Genitourinary syndrome of menopause (GSM) is a frequently seen condition affecting women in postmenopausal age, which is characterized by a collection of symptoms like vaginal irritation, dryness, and pain during sexual intercourse. While hormone therapy has long been the go-to treatment for GSM, nonhormonal options are gaining recognition for their efficacy and safety in managing these distressing symptoms.

Nonhormonal treatments offer a promising alternative for women who are unable to take hormonal medications due to medical conditions, including breast cancer survivors or personal preferences. These therapies not only target the symptoms of GSM but also focus on improving overall vaginal health and quality of life through non-invasive and natural approaches.

The critical nonhormonal treatment modalities for GSM are vaginal moisturizers and lubricants. Continuous daily topical application of moisturizers helps restore moisture and elasticity to the vaginal tissues, alleviating discomfort and pain associated with dryness. Regular use of water, silicon, or oil-based lubricants hours before intercourse can significantly improve sexual function and reduce the negative impact of GSM on a woman’s well-being (1). Daily, ongoing, or at least three months of use of hyaluronic acid polymers in topical forms, injections, capsules, or pessaries can also be beneficial (2). As a neuropeptide hormone, topical oxytocin may be applied intravaginally in a daily manner continuously or for 30-day periods (3). Topical application of CO₂ laser or Erbium: YAG laser every 4-6 weeks for 12 weeks is also highly effective (4).

In addition to topical products, lifestyle modifications and dietary changes can also be crucial in managing GSM symptoms. Maintaining a healthy weight, staying hydrated, and consuming foods rich in phytoestrogens and omega-3 fatty acids have been shown to support vaginal health and reduce inflammation in the genitourinary tract (5). In patients preferring oral medications, daily intake of a selective estrogen receptor modulator, ospemifene, for 12 weeks or one year is an excellent alternative to topical applications (6).

Furthermore, physical therapy and pelvic floor exercises have emerged as valuable nonhormonal interventions for GSM. These techniques help strengthen the pelvic muscles, improve blood flow to the genital area, and enhance sexual sensation, leading to increased comfort and pleasure during intercourse (7).

As we continue to expand our understanding of GSM and its impact on women’s lives, it is essential to embrace a holistic approach to treatment that incorporates both hormonal and nonhormonal options. By offering various evidence-based therapies tailored to individual preferences and needs, healthcare providers can empower women to take control of their vaginal health and well-being.

In conclusion, the growing body of research supporting nonhormonal treatments for GSM highlights the importance of exploring diverse therapeutic modalities to address this prevalent condition. By tapping into the power of natural remedies, lifestyle modifications, and physical interventions, we can revolutionize the care and management of GSM.
management of genitourinary syndrome, promoting a healthier and more fulfilling postmenopausal experience for women everywhere.

**Conflict of Interests**
None.

**Ethical Issues**
Not applicable.

**References**