

# Commonly Requested Compounding Ideas for Patients Needing Hormone Replacement Therapy (HRT)

## Progesterone

For more information, see PCCA Document #97711, **VersaBase Cream, Gel, Cosmetic HRT/Progesterone Study Results.**

PCCA Formula # 12114	Progesterone 10 mg/Gm to 100 mg/Gm Topical Cream (VersaBase®) (FormulaPlus™ BUD Bracketed Study)
PCCA Formula # 10797	Progesterone 100 mg Slow Release Capsules Size #1 (LoxOral®)
PCCA Formula # 3731	Progesterone 100 mg/mL Oil Sublingual Suspension
PCCA Formula # 12424	Progesterone 200 mg Rapid Dissolve Tablet (RDT-Plus™)
PCCA Formula # 12389	Progesterone 100 mg Rapid Dissolve Tablet (RDT-Plus™)
PCCA Formula # 12388	Progesterone 75 mg Rapid Dissolve Tablet (RDT-Plus™)
PCCA Formula # 12387	Progesterone 50 mg Rapid Dissolve Tablet (RDT-Plus™)
PCCA Formula # 12386	Progesterone 25 mg Rapid Dissolve Tablet (RDT-Plus™)

## Estriol/Estradiol

PCCA Formula # 12956	Estriol/Estradiol [50%/50%] 0.25 mg/Gm to 2.5 mg/Gm Topical Cream (VersaBase®) (FormulaPlus™ BUD Bracketed Study)
	Estriol/Estradiol [80%/20%] 5 mg/mL Topical Gel (VersaBase®)
PCCA Formula # 10241	Estriol/Estradiol [30%/70%] 1 mg/0.5 Gm Topical Cream
PCCA Formula # 10885	Estriol/Estradiol [50%/50%] 0.25 mg/0.5 Gm to 1 mg/0.5 Gm
PCCA Formula # 12116	Topical Cream (VersaBase®) (FormulaPlus BUD Bracketed Study)

## Estriol/Estradiol/Progesterone

PCCA Formula # 12115	Estriol/Estradiol [50%/50%] 0.25 mg/0.5 Gm to 1 mg/0.5 Gm/ Progesterone 5 mg/0.5 Gm to 50 mg/0.5 Gm Topical Cream (VersaBase®) (FormulaPlus BUD Bracketed Study)
PCCA Formula # 11304	Estriol/Estradiol [80%/20%] 0.1 mg/0.1 mL/Progesterone 10 mg/0.1 mL Topical Cream (VersaBase®)
PCCA Formula # 11296	Estriol/Estradiol [80%/20%] 2 mg/Progesterone 100 mg/ Testosterone 0.5 mg/DHEA 25 mg Slow Release Capsules Size #0 (LoxOral™)
PCCA Formula # 11297	Estriol/Estradiol [80%/20%] 2 mg/Progesterone 100 mg Slow Release Capsules Size #1 (LoxOral™)

## Testosterone

PCCA Formula # 11641	Testosterone 1% Topical Cream (VersaBase®) (FormulaPlus BUD Study)
PCCA Formula # 12967	Estriol/Estradiol [80%/20%] 0.25 mg/Gm to 2.5 mg/Gm/Testosterone 0.25 mg/Gm to 10 mg/Gm Topical Cream (VersaBase®) (FormulaPlus™ BUD Bracketed Study)
PCCA Formula # 12391	Testosterone 0.5 mg Rapid Dissolve Tablet (RDT-Plus™)
PCCA Formula # 12392	Testosterone 5 mg Rapid Dissolve Tablet (RDT-Plus™)

## DHEA

PCCA Formula # 12390	Dehydroepiandrosterone 25 mg Rapid Dissolve Tablet (RDT-Plus™)
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### **Commonly Requested Formulations for Patients with Vaginal Dryness or Atrophy**

*For more information, see PCCA Document #98289, Treatment Options for Vaginal Atrophy: What do the New Studies Show? by Annie DeReese; PCCA Document #99204, Women's Health and What You Need to Know by Sara Hover; and PCCA Document #99227, Estrogen Vaginal Preparations by Andrea Branvold-Herr.*

#### **Estriol**

PCCA Formula # 11115	Estriol 0.05% Vaginal Gel (MucoLox™/VersaBase®)
PCCA Formula # 12229	Estriol 0.025% to 1% Vaginal Cream (VersaBase®) (FormulaPlus BUD Bracketed Study)
PCCA Formula # 12488	Estriol 0.1%/Testosterone 0.1% Vaginal Gel (MucoLox™/VersaBase®)
PCCA Formula # 10568	Estriol 1 mg/0.25 mL/Testosterone 1 mg/0.25 mL Vaginal Cream

#### **Estradiol**

PCCA Formula # 12111	Estradiol 10 mcg Vaginal Suppository (Tablet Triturate 200 mg Mold)
PCCA Formula # 11958	Acidophilus 135 MU/Gm/Estradiol 0.01% Vaginal Gel (MucoLox™/VersaBase®)

#### **Estriol/Estradiol PCCA**

Formula # 13069	Estriol/Estradiol [50%/50%] 0.5 mg/0.5 Gm Vaginal Gel (MucoLox™/VersaBase®)
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#### **Other**

PCCA Formula # 11118	Hyaluronic Acid 5 mg/Gm Compound Vaginal Gel (MucoLox™/VersaBase®) <i>Non-hormonal option for patients with vaginal dryness.</i>
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### **Commonly Requested Formulas for Patients with Vulvodynia**

PCCA Formula # 11108	Amitriptyline HCl 2%/Baclofen 2% Vaginal Gel (MucoLox™)
PCCA Formula # 11110	Gabapentin 6% Vaginal Gel (MucoLox™/VersaBase®)

### **Commonly Requested Formulations for Patients with Female Sexual Dysfunction**

PCCA Formula # 11949	Aminophylline 3%/Arginine HCl 6% Topical Gel (MucoLox™)
PCCA Formula # 11948	Sildenafil 1%/Testosterone 0.1% Topical Gel (MucoLox™)
PCCA Formula # 11947	Testosterone 0.2% Vaginal Gel (MucoLox™/VersaBase®)

*The formulas and/or statements listed are provided for educational purposes only. They are compounding ideas that have commonly been requested by physicians, and have not been evaluated by the Food and Drug Administration. Formulas and/or material listed are not to be interpreted as a promise, guarantee or claim of therapeutic efficacy or safety. The information contained herein is not intended to replace or substitute for conventional medical care, or encourage its abandonment. Every patient is unique, and formulas should be adjusted to meet their individual needs.*