Objective: Comparison of changes on Quality of Life (QoL) after topical promestriene [Colpotrophine®], estriol plus lactobacillus acidophilus [Viviflor®] for urogenital ageing symptoms.

Methods: prospective study on 351 postmenopausal women followed up 12 months, divided in three groups: promestriene (118), estriol plus lactobacillus (119), placebo (114). QoL self administered questionnaires (0-100 points) (after McKenna, 1999), including sitting, long walks, using public transport, paid employment, sleeping, relationship with family, with sexual partner. Clinical examinations, QoL questionnaires performed at baseline, at 3, 12 months.

Statistic analysis: paired-sample t-test/independent-samples t-test.

Results: Baseline symptoms: vaginal 57/49/47.3%; urinary 45/40/33%, sexual: 39/36/65%. 3 months the restoration of vaginal dryness: 39/40/62%, for urinary symptoms: 36/31/30%, for sexuality 31/29/61%. 12 month: vaginal dryness 31/37/47%, urinary symptoms 30/21/36%, sexuality 15/22/46%.

Postmenopausal urogenital ageing symptoms induced a prestudy QoL mean score of 36.44±11.78/36.93±12.05/36.62±12.48, and after 12 months 45.25±8.545/45.5±9.72/35.88±7.47. There was statistical significant increase in QoL scores after promestriene (p< 0.0005, mean increase 8.81 points, 95% CI, 7.27-10.35), estriol plus lactobacillus (p< 0.0005, mean increase 8.57 points, 95% CI, 7.15-10), and no statistical difference in placebo (p=0.396).

Compared to placebo, there was a statistical increase (p< .0005) in QoL at 12 months scores in both promestriene/estriol plus lactobacillus groups.

Conclusions: Vaginal treatment influenced positively the QoL, and compared to placebo the restoration of vaginal, urinary, and sexual symptoms are observed after 3 months with maintaining results at 12 months.

Key words: postmenopause, vaginal treatment, quality of life.