

9 Non-estrogen-based therapies for menopausal symptoms

At a glance

- ▶ Do not routinely offer selective serotonin reuptake inhibitors, serotonin and noradrenaline reuptake inhibitors or clonidine as first-line management for vasomotor symptoms in women with no contraindications to hormone replacement therapy.
- ▶ Women taking tamoxifen should not be prescribed paroxetine or fluoxetine as these reduce the efficacy of tamoxifen.
- ▶ There is no evidence that selective serotonin reuptake inhibitors or serotonin and noradrenaline reuptake inhibitors alleviate low mood in menopausal women who have not been diagnosed with depression.
- ▶ Consider cognitive behaviour therapy to alleviate low mood or anxiety in menopausal women.
- ▶ Regular sustained aerobic exercise may reduce vasomotor symptoms and improve psychological wellbeing in menopausal women.

A wide range of non-estrogen-based treatments can be used to treat vasomotor symptoms, anxiety and low mood, urogenital atrophy and lack of sexual desire. Prescription non-hormonal therapies, psychological treatments and exercise are discussed in this chapter; alternative and complementary therapies are discussed in Chapter 10.

Vasomotor symptoms

Hot flushes and night sweats are the most common menopausal symptoms and may last for several years. They may also be adverse effects of other treatments such as tamoxifen and the aromatase inhibitors used in the management of breast cancer. Concerns about the potential adverse effects of estrogen and hormone replacement therapy (HRT) have led to increased interest in other non-hormonal therapies. There is some limited evidence for the efficacy of some of these alternative treatments for managing vasomotor symptoms.