

What's new and what works in the treatment of hot flashes?

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Hot flashes are one of the most commonly reported symptoms of the menopause transition. Over time, a wide array of hormone and nonhormone medications, as well as nonpharmacologic remedies, have been developed to help menopausal women manage bothersome hot flashes. A presentation at The North American Menopause Society (NAMS) Annual Meeting in Atlanta, October 12-15, will address the

status of the latest pharmacologic advances in the treatment of hot flashes.

It is estimated that 25% of women will seek pharmacologic therapies for vasomotor symptoms (VMS) such as hot flashes. Today's choices—hormone and nonhormone—run the gamut from pills to patches to mists and gels.

In addition, new nonhormone therapies are on the horizon awaiting FDA approval. Their development is based on the theory that VMS physiology is controlled by the kisspeptin-neurokinin B-dynorphin (KNDy, pronounced "candy") neuron complex in the hypothalamus of the brain located directly adjacent to the thermoregulatory center. Two promising neurokinin B (NKB) antagonists—fezolinetant and elinzanetant—are in development, but a third one—pavinetant—is no longer being pursued as a VMS treatment because of concerns regarding effects on the liver. Larger studies are necessary to confirm the benefits and risks of these new drugs.

Dr. Susan Reed from the University of Washington School of Medicine will speak during the NAMS Annual Meeting and discuss the status of developing VMS treatments. She also will provide an overview of the efficacy of various hormone and nonhormone therapies, as well as their costs, and discuss the various considerations when choosing the right option for a particular woman.

"This is an exciting time. There have been relatively few novel hormone therapies developed for VMS in the past decade, and there is only one FDA-approved nonhormone therapy for VMS that was ever approved, and that was in 2013. Within the next several years, however, we hope to see some major breakthroughs and multiple new options for menopausal hot flash management, including a new estrogen and two new nonhormone therapies," says Dr. Reed.

"Because [hot flashes](#) are one of the most common and bothersome symptoms of menopause, it makes sense that so much research has focused on ways to effectively treat them. Menopausal women today have more [treatment options](#) than ever before, with [hormone therapy](#) remaining the most effective. Because some women are unable or unwilling to take hormones, however, we need to continue researching alternatives," says Dr. Faubion, NAMS medical director.

More information: Conference: www.menopause.org/annual-meeting/scientific-program

Provided by The North American Menopause Society

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