



Antidepressants for Menopausal Symptoms

Menopause is a normal event, but some women have troublesome symptoms such as hot flushes and night sweats. Currently the most effective treatment is menopausal hormonal therapy (MHT). Selective Serotonin Re-uptake Inhibitors (SSRI) and Serotonin and Noradrenaline Re-uptake Inhibitors (SNRI), belong to a group of medications used to treat depression and may also be referred to as antidepressants. This group of antidepressants may be used as a non-hormonal treatment of menopause symptoms for women who need to or want to avoid MHT.

Both SNRI and SSRI medications have shown benefit in reducing menopausal hot flushes. They usually start working within the first 2 weeks of treatment, are safe, well tolerated and effectively reduce hot flushes in frequency and severity by 25 percent to 66 percent.

Before you start

Make sure you inform your doctor if you are taking any medications or supplements or have a history of high blood pressure, neurological conditions, liver or kidney problems.

Antidepressants for Menopausal Symptoms

All antidepressants are started at a low dose for 1-2 weeks and then the standard dose can be used.

Be careful driving or operating machinery until you know how the medicine affects you. Do not stop taking the medicine suddenly unless your doctor tells you to.

These medications are best taken with food or soon after food.

SSRI and SNRI medications are usually taken in the morning to minimise sleep problems.

Medication	Other information
Venlafaxine (Efexor XR®)	<ul style="list-style-type: none">▶ Usual dose is 37.5mg to 75mg each day.▶ Slow release medication - Swallow whole.
Desvenlafaxine (Pristiq®)	<ul style="list-style-type: none">▶ Usual dose is 100mg to 150mg each day.▶ Slow release medication - Swallow whole.
Duloxetine (Cymbalta®)	<ul style="list-style-type: none">▶ Usual dose is 30mg to 120mg each day.▶ Do not crush or chew capsules.
Escitalopram (Lexapro®)	<ul style="list-style-type: none">▶ Usual dose is 5mg to 20mg each morning.▶ Best taken in the morning.

Citalopram (Celepram®)	<ul style="list-style-type: none"> ▶ Usual dose is 10mg to 20mg each morning. ▶ Best taken in the morning.
Paroxetine (Aropax®)	<ul style="list-style-type: none"> ▶ Usual dose is 10mg to 20mg each morning. ▶ Best taken in the morning. ▶ Should be avoided if using the medication tamoxifen.

What are the side effects?

If you experience side effects, they are usually worst at the beginning of treatment and improve after 1 to 2 weeks. Consult your doctor if side effects are severe or you are concerned.

More common side effects include:

- ▶ Feeling or being sick
- ▶ Headache
- ▶ Changes in mental alertness
- ▶ Sleep disturbances
- ▶ Reduced sexual drive
- ▶ Diarrhoea or constipation

How to stop taking or switch SNRI or SSRI medications

If you decide or your doctor tells you to stop taking any SSRI or SNRI medication, you should reduce the dose gradually. Speak with your doctor about how to do this.

Changing from one treatment to another needs gradual tapering of the first medication before starting the next medication. Please seek guidance from your doctor.

When should you see your doctor?

If this information does not answer your questions or you experience adverse effects from the treatment, please see your GP or contact the Menopause Clinic nurse via phone (08) 6458 2222 or pager 3358 (Monday – Wednesday).



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Women and Newborn Health Service
King Edward Memorial Hospital
374 Bagot Road, Subiaco WA 6008
Telephone: (08) 6458 2222
www.kemh.health.wa.gov.au

WNHS0677 066c_1119