

Is It Hot In Here?

(NAPSA)—If you're a woman in your 40s or 50s, you may find yourself complaining a lot about the heat, even in the middle of winter. That's because hot flashes are a common symptom of menopause, affecting about 75 percent of women.¹

Hot flashes may continue for some time. In fact, a recent study found they may last a decade or more, although it's important to note they vary in frequency and severity from person to person.²

It may be tempting to dismiss hot flashes as inconsequential, but for many women, the symptoms are severe and distressing.² They can wake you from much needed sleep (also known as night sweats) and interfere with activities of daily living.^{3,4} There are several steps you can take to deal with hot flashes. Dr. Richard E. Hedrick, Jr., FACOG, Hawthorne Medical Research, answers a few questions to separate myths and facts about hot flashes.

What is a hot flash?

A hot flash is a sudden feeling of heat in the body.⁴ It can happen at any time and be mild, moderate or severe. Symptoms of hot flashes vary but may include feelings ranging from moderate warmth to intense heat throughout the body, especially the head and neck; flushing or redness of the skin; perspiration, mostly on the upper body; and a chilled feeling as the hot flash subsides.^{1,4}

What causes hot flashes?

Declining estrogen levels are likely responsible for hot flashes associated with menopause, although science has yet to pinpoint the exact cause. Hot flashes may also be symptomatic of other medical conditions, and may even occur as a side effect to certain medications. Therefore, women should consult their health care practitioners to be sure their hot flashes are indeed a sign of menopause.¹

Divigel® is indicated for the treatment of moderate to severe vasomotor symptoms associated with menopause.

Important Safety Information

The following are not all the possible risks for DIVIGEL®. Please read the full Patient Information leaflet and talk to your healthcare provider.

Estrogens increase the chance of getting cancer of the uterus. Report any unusual vaginal bleeding right away while you are taking estrogens. Vaginal bleeding after menopause may be a warning sign of cancer of the uterus (womb). Your healthcare provider should check any unusual vaginal bleeding to find out the cause. In general, the addition of a progestin is recommended for women with a uterus to reduce the chance of getting cancer of the uterus.

Do not use estrogens, with or without progestins, to prevent heart disease, heart attacks, or strokes. Using estrogens, with or without progestins, may increase your chance of getting heart attacks, strokes, breast cancer, and blood clots.

Do not use estrogens, with or without progestins, to prevent dementia. Using estrogens, with or without progestins, may increase your risk of dementia.

Do not use estrogen products, including DIVIGEL®, if you have unusual vaginal bleeding, currently have or have had certain cancers, had a stroke or heart attack in the past year, currently have or have had blood clots, currently have or have had liver problems, are allergic to any DIVIGEL® ingredients, or think you may be pregnant.

The most common side effects for all estrogen products are headache, breast pain, irregular vaginal bleeding or spotting, stomach/abdominal cramps and bloating, nausea and vomiting, and hair loss. The less common but serious side effects include breast cancer, cancer of the uterus, stroke, heart attack, blood clots, dementia, gallbladder disease, and ovarian cancer.

In DIVIGEL® clinical trials, the most common side effects were inflammation of the nasal passages and pharynx, upper respiratory tract infection, vaginal yeast infection, breast tenderness and vaginal bleeding. Call your healthcare provider right away if you have any symptoms that concern you.

Estrogen products should be used at the lowest dose possible for your treatment and only as long as needed. You and your healthcare provider should talk regularly about whether you still need treatment with DIVIGEL®.

For more information, call 1-800-654-2299.

Please see full Prescribing Information, including black box and other warnings, at www.divigel.com.

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How can I manage my hot flashes?

Women have found relief from menopausal hot flashes with a variety of self-care methods. Try drinking a cool beverage as the hot flash begins, dressing in layers that can be removed when your temperature rises, and using sheets and clothing in breathable materials like cotton.³ Some women turn to alternative therapies like supplements, but long-term, scientifically controlled studies regarding safety and effectiveness are lacking.¹

What are my treatment options?

If self-help techniques don't do the trick, medications may be helpful. Prescription estrogens continue to be the most effective option for relieving the discomfort of hot flashes and night sweats associated with menopause.⁵ Your doctor may prescribe a bioidentical⁵ and FDA-approved estradiol gel, such as Divigel® (estradiol gel) 0.1%, that can be applied to the skin. Due to certain risk factors, estrogen therapy should be used at the lowest dose for the shortest time possible to treat symptoms.

For more information about hot flashes, talk to your doctor, and visit www.divigel.com to learn more about this treatment.

1 eMedicine Health. Hot Flashes. Available at: <http://www.emedicinehealth.com/script/main/art.asp?articlekey=98515&pf=3&page=1#overview>. Accessed 14 June 2011.

2 Freeman, Ellen W.; Sammel, Mary D.; Lin, Hui; Liu, Ziyue; Gracia, Clarisa R. Duration of Menopausal Hot Flashes and Associated Risk Factors. *Obstetrics & Gynecology*. 117(5):1095-1104, May 2011.

3 National Institute on Aging. What You Can Do for Hot Flashes and Other Menopausal Symptoms. Available at: <http://www.nia.nih.gov/HealthInformation/Publications/Menopause/what.htm>. Accessed 13 June 2011.

4 National Institute on Aging. AgePage: Menopause. Available at: <http://www.nia.nih.gov/healthinformation/publications/menopause.htm>. Accessed 13 June 2011.

5 North American Menopause Society. Menopause Guidebook. 6th ed. Cleveland, OH: North American Menopause Society; 2006.