



ORMELOXIFENE IN SYMPTOMATIC RELIEF OF ADENOMYOSIS-A LONGITUDINAL INTERVENTIONAL STUDY



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INTRODUCTION

Ormeloxifene is a oral **Selective Estrogen receptor Modulator**.

It mediates its effects by antagonizing the effect of estrogen on uterine and breast tissue and stimulating effect on vagina, bone, cardiovascular system and central nervous system. This forms the pharmacological role in Abnormal uterine bleeding (AUB).

It is absorbed well and reaches its highest level in the blood in about 4 hours. Its terminal half life -170hr because of an active form called 7-desmethyl ormeloxifene. The liver breaks down the drug, and is excreted through the feces

Many studies have shown non-contraceptive benefits of ormeloxifene like reducing symptoms of Abnormal uterine Bleeding. Very few articles are present about Ormeloxifene in symptomatic relief in AUB-Adenomyosis.

AIMS AND OBJECTIVE

Primary

To assess menstrual flow volume, dysmenorrhea, and quality of life after 6 months of Ormeloxifene

Secondary

To assess side-effects of the drug and failure rates

INCLUSION

- Adenomyosis with **HMB**, **Dysmenorrhea**
- Women **>25 years** who have completed family

EXCLUSION

- Associated pelvic pathology (fibroids, endometriosis, malignancy)
- PCOS, renal impairment, liver impairment, recent jaundice, pregnancy, lactation, hypersensitivity to Ormeloxifene
- Chronic pelvic pain unrelated to adenomyosis

METHODOLOGY

START

- In symptomatic patients, baseline Investigation sent, TVS is done and Adenomyosis is diagnosed
- Ormeloxifene 60 mg biweekly for 3 months

3 month

- Assess the scores and parameters
- Ormeloxifene 60 mg weekly for 3 months

6 month

- Re-assessment of all parameters

PARAMETERS ASSESSED

1.FOR HMB:

- HEMOGLOBIN
- Menorrhagia Multi Attribute Utility Scale (MMAS)

2.FOR DYSMENORRHEA:

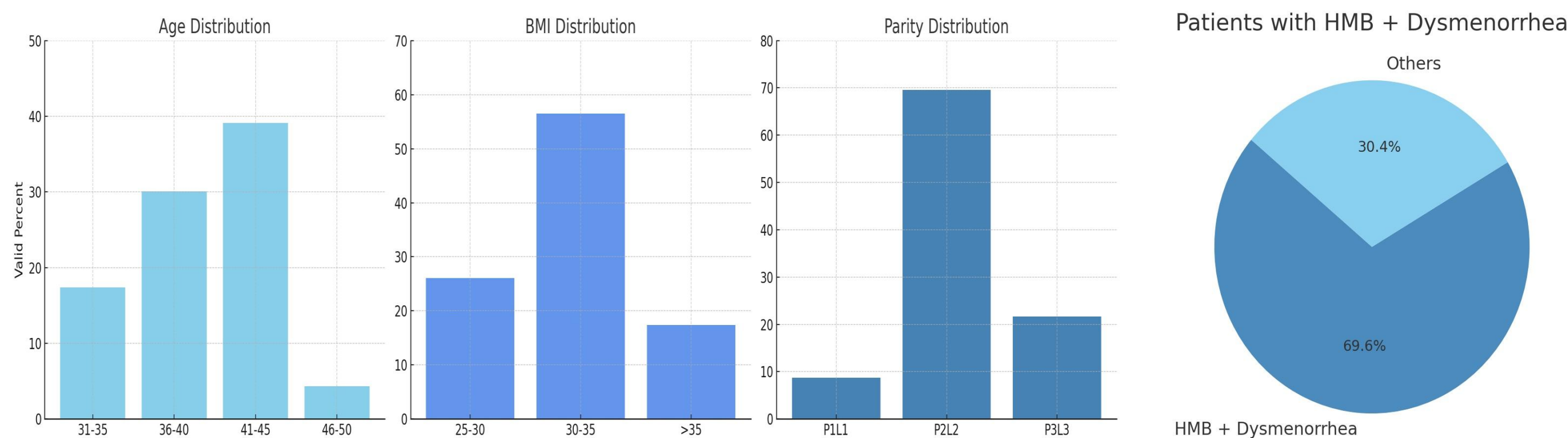
- RATES OF AMENORRHEA
- Visual Analog Score (VAS)

3.OTHERS :

- WHO-BREF QOL
- UTERINE VOLUME
- SIDE-EFFECTS

RESULTS-PATIENT CHARACTERISTICS

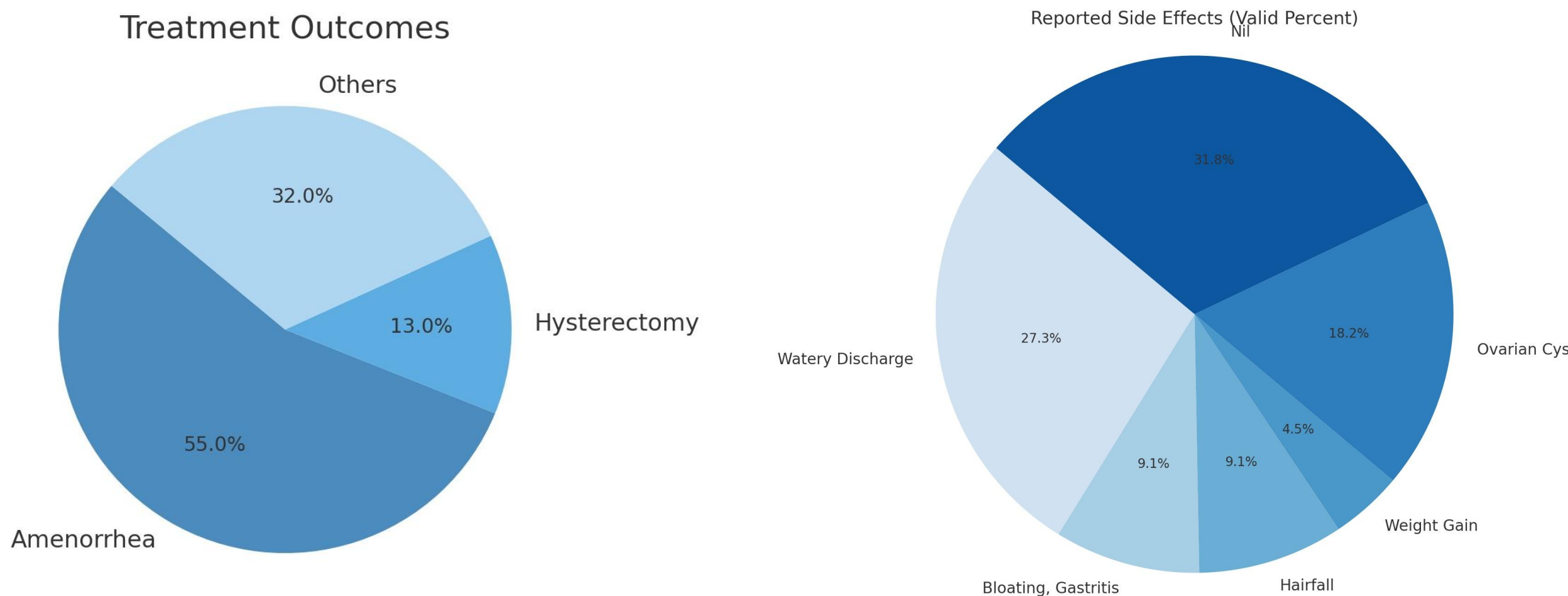
In the interim analysis of 23 patients who completed 6 months of Ormeloxifene,



RESULTS-PRIMARY OUTCOME

PARAMETER	BASELINE (Mean with SD/Median)	AT 6 MONTHS (Mean with SD/Median)	P-value
Hemoglobin	8.7 ± 1.36 g/dL	10.6 ± 1.3 g/dL	<0.01
WHO-BREF SCORE	80.45 ± 11.6	106.6 ± 9.5	<0.01
UTERINE VOLUME	186cc	182.5	0.638
MMAS SCORE	28.3	100	<0.01
VAS	90	15	<0.01

RESULTS-SECONDARY OUTCOME



DISCUSSION

Significant rise in hemoglobin and improvement in pain scores suggest Ormeloxifene controls both bleeding and dysmenorrhea. While 13% required hysterectomy, 55 % amenorrhea rate indicates strong potential for avoiding surgery. It can also be alternative to Levonorgestrel – Intrauterine system in cases of expulsion, distorted uterine cavities. Although uterine volume remained largely unchanged, long-term efficacy of ormeloxifene requires evaluation. Side-effects like watery discharge and ovarian cysts further study.

These findings are also consistent with a previous prospective study by Toshniwal and Chandak which showed 83% had symptomatic improvement and 16.6% required hysterectomy.

CONCLUSION

Ormeloxifene may offer a non-invasive treatment option for AUB-A, with significant improvements in symptoms and quality of life.

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