Overview of estrogen-based hormone therapy

Estrogen in combination with a testosterone blocking medication is used to reduce testosterone-related features, induce estrogen-related features and relieve distress related to gender.

Medication	Dose
Androgen Blockers	
Spironolactone First-line due to lower cost, effectiveness and tolerability May not significantly lower T levels alone	Starting dose: 50 mg po daily Usual maintenance dose: 200-300 mg daily Can be divided bid
Cyproterone Second-line, see Estrogen Consent form for Risks. Eligible for Special Authority if spironolactone is contraindicated, not tolerated or ineffective.	Starting dose: 12.5 mg po daily Usual maintenance dose: 12.5 –50 mg po daily (Use in lowest effective dose & try dose reductions where possible)
Finasteride An anti-androgen with primarily peripheral action Eligible for Special Authority if needed to augment effect of primary anti-androgen	2.5 mg po every other day
Alternative: not using a blocker A higher dose of estradiol may effectively suppress testosterone production	Maintain estrogen levels in sufficiently high range
Estrogen	
17-beta estradiol (Estrace®) Lowest risk of all estrogens and first choice	Starting dose 1-2 mg po daily Usual maintenance dose 4-8 mg daily Can be divided bid
Estradiol patch (Estradot®/Estraderm®) Eligible for Special Authority for clients >40 years old with additional risk factors	Starting dose 50 mcg patch twice per week. Usual maintenance dose: 100-400 mcg twice per week
Estradiol valerate (injectable) Only available compounded	Starting dose at 5 mg IM/SC weekly Usual maintenance dose 10-20 mg IM/SC weekly Weekly dosing is preferred to minimize peak/trough variation Biweekly injection (of 2x the weekly dose) may be tolerated in some individuals
Progesterone	Not routinely recommended but may be included based on patient preference No clear evidence of benefit and possible increased risk Potential role in breast/nipple development (unproven)
Micronized progesterone (Prometrium®) First choice but more expensive	Starting dose 100 mg po daily Usual maintenance dose 100 – 400 mg daily
Medroxyprogesterone (Provera®)	Starting dose 5 mg po bid Usual maintenance dose 10-15 mg bid