

A Durable Therapy for Urogenital Syndrome with Vitamin E and Ozonides

Hakpeug Toiccharekibe*

Department of Gynaecology and Obstetrics, The University of Jordan, Amman 11942, Jordan

Introduction

Vaginal dryness, itching, burning, dyspareunia, and urinary symptoms are some of the symptoms of Genitourinary Syndrome of Menopause (GSM), a common illness that affects postmenopausal women. GSM is brought on by a drop in estrogen levels during menopause, which alters the tissues of the urethra and vagina, reduces lubrication, and makes the body more vulnerable to infections. Estrogen-based treatments, such as local estrogen infusion or hormone replacement therapy (HRT), are the mainstay of current GSM therapeutic options [1]. However, the investigation of alternate treatments has been spurred by worries about the safety and adverse consequences of estrogen therapy. A new formulation called Ozoil-E, which contains vitamin E acetate and stable ozonides, has shown promise as a non-hormonal treatment for GSM. The goal of this thorough review is to present a thorough examination of the scientific data demonstrating Ozoil-E's effectiveness, safety, and modes of action in the management of GSM. Although estrogen therapy successfully improves lubrication, increases tissue elasticity, and restores vaginal epithelial integrity, concerns about its safety profile especially in women with a history of breast cancer, cardiovascular disease, or thromboembolic events have led to the investigation of alternative treatment modalities.

Moreover, some women may want non-hormonal alternatives because of contraindications to estrogen therapy or personal preferences. In this regard, a major breakthrough in the treatment of GSM has been made with the creation of Ozoil-E, a unique formulation made up of stable ozonides and vitamin E acetate. By focusing on important facets of vaginal health and function, Ozoil-E provides a comprehensive strategy for addressing the intricate pathophysiology of GSM. Stable ozonides made from medical-grade ozone have strong antibacterial qualities and can fight off a variety of pathogens, including as bacteria, fungi, and viruses, that are linked to vaginal infections. Additionally, ozonides reduce inflammation and encourage tissue growth, which helps the vaginal epithelium heal from damage and eases symptoms like burning, itching, and discharge [2].

Description

Vitamin E acetate is a strong antioxidant and tissue-protective agent that enhances the antibacterial and anti-inflammatory effects of ozonides. By scavenging free radicals produced during oxidative stress, vitamin E acetate protects the structural integrity of vaginal tissues and avoids cellular damage. Additionally, GSM's distinctive vaginal dryness and atrophy are countered by vitamin E acetate, which improves skin barrier function and

moisturization. Vitamin E acetate reduces dyspareunia and improves sexual satisfaction in postmenopausal women by reestablishing vaginal lubrication and suppleness. Ozoil-E's stable ozonides and vitamin E acetate provide a thorough therapeutic approach to treating the various symptoms of GSM, addressing the condition's underlying etiology as well as its symptomatology [3,4].

Promising outcomes have been shown in clinical trials assessing Ozoil-E's safety and effectiveness in women with GSM. Comparing Ozoil-E to a placebo or traditional treatments, randomized controlled trials have demonstrated notable reductions in vaginal dryness, itching, dyspareunia, and urine symptoms after therapy. Additionally, Ozoil-E has been well tolerated, with little side effects documented. Ozoil-E's good safety record makes it a desirable substitute for estrogen-based treatments, especially for women who have contraindications or are wary of hormonal therapies. Additionally, Ozoil-E has the benefit of being simple to administer it only needs to be applied intravaginally once a day or as needed which improves patient convenience and compliance [5].

Conclusion

To sum up, Ozoil-E is a potentially effective non-hormonal treatment for menopausal genitourinary condition. Ozoil-E successfully treats the many symptoms of GSM, such as vaginal dryness, burning, itching, dyspareunia, and urinary problems, by utilizing the combined therapeutic effects of stable ozonides and vitamin E acetate. Ozoil-E is effective in reducing symptoms and enhancing vaginal health in postmenopausal women because of its antibacterial, anti-inflammatory, antioxidant, and tissue-regenerative qualities. Ozoil-E is a safe and tolerable alternative to estrogen-based treatments for women with GSM, according to clinical evidence. To clarify Ozoil-E's long-term effectiveness and possible advantages in wider patient populations and to improve treatment regimens for customized care, more research is necessary.

Acknowledgement

None.

Conflict of Interest

There are no conflicts of interest by author.

References

1. Ronsini, Carlo, Irene Iavarone, Natalino Lacerenza and Giada Andreoli, et al. "Stable ozonides plus vitamin E acetate (Ozoil-E) for treatment of genitourinary syndrome." *Medicina* 60 (2025): 880.
2. Marnach, Mary L., Jenna N. Wygant and Petra M. Casey. "Evaluation and management of vaginitis." *Mayo Clin Proc* 97 (2022): 347-358.
3. Stika, Catherine S. "Atrophic vaginitis." *Dermatol Ther* 23 (2010): 514-522.

*Address for Correspondence: Hakpeug Toiccharekibe, Department of Gynaecology and Obstetrics, The University of Jordan, Amman 11942, Jordan, E-mail: behak@gmail.com

Copyright: © 2025 Toiccharekibe H. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original author and source are credited.

Received: 02 January, 2025, Manuscript No. VTE-25-164277; **Editor Assigned:** 04 January, 2025, PreQC No. P-164277; **Reviewed:** 16 January, 2025, QC No. Q-164277; **Revised:** 21 January, 2025, Manuscript No. R-164277; **Published:** 28 January, 2025, DOI: 10.37421/2376-1318.2025.14.354

4. Mac Bride, Maire B., Deborah J. Rhodes and Lynne T. Shuster. "Vulvovaginal atrophy." *Mayo Clin Proc* 85 (2010): 87-94.
5. Muhleisen, Alicia L. and Melissa M. Herbst-Kralovetz. "Menopause and the vaginal microbiome." *Maturitas* 91 (2016): 42-50.

How to cite this article: Toiccharekibe, Hakpeug. "A Durable Therapy for Urogenital Syndrome with Vitamin E and Ozonides." *Vitam Miner* 14 (2025): 354.