# Venlafaxine exposure in pregnancy, a multicenter ENTIS study

First published: 15/10/2012

Last updated: 19/04/2021



### Administrative details

#### **EU PAS number**

EUPAS3057

#### **Study ID**

40624

#### DARWIN EU® study

No

#### **Study countries**

Finland

France

Israel

Italy

Netherlands

Switzerland

### **Study description**

Introduction Venlafaxine (Efexor®) is a serotonin and noradrenaline reuptake inhibitor (SNRI) used for the treatment of depression and anxiety disorders. The limited data on the use of venlafaxine in human pregnancy do not indicate an increased risk of congenital malformations. The main purpose of the study is to assess the rate of major malformations after first trimester exposure to venlafaxine. Methods This multicenter, prospective cohort study was performed using data from eight centers who are member of the European Network of Teratology Information Services (ENTIS). Data on pregnancy and pregnancy outcome of women who used venlafaxine in pregnancy were collected during individual risk counseling. Standardized procedures for data collection and follow-up were used by each center.

#### **Study status**

Ongoing

### Research institutions and networks

### Institutions

### Netherlands Pharmacovigilance Centre Lareb

Netherlands

First published: 05/02/2010



Not-for-profit

ENCePP partner

### Teratology Information Service, Helsinki (TIS Helsinki), HUSLAB

Finland

First published: 09/04/2010

Last updated: 16/08/2011



**Swiss Teratogen Information Service** 

First published: 01/02/2024

Last updated: 01/02/2024



Centre de Référence sur les Agents Tératogènes (CRAT) Paris, France, Florence Teratology Information Service, Careggi university hospital Florence, Italy, CEPIG, Genetica Clinica, Azienda Ospedaliera Padov Padova, Italy, Poison Control Centre and Teratology Information Service, Ospedali Bergamo, Italy, Swiss Teratogen Information Service and Division of clinical Pharmacology and Toxicology, University Hospital, Lausanne Lausanne, Switserland, BELTIS Rabin. Medical. Center Petah-Tikva Affiliated with the Sackler School of Medicine, Tel Aviv University Tel Aviv, Israel, Telefono Rosso, Catholic University of Sacred Heart Rome, Italy

### Networks

European Network of Teratology Information Services (ENTIS)
Czechia
Finland
France
Germany
Greece
Italy
Netherlands
Spain
Switzerland
United Kingdom
First published: 31/05/2010

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Network ENCePP partner

### **Contact details**

### Study institution contact

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Study contact

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### Primary lead investigator

Bernke te Winkel

Primary lead investigator

### Study timelines

Date when funding contract was signed Actual: 30/09/2008

Study start date Actual: 27/10/2008

Date of final study report Planned: 28/12/2021

### Sources of funding

• Other

### More details on funding

Ministery of Health, The Netherlands

# Regulatory

Was the study required by a regulatory body?

No

### Is the study required by a Risk Management Plan (RMP)?

Not applicable

### Methodological aspects

### Study type

### Study type list

### Study type:

Non-interventional study

### Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness

### Main study objective:

To assess the risk of venlafaxine exposure in early pregancy

# Study Design

#### Non-interventional study design

Cohort

# Study drug and medical condition

**Study drug International non-proprietary name (INN) or common name** VENLAFAXINE

### Population studied

#### Age groups

Preterm newborn infants (0 – 27 days) Term newborn infants (0 – 27 days) Adults (18 to < 46 years)

#### **Special population of interest**

Pregnant women

#### **Estimated number of subjects**

1300

### Study design details

#### Outcomes

Rate of major birth defects after first trimester exposure, rate of spontaneous abortionrate of prematuritybirth weightpostnatal disorders

#### Data analysis plan

Birth defect rates include live births and anomalies in elective terminations of pregnancies (ETOPs) and miscarriages. For calculating rates of major birth defects possibly associated with a teratogen, welldefined genetic syndromes are excluded. See: Schaefer C, Ornoy A, Clementi M, Meister R, Weber-Schoendorfer C. Using observational cohort data for studying drug effects on pregnancy outcome--methodological considerations. Reprod Toxicol. 2008,26:36-41. For calculation spontaneous abortion rate see Meister R, Schaefer C. Statistical methods for estimating the probability of spontaneous abortion in observational studies--analyzing pregnancies exposed to coumarin derivatives. Reprod Toxicol. 2008,26:31-5

### Data management

# **ENCePP** Seal

The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

### Data sources

Data sources (types)

Other

### Data sources (types), other

ENTIS provides drug risk assessment for pregnant patients and/or physicians. Exposed pregnancies are documented and after the expected date of delivery, follow-up is conducted both using a structured questionaire or phone interview.See Schaefer C et al, Reproductive Toxicology 2008,26,36-41

# Use of a Common Data Model (CDM)

#### **CDM** mapping

No

# Data quality specifications

#### **Check conformance**

Unknown

#### **Check completeness**

Unknown

#### Check stability

Unknown

#### **Check logical consistency**

Unknown

### Data characterisation

#### **Data characterisation conducted**

No