Estrogen Cream for Face: Does It Really Work?

There is a trend where There is a trend where people are taking people are taking vaginal cream, vaginal cream, particularly vaginal particularly vaginal estrogen cream, a estrogen cream, a prescription medication, and prescription medication, and applying it to their applying it to their face to combat face to combat aging. It's aging. It's actually all over actually all over social media social media and all platforms, and the "before" and " after" results look after" results look great. I mean, they look, they look amazing. But the question amazing. But the question here is, is here is, is it really worth doing? How it really worth doing? How safe is this? What's the safe is this? What's the point? Why point? Why do women use it and does do women use it and does it really work?

it really work? Is this confirmed by Is this confirmed by anything? So anything? So today I want to today I want to talk about talk about estrogen for the face estrogen for the face for anti- for anti- aging. Let's aging. Let's see what see what is actually true.

is actually true. To understand why To understand why topical estrogen topical estrogen works, we first works, we first need to talk need to talk about what about what happens to your happens to your skin in skin in perimenopause and perimenopause and menopause or what menopause or what happens as you happens as you age with your age with your skin. Most skin. Most women think that women think that skin aging skin aging is only due to is only due to sun exposure or sun exposure or aging, but aging, but skin changes in middle skin changes in middle age are largely age are largely due to due to due to hormonal hormonal hormonal aging. It is your aging. It is your hormones that have a hormones that have a huge impact on what huge impact on what happens to happens to your skin in general.

your skin in general. Estrogen receptors Estrogen receptors are located throughout the are located throughout the layers of the skin. layers of the skin. Dermal, Dermal, Dermal, epidermal layer.

epidermal layer. It controls It controls collagen production, collagen production, which is the degree of which is the degree of skin firmness, skin firmness, elasticity, elasticity, elasticity, mobility, and mobility, and hydration level. Therefore, hydration level. Therefore, when the work of the ovaries when the work of the ovaries slows down and slows down and estrogen production decreases, which, frankly,, which, frankly, can begin as early as can begin as early as 30 years old, your 30 years old, your skin suffers skin suffers enormous losses.

enormous losses. In fact, In fact, studies studies studies show that women show that women lose up to 30% of collagen during the collagen during the first 5 years of first 5 years of perimenopause. And perimenopause. And after that, it after that, it continues continues continues to decline by to decline by to decline by about 2% each year.

about 2% each year. Along with the loss of Along with the loss of collagen, collagen, collagen, there is a there is a there is a drop in drop in hyaluronic acid levels, which actually, which actually helps retain helps retain moisture in your skin.

moisture in your skin. She is like a natural She is like a natural sponge. This maintains skin elasticity and hydration. The skin elasticity and hydration. The epidermis, or epidermis, or top layer, top layer, thins, the skin thins, the skin barrier becomes more barrier becomes more fragile, and suddenly that retinol or retinol or vitamin C serum you've been vitamin C serum you've been using using using for a decade starts to starts to irritate or irritate or sting, or sting, or just doesn't have the just doesn't have the same effect as same effect as before. Topical before. Topical estrogen is not estrogen is not just a superficial just a superficial moisturizer. It moisturizer. It actually works at the actually works at the cellular level, cellular level, restoring lost restoring lost hormonal hormonal hormonal signaling signaling signaling directly in directly in the skin. So, it the skin. So, it helps rebuild helps rebuild collagen, help with collagen, help with hydration, generally hydration, generally keep your keep your skin supple and skin supple and toned. Here's what 99% of skincare advice skincare advice on social on social media gets wrong.

media gets wrong. They treat They treat estrogen as if estrogen as if it were one thing. But in it were one thing. But in biology, the type of biology, the type of estrogen and the type of estrogen receptor actually estrogen receptor actually matter. So, matter. So, your body has two your body has two main types of main types of estrogen receptors. So,. So, estrogen receptor alpha, which estrogen receptor alpha, which is actually found in is actually found in reproductive reproductive reproductive tissues like tissues like breast tissue breast tissue, uterus, and then, uterus, and then you have you have estrogen receptor beta, which is estrogen receptor beta, which is largely largely largely found in found in hormone-sensitive hormone-sensitive hormone-sensitive tissues. So the tissues. So the first receptor is the first receptor is the estrogen receptor estrogen receptor alpha, and it's alpha, and it's actually actually actually found found found primarily in primarily in reproductive reproductive reproductive tissues. So, tissues. So, breast tissue breast tissue, uterus, and that's like a, uterus, and that's like a pathway associated with pathway associated with hormone-sensitive hormone-sensitive hormone-sensitive cancers, in other cancers, in other words. This is a receptor words. This is a receptor that we that we even use to treat even use to treat cancer, unlike cancer, unlike estrogen receptor estrogen receptor beta, which is highly beta, which is highly concentrated concentrated concentrated in the skin. It is also in the skin. It is also found in found in skin fibroblasts skin fibroblasts and is highly and is highly concentrated in concentrated in the skin, particularly in the the skin, particularly in the dermal layer. It dermal layer. It controls controls controls collagen production, collagen production, wound healing, barrier function, wound healing, barrier function, and and and skin elasticity without stimulating skin elasticity without stimulating cell cell cell proliferation, like the proliferation, like the things we're things we're concerned about with concerned about with reproductive cancers reproductive cancers. So, when we. So, when we consider consider consider skin health, our goal is skin health, our goal is simple. We want to simple. We want to maximize maximize maximize stimulation of estrogen beta receptors estrogen beta receptors in the skin with minimal in the skin with minimal or no or no interaction with estrogen alpha receptors receptors receptors. In other. In other words, you want to words, you want to be able to be able to apply something apply something topically to your face, topically to your face, but you don't want but you don't want it to cause any hormonal any hormonal disruptions. And this disruptions. And this brings me directly back to the brings me directly back to the question of local question of local estrogens. And I estrogens. And I often get asked, often get asked, should I should I use use use estradiol or estriol?

estradiol or estriol? Because there are Because there are three types of estrogens in the body, three types of estrogens in the body, but the predominantly but the predominantly active ones that we active ones that we use use use specifically for specifically for topical topical topical use are use are estradiol versus estradiol versus estriol. So let's estriol. So let's dig into this dig into this a little deeper because a little deeper because these are the two formulas that these are the two formulas that most women use. They most women use. They use either estradiol vaginal cream, which estradiol vaginal cream, which is a 0.1% vaginal cream. This is the vaginal cream.

Estradiol vs. Estriol: Which Is Better for Your Skin?

This is the strongest, strongest, strongest, most bioactive most bioactive form of estrogen that form of estrogen that we use. we use. So, estradiol is the So, estradiol is the active form in active form in the body, the human the body, the human body. Therefore, he body. Therefore, he uses uses uses a kind of " shotgun" approach. It shotgun" approach. It binds with high binds with high affinity to both affinity to both alpha and beta receptors. That's why receptors. That's why it works so well it works so well in mucosal tissues in mucosal tissues. So, down. So, down in the vagina, when we in the vagina, when we need to improve need to improve the condition of the vaginal the condition of the vaginal tissue, we tissue, we use use use estradiol or estradiol or vaginal vaginal vaginal estrogen cream.

estrogen cream. The problem is The problem is that estradiol that estradiol can be too can be too strong. Sometimes when strong. Sometimes when you apply it to you apply it to areas of the skin on your areas of the skin on your face, it can face, it can cause systemic cause systemic absorption into the absorption into the body, and it's also body, and it's also quite thick and quite thick and heavy and heavy and was actually intended for was actually intended for vaginal tissue.

vaginal tissue. Therefore, when applied to Therefore, when applied to the face, women may the face, women may know that it is quite know that it is quite sticky, it clogs sticky, it clogs pores. Hmm, this is definitely not the pores. Hmm, this is definitely not the best choice for best choice for people with melasma people with melasma as it can

as it can upregulate upregulate upregulate melanocyte activity. So, melanocyte activity. So, they may get they may get more pigmentation more pigmentation from vaginal from vaginal estrogen on their face.

estrogen on their face. Compared to Compared to estriol, this is a weaker estriol, this is a weaker cream. It is usually a 0.3% compounded cream. It is compounded cream. It is weaker, much more weaker, much more selective only selective only for for for skin estrogen receptors.

skin estrogen receptors. In fact, In fact, studies studies studies show that it show that it preferentially preferentially preferentially binds to beta receptors in the skin.

So the advantage So the advantage is that you is that you can can can target just the target just the skin, and it stimulates skin, and it stimulates collagen synthesis, collagen synthesis, improves improves improves skin thickness, increases skin thickness, increases hydration—all of the things hydration—all of the things that estrogen essentially does that estrogen essentially does, and that you, and that you need to restore.

need to restore. It simply It simply binds specifically to binds specifically to skin receptors. There are clinical There are clinical studies studies studies lasting about 12 lasting about 12 weeks that show that estriol cream that estriol cream significantly improves skin firmness and elasticity. And skin firmness and elasticity. And it helps you it helps you feel good without feel good without being too being too thick, overly thick, overly rich, or greasy, rich, or greasy, like vaginal estrogen can be. And it may even be. And it may even be better for women who better for women who may be may be sensitive because sensitive because it is a weaker estrogen.

it is a weaker estrogen. And so it generally feels a little lighter on the feels a little lighter on the skin. Good. So, skin. Good. So, before you run before you run for a prescription for for a prescription for estriol for the face, estriol for the face, there are two important there are two important clinical rules clinical rules you need to know.

So, first, melasma So, first, melasma can get worse. So, if you So, if you suffer from suffer from active active active uncontrolled uncontrolled uncontrolled melasma or a melasma or a cluster of cluster of cluster of hyperpigmentation hyperpigmentation hyperpigmentation that often appears as a that often appears as a streak on your face, then streak on your face, then you need to proceed you need to proceed with caution as with caution as estriol and estriol estriol and estriol can trigger can trigger pigment formation. And pigment formation. And it activates melanin.

it activates melanin. Therefore, it is important that it Therefore, it is important that it activates melanocytes, which produce, which produce melanin. So if melanin. So if your melasma is your melasma is really flaring up, really flaring up, or you really or you really can't control your can't control your melasma, or even melasma, or even if you have melasma and if you have melasma and you just want to you just want to avoid it, then I would avoid it, then I would just avoid all just avoid all estrogenic estrogenic estrogenic products on your face.

products on your face. And you should always And you should always use use use good good good UV protection, such UV protection, such as as as sunscreen. And you sunscreen. And you should always be should always be careful with careful with hormone replacement hormone replacement therapy for melasma.

therapy for melasma. Rule number two: Rule number two: Topical estriol is not Topical estriol is not systemic hormone replacement systemic hormone replacement therapy, which therapy, which means it won't means it won't work for work for hot flashes, night hot flashes, night sweats, even the sweats, even the topical topical topical vaginal vaginal vaginal estrogen I estrogen I mentioned. It doesn't have mentioned. It doesn't have enough enough enough estrogen to estrogen to affect your brain, bones, or muscles. So, topical estrogen is just an additional is just an additional formula to add to formula to add to your your your hormone replacement therapy. Okay, so in. Okay, so in conclusion, you can conclusion, you can skip the skip the skip the off- off- label vaginal estradiol and label vaginal estradiol and actually actually actually use use use estriol, which is more estriol, which is more specific to specific to your skin. It your skin. It safely provides safely provides these anti- these anti- aging collagen benefits aging collagen benefits that topical that topical estrogen provides. I offer estrogen provides. I offer you both options: you both options: vaginal estrogen vaginal estrogen and estriol. Personally, and estriol. Personally, I think topical I think topical estriol is better estriol is better because it is specific because it is specific to skin

receptors to skin receptors and has more and has more clinical data. It is clinical data. It is known for known for promoting promoting promoting collagen production, hydration, collagen production, hydration, and an overall and an overall increase in increase in skin elasticity. But you can skin elasticity. But you can use use use vaginal estrogen if you already have a if you already have a prescription and you're prescription and you're trying to trying to use it as well.

use it as well. Just talk to Just talk to your doctor about your doctor about your specific changes your specific changes and, in particular, the medications and, in particular, the medications you are taking to you are taking to make sure there are make sure there are no contraindications.

no contraindications. Okay, to conclude Okay, to conclude this video, you this video, you can can can use a use a use a vaginal cream with vaginal cream with estrogen. You can also estrogen. You can also use a use a facial cream with facial cream with estriol, as estriol, as it is more skin-specific. I usually skin-specific. I usually prescribe more prescribe more estriol cream, estriol cream, but both require but both require prescriptions, so you prescriptions, so you need to talk need to talk to your doctor about to your doctor about what other medications you what other medications you can take. So, can take. So, if you're noticing if you're noticing changes other than your changes other than your skin and you're wondering skin and you're wondering if your hormones are if your hormones are okay? What's okay? What's happening to my happening to my hormones?

hormones? hormones?

Safety, Melasma & What You Need to Know Before Using It

Watch my Watch my next video about the next video about the lab test lab test that every woman that every woman over 35 over 35 should request from should request from her doctor to her doctor to get more get more information about what's information about what's going on with going on with your hormones.

your hormones. See you later See you later.