ambetter of North Carolina Inc.

VENLAFAXINE (EFFEXOR) IR: IMMEDIATE RELEASE; ER/ XR: SUSTAINED RELEASE
Provider Tip Sheet

DOSING INFORMATION

- Effexor XR
  1. Week 1: Baseline blood pressure, weight. Consider BMP for baseline sodium in older adults. Start XR: 75 mg qday (37.5mg for panic disorder).
  2. Week 2: Increase to the Initial Target Dose (XR) of 150 mg qday, if tolerated. OF NOTE, the initial target dose for social phobia is 75 mg qday and the initial target dose for neuropathic pain is 225 mg qday.
  3. Week 4 and Beyond: Consider further increases in 75 mg/day increments every 2 weeks as needed and tolerated. Typical Dosage Range (XR): 150-300 mg/day. Max Dose (XR): 300 mg qday

- Effexor IR
  1. Week 1: Baseline blood pressure, weight. Consider BMP for baseline sodium in older adults. Start IR: 37.5 mg bid (37.5 qday with panic disorder).
  2. Week 2: Increase to the Initial Target Dose of 75 mg bid, if tolerated. OF NOTE, the initial target dose for social phobia is 37.5 mg bid qday and the initial target dose for neuropathic pain is 112.5 mg bid.
  3. Week 3 and Beyond: Can consider further increases in 75 mg/day increments every 7 days as needed and tolerated. Typical Dosage Range (IR): 150-300 mg/day. Max Dose IR: 375 mg/day. Discontinuation: Often problematic. 25% per week to 25% per month depending on length of treatment in order to minimize withdrawal symptoms and relapse.

MONITORING

- Blood pressure, weight. Consider posttreatment BMP to rule out hyponatremia in older adults.

GENERAL INFORMATION

- Mechanism of Action: Serotonin/Norepinephrine Reuptake Inhibitor (SNRI).
- FDA Indications: GAD, MDD, Panic Disorder, Social Anxiety Disorder.
- Off-Label Indications: Neuropathic pain, other anxiety. Pharmacokinetics: T½ = 5 hrs and 11 hrs (active metabolite).
- Common Side effects (MDD, XR): Nausea (31%), dizziness (20%), somnolence (17%), insomnia (17%), abnormal ejaculation (16%), sweating (14%), dry mouth (12%), nervousness (10%), anorexia (8%), constipation (8%), abnormal dreams (7%), tremor (5%), blurry vision (5%).

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GENERAL INFORMATION (Continued)

- Black Box Warning: Increased SI in patients < 25 y/o. Contraindications: Use of a MAOI within 14 days of stopping Effexor, concurrent use of a MAOI including drugs with significant MAOI activity (e.g., linezolid), or use of Effexor within 14 days of stopping a MAOI.
- Warnings and Precautions: Clinical worsening and suicide risk, serotonin syndrome, hypomanic/ manic switch, sustained hypertension, elevations in systolic and diastolic blood pressure, seizures, mydriasis/ narrow angle glaucoma, discontinuation symptoms, insomnia and nervousness, weight loss and decreased appetite, abnormal bleeding, serum cholesterol elevation, interstitial lung disease and eosinophilic pneumonia.
- Metabolism/Pharmacogenomics: Metabolized by 2D6. Use caution with 2D6 poor metabolizers. Significant drug- drug interactions: Limited drug-drug interactions, Low protein binding, check all drug-drug interactions before prescribing.
- Dosage Forms: Tablet, Capsule, Coated Tablet (Do not cut, crush or chew). Generic available: IR/ER: Yes.

Support

We are committed to the care and well-being of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

Please view the Provider section of our website at **ambetterofnorthcarolina.com** for additional tools and resources. You may also contact your Provider Engagement Administrator directly, or contact Provider Relations for assistance at **1-833-863-1310**.