A.15 Estradiol – induction of puberty – EML	
Draft recommendation	⊠ Recommended
	□ Not recommended
	Justification:
	Although the conditions (ovarian failure) that need the proposed medications are rare, yet it is currently still the preferred treatment for the condition. Therefore, the availability of these medications is essential for treatment of the conditions.
Does the proposed medicine address a relevant public health need?	⊠ Yes
	□No
	☐ Not applicable
	Comments:
	The conditions that need the medication is quite rare, however the specific population that need the treatment would benefit the availability of the proposed medication in their country.
	Currently there is no medicine indicated for puberty induction in the EML.
Does adequate evidence exist for the	⊠ Yes
efficacy/effectiveness of the medicine for the proposed indication?	□ No
(this may be evidence included in the application, and/or additional evidence identified during the review process)	□ Not applicable
	Comments:
	Recommend as the preferred treatment approach for puberty induction or to sustain puberty in girls although the recommendation is based on low level of evidence. Although the guideline stated a clear preference toward bioidentical human oestrogens (oestradiol/17 β -oestradiol E2) compare to non-bioidentical, synthetic or derived from animal sources oestrogen, it doesn't any preference toward certain route of administration (oral vs patch).
Does adequate evidence exist for the	⊠ Yes
safety/harms associated with the proposed medicine?	□ No
(this may be evidence included in the	□ Not applicable
application, and/or additional evidence	Comments:
identified during the review process)	Considered safer than other types of sex hormones ²

¹ Nordenström A, Ahmed SF, van den Akker E, et al. Pubertal induction and transition to adult sex hormone replacement in patients with congenital pituitary or gonadal reproductive hormone deficiency: an Endo-ERN clinical practice guideline. Eur J Endocrinol. 2022;186(6):G9-G49. Published 2022 Apr 21. doi:10.1530/EJE-22-0073

² Dunkel L, Quinton R. Induction of puberty. European Journal of Endocrinology. 2014;170:R229–R239

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Are there any adverse effects of	☐ Yes
concern, or that may require special monitoring?	⊠ No
9	□ Not applicable
	Comments: use of small-dose
Are there any special requirements for	⊠ Yes
the safe, effective and appropriate use of the medicines?	□No
(o.g. laboratory diagnostic and /or	□ Not applicable
(e.g. laboratory diagnostic and/or monitoring tests, specialized training for	Comments:
health providers, etc)	The conditions should be managed by endocrinologist
Are there any issues regarding cost,	☐ Yes
cost-effectiveness, affordability and/or access for the medicine in different settings?	⊠ No
	□ Not applicable
	Comments:
	The medicine is affordable
Are there any issues regarding the registration of the medicine by national	☐ Yes
regulatory authorities?	⊠ No
(e.g. accelerated approval, lack of	□ Not applicable
regulatory approval, off-label indication)	Comments:
	Has been approved by FDA, EMA, Australian Government, Health Canada, Japanese PMDA
	Available in the EML of 60+ countries, including the LMICs ³
Is the proposed medicine	□ Yes
recommended for use in a current WHO guideline?	□No
(refer to:	☑ Not applicable
https://www.who.int/publications/who-	Comments: No WHO guideline existed for these conditions.
guidelines)	

 $^{^3\} https://global.essentialmeds.org/dashboard/medicines/695$