

**USE WITH CAUTION.**

**Risks:** Venlafaxine and its metabolites are primarily eliminated by the kidneys; only about 5% of the parent compound is excreted unchanged. Approximately 87% of the dose is renally eliminated within 48 hours. It is not directly nephrotoxic but may indirectly affect renal function through cardiovascular and haemodynamic changes.

**Risk monitoring:** Monitor renal function (urea, creatinine) and watch for signs of fluid retention, hypotension, or cardiovascular toxicity. Consider CYP2D6 genotyping.

**Dose adjustment:** For patients with mild to moderate renal impairment (creatinine clearance  $> 30$  ml/min), no dosage adjustment is usually required. For severe renal impairment (CKD G4–G5, CrCl  $\leq 30$  ml/min), an initial dose of 37.5 mg once daily is recommended, with careful titration while avoiding more than 50% of the maximum recommended dose.

**Recommendation:**

Use with caution in patients with renal impairment. In severe renal impairment, dose reduction is recommended. Regularly check sodium and renal function parameters, especially in older adults or in those receiving interacting medications.