HRT - Oral Options – if no contraindications

NHS Somerset

Add:
Local estrogen if needed

Contraception if indicated until 55years

Intact uterus?

YES

No

Continuous combined
Intact uterus
No bleed expected

Choices:
Bijuve® (Estradiol + Progesterone)
Femoston® Conti (Estradiol + Dydrogesterone)
Elleste® Duet Conti (Estradiol + Norethisterone)
Kliovance® (Estradiol +Norethisterone)
Kliofem® (Estradiol + Norethisterone)
Indivina® (Estradiol val + Medroxyprogesterone)
Non-Branded (Conj. oestr + Medroxyprogesterone)

Cyclical combined
(AKA sequential)
Intact uterus
Monthly bleed expected

Choices:
Femoston® (Estradiol + Dydrogesterone)
Elleste® Duet (Estradiol + Norethisterone)
Novofem® (Estradiol + Norethisterone)
Trisequens® (Estradiol + Norethisterone)

Separate estrogen and progestogen/ progesterone

(Add in endometrial protection to estrogen only HRT for people with an intact uterus to protect endometrium, or post hysterectomy when indicated with Hx of endometriosis)

Endometrial protection choices:
Oral:
-Micronised progesterone (body similar): Prescribe generically dose according to estrogen dosing and if cyclical or sequential.
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-LNG-IUD- 20mcg/24hr (52mg) as Mirena see licencing- remove or switch no later than 4 years after insertion (Also provides contraception)
See: BMS GUIDELINE NOVEMBER 2024

Estrogen only needed if no uterus

Estrogen only (No intact uterus)

Choices:

Elleste® Solo (Estradiol)
Progynova® (Estradiol)
Zumenon® (Estradiol)
Non-branded (Conj. Oestrogens)

For a full list of formulary brands see:
HRT Quick Reference Table

Use transdermal HRT if risk factors present

December 2025