Please note that this document has not been updated for the 2026-27 incentive scheme. Standard Operating Procedures (SOPs) for medicines optimisation switches/reviews, along with other supporting materials, were originally developed for use by Medicines Optimisation Team staff within NHS South Yorkshire Integrated Care Board (ICB). Other organisations or groups choosing to use this resource does so at their own risk and NHS SY ICB accepts no liability for its use or application.

Estriol 0.01% cream to Estriol 0.1% cream switch

Bottom line: Estriol 0.1% cream (Ovestin®) is preferred to **estriol 0.01%** cream as they both deliver the same dose of 0.5mg estriol per application, but estriol 0.01% cream is over 10 times more costly than estriol 0.1% cream (Ovestin®).

Launch Date: **QIPP 25/26**

Practices: **All**

Pharmacists and pharmacy technicians undertaking this action sheet should work within their clinical competence. Where appropriate please read in conjunction with appropriate referenced documents, the BNF and the relevant summary of product characteristics. If you are unsure please speak to your line manager or one of the clinical leads

Background /Evidence base

Estriol cream is indicated to improve the vaginal epithelium in menopausal atrophic vaginitis. It is used daily initially, until restoration of the vaginal mucosa has been achieved (2 to 3 weeks), where after the frequency of application should be reduced to a maintenance dose of one applicator full twice a week.

NICE reviewed evidence of local oestrogen treatment for vaginal atrophy, for both safety and efficacy. The evidence suggested that local oestrogens are effective in relieving symptoms in the short and long term (up to a year) and are safe.
NICE recommend offering vaginal oestrogen (including to patients on systemic HRT) and continuing for as long as needed to relieve symptoms. Treatment may be required long term - regular attempts (at least annually) to stop treatment should usually be made.

The dose from the creams is equivalent as a smaller volume of the 0.1% cream is used per application. Below are the comparative costs, based on a twice weekly maintenance dose:

- 0.1% cream (15g) - 1 applicatorful = 0.5g (0.5mg estriol)
  - 1 tube contains 30 doses (= 105 days supply)
  - cost for 28 days = £1.19
- 0.01% cream tube (80g) - 1 applicatorful = 5ml (0.5mg estriol)
  - 1 tube contains 16 doses (= 56 days supply)
  - cost for 28 days = £12.54

Action required	By
1. Action sheet developed in line with Action Sheet SOP completing • Proforma agreement (Appendix 1) • Clinical Systems Requirement Form (Appendix 2) • Relevant parts of sections 2 & 3	
2. Search for all patients regularly being issued prescriptions for estriol 0.01% cream, including Gynest, (acute and repeat).	Pharmacist/Technician
3. Discuss and gain agreement with the prescribing lead G.P. Please inform line manager if any major barriers to carrying out the work.	Pharmacist/Technician
4. Liaise with the community pharmacy where appropriate.	Pharmacist/Technician
5. Carry out agreed switches/actions and communicate to the patient in the agreed manner e.g. letter (Appendix 3) / communication sheet for care home residents (Appendix 4) **Please note: letter is the preferred method of communication as it contains a statement about cream strength.**	Pharmacist/Technician

Please note – when a patient is prescribed a twice weekly maintenance dose, one 80g tube of the estriol 0.01% cream should last 56 days where as one 15g tube of the new estriol 0.1% cream will last for 105 days. There should not be a need to prescribe more than one 15g tube at a time, even if the patient previously received two 80g tubes on each prescription.

Estriol 0.01% cream changed to estriol 0.1% cream a more cost effective alternative. Switch agreed by Dr. Patient informed via letter/accuRx.

One of your medications has been changed to a more cost effective alternative. Please see attached link for more information.

References:

NICE CKS on Menopause
https://cks.nice.org.uk/menopause#!management
BNF
https://www.medicinescomplete.com/mc/bnf/current/PHP94656-estriol.htm
SPCs
https://www.medicines.org.uk/emc/search?q=estriol
Drug Tariff
http://www.nhsbsa.nhs.uk/PrescriptionServices/4940.aspx

LIST OF GPs ETC

PATIENT NAME
PATIENT ADDRESS
PATIENT ADDRESS

DATE NHS Number:

Your doctor has agreed a change to your prescription medication

Prescribing at the practice is regularly reviewed to make sure patients are receiving the most suitable and cost effective medication.

At the moment you take [name – drug A] [strength] [form] – [Dose].
This has been changed to a similar medication called [name – drug B] [strength] [form] – [Dose].

The new cream provides exactly the same dose as your old cream. The applicator is smaller so less cream is used each time, but as it is more concentrated it will provide exactly the same amount of estriol. Please discard all applicators that were used with your old cream.

Please note:

- The change will not affect the way your condition is managed; you will continue to be monitored by your doctor as before.
- Your next repeat prescription will be changed to [Drug B]. Please continue to use your current supply of [Drug A] as prescribed by your doctor until the pack is finished and you collect your new prescription.
- The new [Drug B] should be used as directed in this letter and on the prescription. **Do not use at the same time as [Drug A].**
- Please read the patient information leaflet provided with the new medication.
- This letter only refers to the change of [Drug A] to [Drug B]. All your other medication should be taken as prescribed by your GP.

I hope you are happy about the reasons for this change. If you have any concerns or notice any changes in your condition please contact the surgery.

Yours sincerely,

XXXXXXXXXX
Pharmacy Technician / Clinical Practice Pharmacist
On behalf of the doctors at XXXXXXXXXXXX

Appendix 4

Practice logo
Care home name …….
Your doctor has agreed a change to your resident's prescription medication Date……

Resident name / NHS number	D.O.B	Current prescribed item / dose/formulation / strength	Changed to	State if this is ; 1. Medication changed to brand 2. Medication changed to generic 3. Cost effective alternative 4. Any other reason e.g. out of stock	Any precautionary message

The change will not affect the way the condition is managed and will continue to be monitored by the doctor as before
Please inform your dispensing pharmacy of the change in order to remove the original item from the MAR chart to prevent duplication
Additional message
