

# What You Should Know About Antidepressant Medications

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The medicines used to treat mental illness are known as psychotropic medications. There are four major categories of psychotropic medications. They are:

- antipsychotics
- antidepressants
- mood stabilizers
- anti-anxiety medications

These may be prescribed alone or in combination.

Psychotropic medicines are quite safe when properly used. However, it can take time to reach the right dosage and combination of medications. Adjustments in the dosages may be needed to deal with unwanted side effects. Here are some of the reasons:

- People respond differently to medications, so several may need to be tried.
- Dosages sometimes need to be adjusted, especially as treatment progresses.
- More than one medication may be needed. This may be due to other symptoms or treatable side effects.
- Some medicines need to be taken for several days or weeks before they become fully effective.

## Antidepressant Medications

The most common mood disturbance is depression. When depression is severe it is called Major Depression. Major depression is associated with extreme feelings of hopelessness, helplessness, worthlessness, and loss. People with depression sometimes say they feel “low.” Often there is a pronounced lack of energy and motivation. Sometimes there are physical symptoms with depression. They can include slow speech and extremely slow walking or other voluntary movements.

Prolonged elation (called mania) is the other common mood disturbance. The individual’s behavior is marked by greatly increased physical and mental activity, unusual cheerfulness, and overall disorganization. Elated people are said to be on a “high.” Sometimes they engage in reckless behavior such as excessive spending, sexual promiscuity, and alcohol or drug abuse. Both elation and depression can lead to problems with sleep, appetite, and mental functioning.

A mood disturbance can be present either alone or

accompanied by any other serious mental illness. In addition to depression, a mood disturbance is a key feature in the diagnosis of:

- bipolar disorder (also called manic depression)---alternating states of depression and elation with or without psychosis
- schizoaffective disorder---psychotic symptoms followed or accompanied by bipolar-like symptoms
- major depression with psychotic features---a severe mood disturbance accompanied by symptoms of psychosis

If these symptoms or feelings describe your situation, talk to your treatment team. There are many medications to treat depression and mood swings. They are often used together with antipsychotics for people with serious mental illness. Antidepressants are generally not habit forming.

## Antidepressants: Old & New

Antidepressants are generally divided into four groups. In the first group are the older medications used for depression. Called **tricyclic** antidepressants, they prolong the impact of chemicals in the brain that affect nerve activity. The tricyclics can be used safely with both typical and atypical antipsychotics by most people. However, side effects can include:

- dry mouth
- blurry vision
- dizziness
- drowsiness
- constipation
- difficulty with urination
- water retention (edema)

Usually these symptoms can be managed and will improve as your body adjusts to the medication. However, if you are bothered by these side effects, there are other medications your treatment team prescriber may want you to try.

Examples of FDA approved tricyclic antidepressants include Desipramine (Norpramin) and Doxepin (Sinequan).

In the next group are newer medications known as **selective serotonin reuptake inhibitors or SSRIs**. *Fluoxetine* (Prozac) was one of the first SSRIs, but others are now available. These newer SSRIs include Paroxetine (Paxil), Sertraline (Zoloft), and Escitalopram (Lexapro). Their advantages include less water retention, generally milder side effects than the tricyclics, and are less likely to have adverse interactions with other medications. However, serious adverse reactions have been documented when SSRIs interact with another groups of antidepressants (monoamine oxidase inhibitors [MAOIs]) and St. John's wort.

If an SSRI doesn't work for you, your physician will probably try a medication from the two remaining groups of antidepressants. In one of these groups are medications that are not very similar to each other. They include medicines such as *bupropion* (Wellbutrin) and *venlafaxine* (Effexor).

The last group of medications for depression are the **monoamine oxidase inhibitors (MAOI)**. The MAOIs are generally reserved for cases that don't respond to other medications. They must be given with great caution as they require changes in diet and can have serious interactions with many other medicines. *Phenelzine* (Nardil), *tranylcypromine* (Parnate), and Isocarboxazid (Marplan) are examples of MAOIs.

### ***SSRI Discontinuation Syndrome***

Abruptly stopping medications from the SSRI group has been shown to be associated with dizziness or light headedness, nausea and/or vomiting, headaches, lethargy, anxiety and/or agitation, tingling (parasthesias), numbness or "electric" shock-like sensations, tremors, sweating, insomnia, irritability, vertigo (dizziness), and diarrhea developing within 1 to 7 days of discontinuation or reduction in dosage.

It is important to take your medication as it is prescribed and to report any of these experiences or other potential side effects to your prescriber.

### ***Safety and Side-Effect Issues***

***Safety issues and side effects are a natural concern for patients, families, and prescribers.***

Although medications can have very positive effects, they all come with some risks. This is called the medication's safety profile. Prescribers must

sometimes balance the positive effect of medication against any possible harm it might cause. Everyone responds differently to various medicines, so several may be tried to see which is the most effective with the fewest side effects.

Antidepressant medications are relatively safe. However, the safety of their use also assumes that:

- A proper diagnosis has been made.
- Other medical conditions that could contribute to or imitate mental illness have been identified, treated, or ruled out.
- Proper medical follow-up is being done.

### **Side Effects**

Antidepressant medications, like any prescribed medicine, have possible side effects. That's why these medications must be ordered and monitored by a prescribing specialist, usually a psychiatrist. Some medications have mild side effects that often go away in a short period of time. However, more serious side effects are possible. For example, most anti-anxiety drugs can be habit forming. A few other medications require frequent blood testing for safe use.

The most common side effects for antidepressant medications include: anxiety or nervousness, insomnia, drowsiness, headache, diarrhea, and rash. In addition, sexual side effects (reduced arousal or satisfaction) may occur. Antidepressant medications have also been shown to cause changes in appetite and weight, usually resulting in weight loss rather than weight gain. Most side effects are mild and brief, usually subsiding in a week or two after beginning treatment. Particularly bothersome side effects can be treated with medication or by reducing the dose of the antidepressant, changing the time of the day that the medication is taken, or switching to a different antidepressant.

### ***Other Side Effects***

Early intervention may prevent or lessen these and other serious side effects. Let your treatment team know if you have any problems that might be related to your medicine. Also, the diaries and records you keep can help your treatment team see both your progress and problems.

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