# Estrogens & Antiestrogens

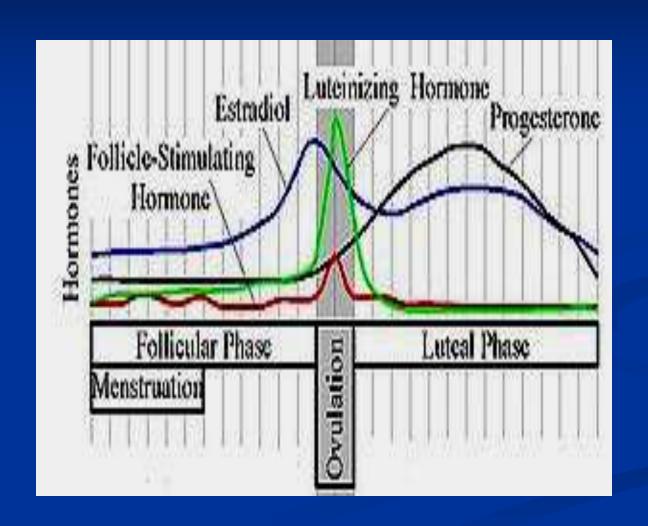
- Menstrual cycle... Changes and hormonal events
- Natural estrogens:

Estadiol >> Estrone > Estriol

Ineffective orally

Synthesis:

From cholesterol; role of aromatase enzyme in converting androgens (testosterone & androsteindione) to estrogen



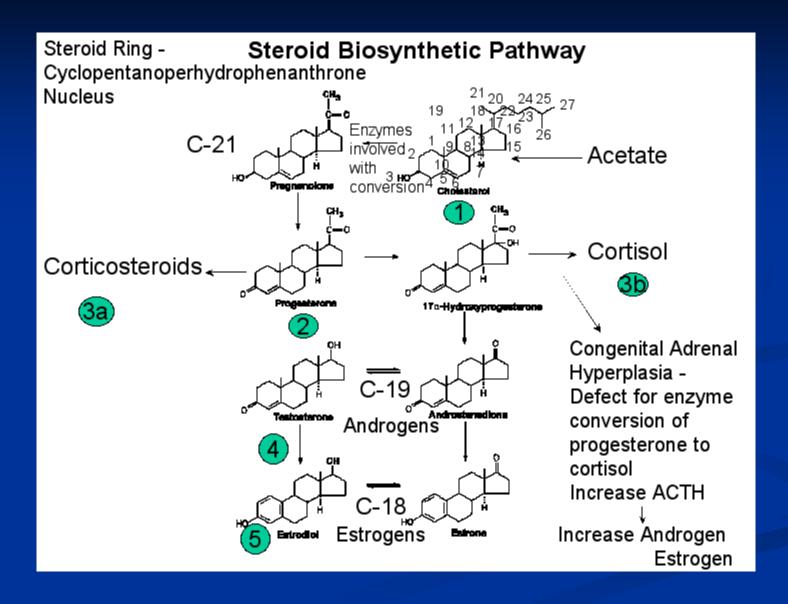
#### **■** Estrogen synthesis:

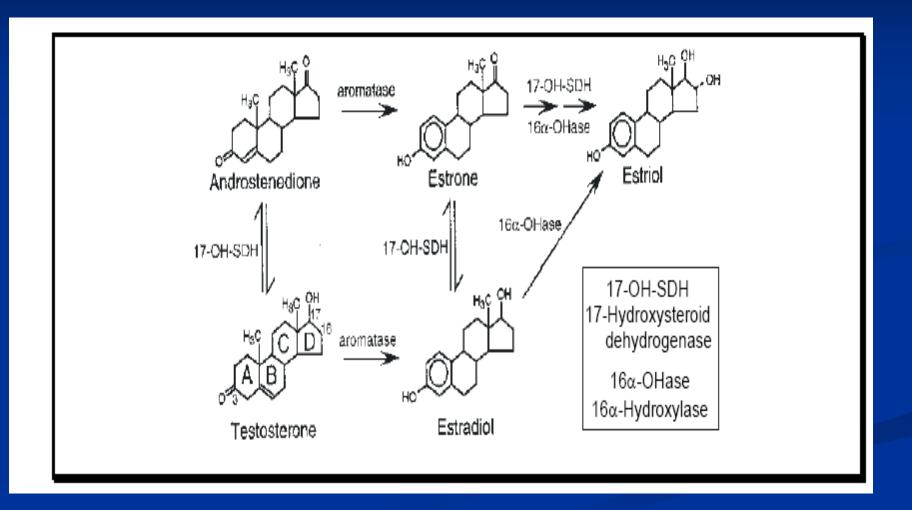
From cholesterol



Testosterone ← Androstenedione ← Hydroxyprog.







- **Transport:** SHBG
- **M.O.A:**

Estrogen receptors (ER-α; ER-β)

Modulation of gene transcription (nuclear receptors)

Stimulation of endometrial nitric oxide synthase → nitric oxide → vasodilatation

---- cardioprotection

## ■ Estrogen actions:

- 1° & 2° sexual characteristics of females
- Proliferation of the endometrium & follicular maturation
- ↑ elasticity of skin
- ↑ synthesis of certain globulins by the liver
- (SHBG, corticosteroid binding globulin & thyroid binding globulin)

## Cont. estrogen actions:

- ↑ synthesis of certain clotting factors
  (fibrinogen, factors VII; IX & X) and ↓
  activity of antithrombin III
- ↓ cholesterol, ↑ HDL & ↓ LDL blood levels
- Salt & water retention
- Absorption & metabolism of estrogens:
- Conjugation → enterohepatic circulation

- Estrogens clinical uses:
- HRT

Postmenopausal syndrome & osteoporosis, prevention of heart attacks

- Components of OCP's
- Prostate, breast, endometrial cancer + progesterone
- Dysmenorrhea
- Infertility
- Acne, hirsutism

- **■** Estrogen preparations:
- Synthetic steroidal Estradiol benzoate; Estradiol valarate Ethinylestradiol; Mestranol...
- Synthetic non steroidal estrogens Diethylstilbesterol
- Conjugated estrogens Estrone sulfonate

# ■ Estrogen side effects:

- Nausea & vomiting
- Headache, migrainous headache
- Dizziness, weight gain
- Salt & water retention  $\rightarrow \uparrow BP$
- † risk of thromboembolism and endometrial cancer
- Teratogenic effect

#### ■ Antiestrogens:

- \*\* Competitive antagonists at estrogen receptors:
- Tamoxifen & clomiphene citrate
- Tamoxifen is considered an estrogen agonist on bone and endometrium; long term use of tamoxifen could lead to endometrial cancer
- Tamoxifen acts also as an estrogen agonist in breast; so used in certain cases of breast cancer

Clomiphene citrate and tamoxifen act as estrogen antagonists at the level of the hypothalamus, so mainly used to manage infertility in  $\delta$ 's and  $\varphi$ 's

Clomiphene citrate and tamoxifen are given orally

- Selective estrogen receptor modulators (SERM's):
- Nonhormonal pharmacological agents that bind estrogen receptors producing agonistic activity in certain tissues (in bone) and estrogen antagonistic effect at other tissues (breast and endometrium)

#### Raloxifene

Orally effective SERM widely used in the management of osteoporosis (prophylactic and  $R_x$ )

Recently some researchers consider tamoxifen and clomiphene citrate as SERM

\*\*Aromatase inhibitors:

Nonselective: Aminoglutithemide

Selective: Anastrazole; Fadrozole

Mainly used in the management of breast cancer

# Progesterone

# **■** Biosynthesis:

From cholesterol

Feedback effects

#### ■ Physiological & Pharmacological effects:

- Endometrial differentiation, growth and development. Sudden withdrawal → bleeding (menses)
- Maintenance of pregnancy
- Breast development
- Vagina: ↓ cornification, ↑ mucus content
- Cervix: ↑ viscosity ↓ NaCl content
- Thermogenic effect
- Weak aldosterone-like effect

#### ■ Absorption & metabolism:

Progesterone is available in oral; depo (I.M) injectable and subdermal implants dosage forms

#### Preparations:

Medroxyprogesterone; Norethindrone acetate; Norethindrone; Norgestrel; Megesterol acetate; Hydroxyprogesterone caproate; Cyproterone acetate (Ca prostate); Dydrogesterone (IVF)

- Progesterone clinical uses:
- Components of OCP's
- Dysfunctional uterine bleeding
- Endometrial; breast; prostate cancer
- Abortion or maintaining pregnancy
- Endometriosis
- Progesterone side effects:

Depression; weight gain; salt-water retention

Antiprogestins:

Mifepristone

- **■** Clinical uses:
- Abortifacient + PG
- Induction of labor + PG
- Progesterone-dependent cancer
- Cushing's syndrome

# Contraception

# I. Male contraception:

- 1. Behavioral
- 2. Mechanical (e.g. condoms) ± spermicidal agent (nonoxynol-9)
- 3. Drugs
- Estrogens; progestins; danazol; GnRH agonists & antagonists; spermicidal agents; gossypol
- 4. Surgical procedures e.g. vasectomy

#### II. Female contraception:

- 1. Behavioral
- 2. Mechanical

Diaphrams; condoms ± spermicidal agents; IUD's ± progestins (progestasert)

- 3. Drugs
- Estrogen alone Morning after pill or postcoital pill

Ethinylestradiol; DES; mestranol..... ×5

- Progesterone alone
- The minipill
- \* Norethisteron... Tab
- \* I.M medroxyprogesterone
- Depo-provera (effect lasts in 3-6 months)
- \* Subdermal progesterone implants
- Levonorgesrel (effect lasts in 5-6 years)

# 4. Sequential

Estrogen followed by progesterone

- 5. Combined oral contraceptive pills (COCP's) ethinylestradiol or mestranol + Norgestrel ethinylestradiol or mestranol + Norethisterone
- \* Estrogen + progesterone in different ratios (lowest E highest P to achieve the lowest or zero failure rate)

### ■ MOA of OCP's:

- Inhibition of ovulation (major mechanism) At the level of the pituitary
- ↑ viscosity of cervical mucus
- Change in Fallopian tube motility

#### ■ OCP's side effects:

- Nausea, vomiting, dizziness, headache, migraine, nervousness, depression
- Salt & water retention  $\rightarrow \uparrow BP$
- Thromboembolic disease, embolism, MI
- Vaginal yeast growth
- Postpill amenorrhea and infertility

#### ■ OCP's contraindications:

- History of thromboembolic disease
- Severe headache
- Severe nausea & vomiting
- Liver dysfunction
- Pregnancy
- Abnormal menstrual cycles

- OCP's drug-drug interactions:
- Drugs inhibiting enterohepatic circulation
- Ampicillin; cephalosporins; teracyclines; sulfonamides; co-trimoxazole
- Drugs ↑ metabolism
- Phenobarbitone; phenytoin; ethosuximide; rifampicin; griseofulvin...
- Miscellaneous interactions
- + anticoagulants  $\rightarrow \downarrow$  activity of anticoag. + insulin
  - $\rightarrow \uparrow$  insulin need