

Venlafaxine modestly improves postmenopausal vasomotor symptoms

Clinical question Is venlafaxine effective therapy for postmenopausal vasomotor symptoms?

Bottom line Venlafaxine (Efexor) provides modest subjective improvement in postmenopausal vasomotor symptoms. However, women experience side effects of dry mouth, drowsiness and decreased appetite that may be sufficient for them to decide to stop therapy.

Synopsis There is a heightened need for non-hormonal approaches to treatment of postmenopausal vasomotor symptoms since the publication of results from the Women's Health Initiative led to discouragement of the use of systemic hormone therapy. In this relatively small trial, women were randomly assigned to extended-release venlafaxine 75mg daily for three months ($n=40$) or placebo ($n=40$). Allocation was concealed and both investigators and patients were blinded to treatment. Women were assessed on a five-point scale at baseline and every four weeks about their perception of the extent to which hot flushes interfered with their daily living. After conversion to a 100-point scale, a 21-point difference in favour of venlafaxine was found at the end of the study ($P<0.001$, 95 per cent confidence interval 11–32). Women were also instructed to keep diaries with daily entries of the number and severity of hot flushes during

the previous 24 hours. Mild flushes were given a score of one point; moderate, two; severe, three; and very severe, four. A hot flush score was calculated for each day by multiplying the number of flushes by the severity score for each category, then summing. The small 2.6-point mean difference favouring venlafaxine in mean daily hot flush scores was not statistically significant. Dry mouth, sleepiness and decreased appetite were more frequent in treated women; more than 80 per cent of all treated women experienced each of these effects. There were 11 dropouts among venlafaxine-treated women during the course of the study because of side effects. There were eight dropouts among control patients for lack of efficacy. At the end of the study 27 of 40 women (67 per cent) in the venlafaxine group chose to continue treatment.

Level of evidence = 2b (individual cohort study)

Reference Evans ML, Pritts E, Vittinghoff E, McClish K, Morgan KS, Jaffe RB. Management of postmenopausal hot flushes with venlafaxine hydrochloride: a randomized, controlled trial. *Obstetrics and Gynecology* 2005; 105:161–66.

POEM (Patient Oriented Evidence that Matters) is a registered trade mark of InfoPOEMS © InfoPOEM Inc 1995-2004 InfoPOEM. www.infopoems.com