Schatten & Licht e.V.
Initiative peripartale psychische Erkrankungen

Progesterone Therapy

to support the natural increase of progesterone levels in postpartum depression and postpartum psychosis in premenstrual syndrome (PMS) and in menopausal symptoms

Natural progesterone should always be used rather than synthetic forms.
Progesterone addresses only one of the factors that may contribute to PPD or PPP - namely the hormonal changes associated with the postnatal period. Other contributing factors should also be assessed and, where appropriate, addressed with medical and psychological support (see the Association's website).

Progesterone Cream:

After birth, apply 5% progesterone cream twice daily to the inner thighs or the inside of the upper arms. Depending on how you feel, and if there are signs that the dose may be too high (such as an unusually elevated mood or increased agitation), reduce to a 3% or 1% cream. The lower-strength cream may also be used for premenstrual syndrome (PMS), starting on day 12 of the menstrual cycle until menstruation begins again.

Supplier of the cream:
Klösterl-Apotheke, P.O. Box 100905, 80083 Munich, Germany,
Telephone: +49(0)89 54343211, Fax: +49(0)89 54343277,
A prescription and direct debit authorisation should be submitted to the pharmacy.

Formulation of the 3% cream (please ask for the ingredients to be printed on the prescription):
Progesteron 3,0 g; Vit. E nat. 1,5 g; Hautpflegesalbe W/L ohne Kons. (Apomix) ad 100,0 g; m. f. ungt.; PZN 09999011

Progestogel:

Progestogel is an alternative that is available on prescription from pharmacies. It is less concentrated and roughly comparable in strength to the 1% progesterone cream.

Oral Progesterone:

Progesterone capsules may be taken at doses ranging from 0-0-100-100 mg up to 100-100-100-200 mg for two weeks, followed by gradual dose reduction.

Sources of advice on hormonal health:

Hormonselbsthilfe Elisabeth Buchner, www.hormonselbsthilfe.de
Hormonselbsthilfe Schützenapotheke München, www.schuetzenapotheke-muenchen.de