Ospemifene (Senshio®) for the treatment of vulvar and vaginal atrophy

NHS Devon

Commissioning policy

The routine commissioning of ospemifene (Senshio®) is not accepted in Devon for the treatment of vulvar and vaginal atrophy.

The Formulary Interface Group should not include this in locally defined treatment recommendations.

Rationale for the decision

The decline in oestrogen in postmenopausal women results in a decrease in vaginal lubrication, an early symptom of vulvovaginal atrophy (VVA). Other symptoms include burning, dyspareunia (vaginal pain associated with sexual activity), loss of vaginal secretions, leukorrhea (vaginal discharge), vulvar pruritus, feelings of pressure and bleeding. VVA can also be associated with urinary symptoms, such as urethral discomfort, frequency, haematuria, urinary tract infections, dysuria and stress incontinence.

Management of VVA is usually with moisturisers, lubricants and topical oestrogens. Unlike oestrogen containing topical treatments, ospemifene is suitable for patients with a history of breast cancer who are no longer undergoing active treatment, or who have recovered from sex-hormone dependent cancer. Clinical trials have shown a statistically significant reduction in dyspareunia symptoms in comparison to placebo, but results were not consistent in the reduction of vaginal dryness symptoms. It was considered that ospemifene did not offer a sufficiently large improvement in symptoms over the use of moisturisers and lubricants alone and therefore it is not considered to represent good value for the local health economy.

Guidance notes on exceptionality

This general policy does not replace clinical judgement on the appropriate treatment of an individual patient.

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