

What Might Occur After Pellet Insertion For WOMEN

A significant hormonal transition will occur in the first four weeks after the insertion of your hormone pellets. *Therefore, certain changes might develop that can be bothersome* but most are temporary.

We are well-staffed with a knowledgeable hormone team that can answer your questions or address any concerns that may arise while you are on pellet therapy. Please call our office at 970-223-0193 and ask to speak to our medical assistant, or email us at hormonereplacement@alluraclinic.com. Our medical assistant can answer most questions and will contact one of our providers if necessary.

Fluid Retention: Testosterone stimulates the muscle to grow and retain water which may result in a weight change of two to five pounds. This is only temporary. This happens frequently with the first insertion, and especially during hot, humid weather conditions.

Swelling of the hands and feet: This is common in hot and humid weather. It may be treated by drinking lots of water, reducing your salt intake, and/or taking a mild diuretic which we are able to prescribe.

Uterine spotting or bleeding: This may occur in the first few months after an insertion, especially if your progesterone is not taken properly: missing doses or not taking a high enough dose. ***Bleeding may cause significant distress but is not necessarily an indication of a significant uterine problem.*** More than likely the uterus may be releasing tissue that needs to be eliminated. This tissue may have already been present in your uterus prior to getting pellets and is being released in response to the increase in hormones. Please notify the office if this occurs.

Breast tenderness, swelling and/or nipple sensitivity: These may develop with the first pellet insertion as an increase in estrogen sends more blood to the breast tissue. Increased blood supply is a good thing as it nourishes the tissue. ***Even so, breast tenderness and soreness is very uncomfortable.*** To combat the tenderness, an excellent treatment is a capsule of Oil of Evening Primrose 2-3 times per day. We can also prescribe a diuretic which will help reduce breast swelling and tenderness. Tenderness can be avoided by reducing your estrogen dose at your next insertion.

Mood swings and irritability: These may occur if you were quite deficient in hormones. They will disappear when the hormones are at therapeutic levels in your system.

Facial breakout: Some pimples may arise as your testosterone level increases. *This can be very distressing.* Acne lasts a short period of time and can be handled with a good face cleansing routine, astringents and/or toner. Acne can be avoided by adjusting the testosterone dose at your next appointment. If these solutions do not help, please call our office for suggestions and possibly a prescription for an antibiotic.

Hair loss: This can occur in patients who convert a larger percentage of testosterone to Dihydrotestosterone (DHT). DHT causes death of hair follicles. Hair thinning is not unusual when your testosterone levels are in flux, especially in the early months of hormone replacement. Adjusting your testosterone dosage in the subsequent appointment generally reduces or eliminates the problem. **Medibles Hair Repair Formula**, sold in our clinic, is often recommended to help block DHT.

Hair growth: Testosterone may stimulate some growth of hair on your chin, chest, nipples and/or lower abdomen. You may also have to shave your legs and arms more frequently. Adjusting or reducing your testosterone dose in the subsequent appointment generally eliminates or reduces the problem. Spironolactone is often prescribed to help block testosterone's effect on the hair follicles.