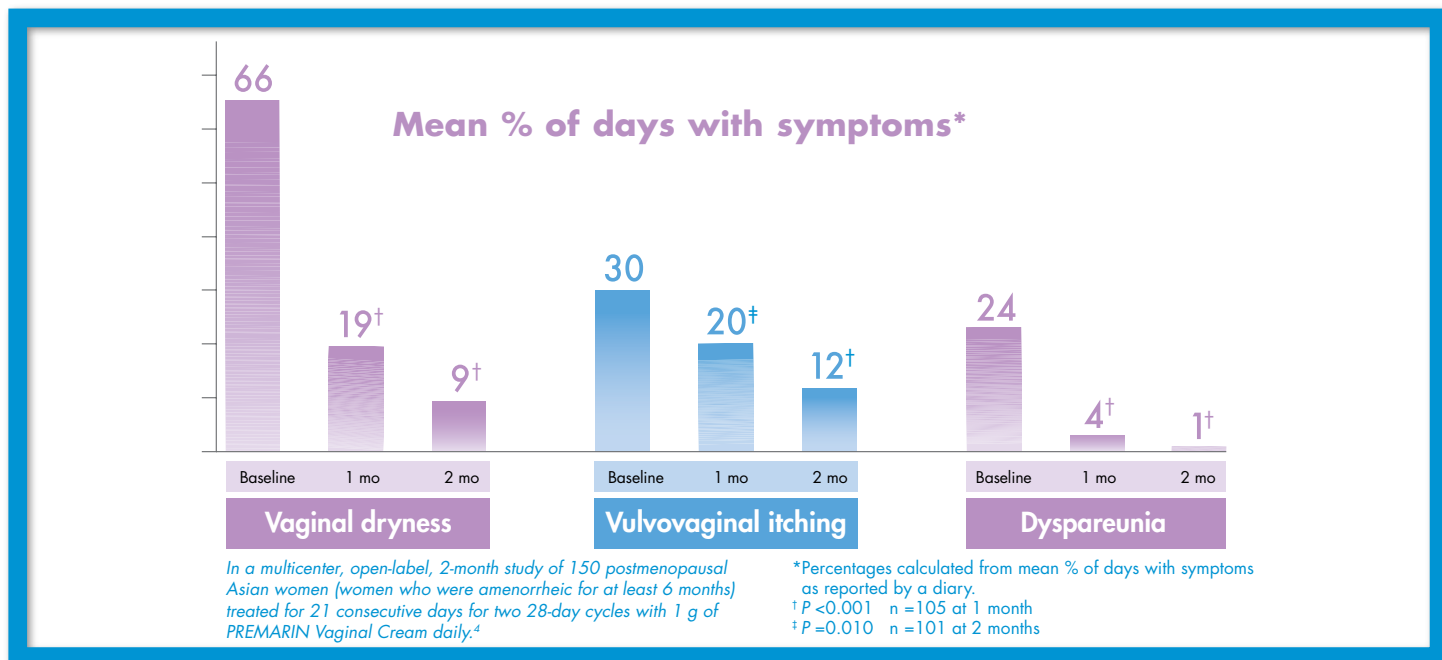
The estrogen-plus-progestin substudy of the WHI reported increased risks of myocardial infarction, stroke, invasive breast cancer, pulmonary emboli, and deep vein thrombosis in postmenopausal women (50 to 79 years of age) during 5.6 years of treatment with oral conjugated estrogens (CE 0.625 mg) combined with medroxyprogesterone acetate (MPA 2.5 mg) per day relative to placebo. (See **CLINICAL STUDIES** and **WARNINGS, Cardiovascular disorders** and **Malignant neoplasms, Breast cancer** in the **Prescribing Information**.)

*(continued on the back)*

 **PREMARIN**<sup>®</sup> (conjugated estrogens)  
0.625 mg/g  
**VAGINAL CREAM**

For proven, effective symptom relief<sup>1,4,5</sup>—and a satisfied patient...<sup>2</sup>  
**give her comfort a cream can provide**

**PREMARIN Vaginal Cream has been proven to significantly decrease the frequency of vaginal and vulvar symptoms by day 21<sup>4</sup>**



**Added benefits of PREMARIN Vaginal Cream:**

- Flexible dosing (0.5 g, 1.0 g, 1.5 g, or 2.0 g) for individualized therapy<sup>1</sup>
- Low cream volume per dose offers convenience<sup>1</sup>
- Approximately 21 to 85 doses per 42.5 g tube\* could mean less frequent prescription refills<sup>1</sup>
- Gentle Measure<sup>®</sup> Applicator designed for easy, comfortable use—exact dose needed may be far less than a full applicator!<sup>1</sup>

\*Depending on approved dose prescribed (0.5 g, 1.0 g, 1.5 g, 2.0 g). Gentle Measure is a registered trademark of Wyeth Pharmaceuticals Inc.

The Women’s Health Initiative Memory Study (WHIMS), a substudy of WHI, reported an increased risk of developing probable dementia in postmenopausal women 65 years of age or older during 5.2 years of treatment with oral CE 0.625 mg alone and during four years of treatment with CE 0.625 mg combined with MPA 2.5 mg, relative to placebo. It is unknown whether this finding applies to younger postmenopausal women. (See **CLINICAL STUDIES** and **WARNINGS, Dementia** and **PRECAUTIONS, Geriatric Use** in the **Prescribing Information**.)

Other doses of conjugated estrogens and medroxyprogesterone acetate, and other combinations and dosage forms of estrogens and progestins were not studied in the WHI clinical trials and, in the absence of comparable data, these risks should be assumed to be similar. Because of these risks, estrogens with or without progestins should be prescribed at the lowest effective doses and for the shortest duration consistent with treatment goals and risks for the individual woman.

PREMARIN Vaginal Cream is indicated in the treatment of atrophic vaginitis and kraurosis vulvae.

The most commonly reported adverse events for PREMARIN Vaginal Cream include vulvovaginal discomfort or pain, mastalgia, vaginitis, and pruritus.

PREMARIN Vaginal Cream should not be used under any of the following conditions or circumstances: undiagnosed abnormal genital bleeding; known, suspected, or a history of breast cancer; known or suspected estrogen-dependent neoplasia; active venous thromboembolism or a history of this condition; active or recent arterial thromboembolism; liver dysfunction or disease; in patients with a known hypersensitivity to its ingredients; known or suspected pregnancy.

**#1 prescribed vaginal estrogen therapy<sup>3</sup>**



**References:** **1.** PREMARIN<sup>®</sup> (conjugated estrogens) Vaginal Cream Prescribing Information, Wyeth Pharmaceuticals Inc. **2.** Data on file, Wyeth Pharmaceuticals Inc. **3.** Data on file, Wyeth Pharmaceuticals Inc. IMS Health data for dispensed TRxs, August 2006. **4.** Raymundo N, Yu-cheng B, Zi-yan H, et al. Treatment of atrophic vaginitis with topical conjugated equine estrogens in postmenopausal Asian women. *Climacteric*. 2004;7:312-318. **5.** Bachmann GA, Ebert GA, Burd ID. Vulvovaginal complaints. In: Lobo RA, ed. *Treatment of the Postmenopausal Woman: Basic and Clinical Aspects*. 2nd ed. Philadelphia, Pa: Lippincott Williams & Wilkins; 1999:195-201.

**Please see Prescribing Information in the inside pocket.**