

Prescribable alternatives to HRT

Introduction:

Most prescribable alternative therapies have been evaluated for their impact on vaso-motor symptoms. Some of them also have an impact on mood and well-being. The class effect of the drug is important in selecting what is likely to be the best alternative

for your patient. Menopause treatments also tend to have a high placebo response often as great as 50% which may enhance quoted "baseline effectiveness".

Gabapentin	Added benefit	Adverse effect
<ul style="list-style-type: none"> > Gamma amino-butyric acid analogue used to treat epilepsy, neurogenic pain and migraine; reduces hot flushes at a dose of 900mg per day in about 50% of patients. 	<ul style="list-style-type: none"> > Improved quality of sleep > Reduced pain. 	<ul style="list-style-type: none"> > Dry mouth dizziness and drowsiness with a very specific dose related component > Patients will find their own level > Weight gain.
Pregabalin	Added benefit	Adverse effect
<ul style="list-style-type: none"> > Dosage 50-300mg in divided doses > Baseline improvement similar to Gabapentin. 	<ul style="list-style-type: none"> > Improved quality of life and note now Pregabalin is used as an antidepressant. 	<ul style="list-style-type: none"> > Similar to Gabapentin but less marked and therefore better tolerated > More expensive.
Clonidine	Added benefit	Adverse effect
<ul style="list-style-type: none"> > Dosage 25-50 micrograms bd up to a maximum of 75 micrograms bd or 50mcg tds. 	<ul style="list-style-type: none"> > May complement other anti-hypertensive drugs > Only licensed option. 	<ul style="list-style-type: none"> > Interaction with anti-hypertensive drugs and not suitable for patients with baseline low blood pressure > Must be reduced gradually otherwise causes rebound hypertension > Dose related side-effects include sleep disturbance in at least 50% of patients, dry mouth nausea and fatigue.
SSRI- Antidepressants	Added benefit	Adverse effect
<ul style="list-style-type: none"> > In general baseline effectiveness 20-50%. 	<ul style="list-style-type: none"> > Class effect of SSRIs are of antidepressant benefit and improved quality of life. 	<ul style="list-style-type: none"> > Class effect of SSRIs include initial side effects such as nausea, dizziness, short-term aggravation of base-line anxiety and mood, so encourage your patient to persevere and if necessary take on alternative days, even ½ tablet > Class effect of all SSRIs is sexual dysfunction > No one SSRI is better than any other in this respect and there is great individual variation in response.
Paroxetine	Added benefit	Adverse effect
<ul style="list-style-type: none"> > Dosage 10-20mg – baseline improvement 50-60%. Paroxetine has best evidence for vaso-motor control and has maximal benefit achieved at 10mg. 	<ul style="list-style-type: none"> > Class effect of SSRIs are of antidepressant benefit and improved quality of life. 	<ul style="list-style-type: none"> > Interacts with enzyme cytochrome P450 (CYN10) thereby rendering Tamoxifen less effective.

Prescribable alternatives to HRT

Fluoxetine	Added benefit	Adverse effect
> Dosage 20mg – baseline effectiveness 10-20%	> Class effect of SSRIs are of antidepressant benefit and improved quality of life.	> Like Paroxetine should be avoided in patients taking Tamoxifen.
Citalopram (Escitalopram)	Added benefit	Adverse effect
> Dosage 20mg – baseline benefit 40-50%.	> Class effect of SSRIs are of antidepressant benefit and improved quality of life.	> Much less effect on enzyme cytochrome P450 so can be used in patients on Tamoxifen.
Sertraline	Added benefit	Adverse effect
> Dosage 25-50mg – baseline benefit – little information.	> Sertraline is the best anti-anxiety SSRI.	> The least well tolerated with an increase in anxiety at the outset. Interacts with cytochrome P450, so avoid in patients on Tamoxifen
SNRI SSRI Venlafaxine	Added benefit	Adverse effect
> Dosage 37.5mg – 150mg sustained release preparations recommended. Baseline benefit quoted 20-66%.	> Improved quality of life > Antidepressant effect.	> Often poorly tolerated at outset with dizziness and other associated SSRI side effects including sexual dysfunction, slow titration may be the answer > NO interaction with cytochrome P450 so may be safest choice for patients on Tamoxifen.

Author: Dr Jane Woyka in collaboration with the medical advisory council of the British Menopause Society.

PUBLICATION DATE: MARCH 2018

REVIEW DATE: MARCH 2020