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2. Menotropins

Menotropins

Generic name: menotropins [*MEN-oh-troe-pins*]

Brand names: [Menopur](#), [Pergonal](#), Humegon, [Repronex](#)

Dosage form: subcutaneous powder for injection (75 intl units)

Drug class: [Gonadotropins](#)



[Medically reviewed](#) by Drugs.com on Aug 4, 2023. Written by [Cerner Multum](#).

[Uses](#) [Side effects](#) [Warnings](#) [Before taking](#) [Dosage](#) [Interactions](#)

What are menotropins?

Menotropins are a mixture of follicle-stimulating hormone (FSH) and luteinizing hormone (LH). FSH and LH are important in the development of follicles (eggs) that are produced by the ovaries in women.

Menotropins are used to help your body produce multiple eggs during ovulation, in preparation for in-vitro fertilization.

Menotropins may also be used for purposes not listed in this medication guide.

Menotropins side effects

Get emergency medical help if you have **signs of an allergic reaction:** hives; difficult breathing; swelling of your face, lips, tongue, or throat.

Some women using menotropins develop a condition called ovarian hyperstimulation syndrome (OHSS), especially after the first treatment. **OHSS can be a life threatening condition.** Stop using menotropins, do not have sexual intercourse, and call your doctor right away if you have any of the following symptoms of OHSS:

- stomach pain, bloating;
- nausea, [vomiting](#), [diarrhea](#);
- rapid weight gain, especially in your face and midsection;
- little or no urinating; or
- pain when you breathe, rapid heart rate, feeling short of breath (especially when lying down).

Also call your doctor at once if you have:

- chest pain, dry cough, feeling short of breath (especially when lying down);
- **signs of a stroke**--sudden numbness or weakness (especially on one side of the body), sudden severe [headache](#), slurred speech, problems with vision or balance;

- **signs of a blood clot in the lung**--chest pain, sudden cough, [wheezing](#), rapid breathing, coughing up blood; or
- **signs of a blood clot in your leg**--pain, swelling, warmth, or redness in one or both legs.

Common side effects of menotropins may include:

- stomach cramps or bloating;
- headache; or
- pain, swelling, or warmth where the medicine was injected.

This is not a complete list of side effects and others may occur. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

 [Menotropins side effects](#) (more detail)

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Warnings

You should not use this medicine if you have [primary ovarian failure](#), abnormal vaginal bleeding, uncontrolled thyroid or [adrenal gland disorders](#), an ovarian cyst, [breast cancer](#), uterine or [ovarian cancer](#), a tumor of your pituitary gland or hypothalamus, or infertility that is not caused by lack of ovulation.

Do not use menotropins if you are pregnant.

Before taking this medicine

You should not use menotropins if you are allergic to menotropins, or if you have:

- a condition called primary ovarian failure;
- cancer of the breast, uterus, or ovary;
- an untreated or uncontrolled disorder of your thyroid or adrenal gland;
- infertility that is not caused by lack of ovulation;
- abnormal vaginal bleeding that has not been checked by a doctor;
- an ovarian cyst or enlarged ovaries;
- a tumor of your pituitary gland or hypothalamus; or
- if you are pregnant or breast-feeding.

Menotropins will not cause ovulation if your ovaries are not functioning properly.

Your doctor will perform blood tests and a pelvic exam to make sure you do not have conditions that would prevent you from safely using menotropins.

Your male sexual partner's fertility should also be checked before you are treated with menotropins.

To make sure menotropins are safe for you, tell your doctor if you have:

- asthma;
- a history of stomach surgery;
- a history of ovarian cyst or "torsion" (twisting) of your ovary; or
- risk factors for blood clots (such as [diabetes](#), smoking, [heart disease](#), [coronary artery disease](#), being [overweight](#), having a family history of coronary artery disease).

Using menotropins can increase your chances of having a multiple pregnancy (twins, triplets, quadruplets, etc). A multiple pregnancy is a high-risk pregnancy for the mother and for the babies. Follow your doctor's instructions about any special care you may need during your pregnancy.

Menotropins may also increase your risk of tubal pregnancy, miscarriage, stillbirth, [premature labor](#), birth defects, or fever after childbirth if you become pregnant after being treated with this medicine. Talk with your doctor if you are concerned about these risks.

Although menotropins can help you become pregnant, this medicine can harm an unborn baby or cause birth defects. **Do not use menotropins if you are already pregnant.** Tell your doctor right away if you become pregnant during treatment.

It is not known whether menotropins pass into breast milk. **Do not** use menotropins without first talking to your doctor if you are breast-feeding a baby.

How should I use menotropins?

Follow all directions on your prescription label. Your doctor may occasionally change your dose to make sure you get the best results. Do not use this medicine in larger or smaller amounts or for longer than recommended.

This medicine is injected under the skin. You may be shown how to use injections at home. Do not self-inject this medicine if you do not understand how to give the injection and properly dispose of used needles and syringes.

Menotropins come in a powder medicine that must be mixed with a liquid (diluent) before using it. If you are using the injections at home, be sure you understand how to properly mix and store the medicine.

Read all patient information, medication guides, and instruction sheets provided to you. Ask your doctor or pharmacist if you have any questions.

Gently swirl the medicine after mixing. **Do not shake the mixed medicine** or it may foam. Prepare your dose only when you are ready to give an injection, do not save it for later use. Do not use if the mixture has changed colors or has particles in it. Call your pharmacist for new medicine.

You may need to use more than 1 vial of menotropins for your entire dose.

After giving the injection, throw away any portion of the mixed medicine that is not used right away. Do not save it for later use.

For the best results from your fertility treatments, follow your doctor's instructions very carefully.

Use a disposable needle and syringe only once. Follow any state or local laws about throwing away used needles and syringes. Use a puncture-proof "sharps" disposal container (ask your pharmacist where to get one and how to throw it away). Keep this container out of the reach of children and pets.

To be sure the medicine is effective, you will need frequent blood tests and [ultrasound](#) exams. You may also need to record your temperature on a daily chart.

Store unmixed powder medicine at room temperature away from moisture, heat, and light.

You may also store the powder in a refrigerator. Do not freeze.

Infertility is often treated with a combination of drugs. Use all medications as directed by your doctor. Read the medication guide or patient instructions provided with each medication. **Do not change your doses or medication schedule without your doctor's advice.**

Menotropins dosing information

Usual Adult Dose for Follicle Stimulation:

Assisted reproduction technologies (ART):

Initial dose:

-225 International Units subcutaneously (SC) or intramuscularly (IM) daily.

-Menotropin may be administered together with [urofollitropin](#), and the total combined dose should not exceed 225 international units (150 international units menotropin and 75 international units urofollitropin, or 75 international units menotropin and 150 international units urofollitropin).

Maximum dose:

-450 international units daily

-If given with urofollitropin, the total combined dose of urofollitropin and menotropin should not exceed 450 international units daily.

Duration of therapy: 7 to 20 days

Comments:

-Continue treatment until adequate follicular development is evident, then administer human chorionic gonadotropin (hCG).

-Withhold hCG if monitoring on the last day of therapy suggests an increased risk of ovarian hyperstimulation syndrome (OHSS).

[Ovulation induction:](#)

Initial dose: 150 international units SC or IM daily for the first 5 days of treatment.

Maximum dose: 450 international units daily

Duration of therapy: 7 to 12 days

Comments:

- If patient response is appropriate, give hCG 1 day after the last dose of menotropin.
- If inadequate follicle development or ovulation without subsequent pregnancy, treatment may be repeated.

Uses:

- Development of Multiple Follicles and Pregnancy in Ovulatory Women as Part of an Assisted Reproductive Technology (ART) Cycle
- Ovulation induction in patients who have previously received pituitary suppression

 [Detailed Menotropins dosage information](#)

What happens if I miss a dose?

Call your doctor for instructions if you miss a dose of menotropins.

What happens if I overdose?

Seek emergency medical attention or call the Poison Help line at 1-800-222-1222.

What should I avoid while using menotropins?

Follow your doctor's instructions about any restrictions on food, beverages, or activity.

What other drugs will affect menotropins?

Other drugs may interact with menotropins, including prescription and over-the-counter medicines, [vitamins](#), and [herbal products](#). Tell each of your health care providers about all medicines you use now and any medicine you start or stop using.

 [Menotropins drug interactions](#) (more detail)

Does menotropins interact with my other drugs?

Enter medications to view a detailed interaction report using our [Drug Interaction Checker](#).

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Other brands

[Menopur](#)

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Further information

Remember, keep this and all other medicines out of the reach of children, never share your medicines with others, and use this medication only for the indication prescribed.

Always consult your healthcare provider to ensure the information displayed on this page applies to your personal circumstances.

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DRUG STATUS

Availability

Rx Prescription only

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 Risk data available

CSA Schedule*



N/A Not a controlled drug

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