

Antidepressant Information from The Medication Fact Book, Carlat Publishing

Recommendations for choosing a medication:

- Medication for medication naive patients without comorbid conditions
 - Bupropion - effective, no sexual side effects, weight gain or sedation
 - Problems: insomnia. Seizure risk with doses >300mg/day

Recommendations for patients who have comorbid conditions:

- Anxiety disorders
 - TCAs, SSRIs
- Bulimia
 - Fluoxetine
- Smoking cessation
 - Bupropion
- ADHD
 - Bupropion
- Fibromyalgia
 - Duloxetine
- Diabetic neuropathic pain
 - Duloxetine
- Premenstrual dysphoric disorder
 - SSRIs
- Underweight and insomnia
 - Mirtazapine

Recommendations for patients who have been on other antidepressants:

- First, try switching to an antidepressant in a different class
 - If on SSRI, try bupropion, SNRI, or MAOI/tricyclic
- Next, try combination
 - SSRI/SNRI +bupropion
 - SSRI/SNRI + atypical antipsychotic
 - SSRI/SNRI + lithium or thyroid supplementation
- Next, neurostimulation devices

Class Warnings on Antidepressants

- Suicide risk
 - Black box warning
 - Increased risk of suicidal ideation in children and adolescents and young adults to age 24.
- Mania switch
 - Activation of mania or hypomania
 - Use with caution in patients with history of mania or hypomania or with family history of bipolar disorder
- Serotonin syndrome

- Agitation, hallucinations, mental status changes, hyperthermia, tachycardia, labile BP, myoclonus, hyperreflexia, incoordination, nausea, vomiting, diarrhea.
- Discontinuation syndrome
 - Dizziness, nausea, headache, irritability, insomnia, diarrhea, agitation, sensory disturbances (electric shock sensations)
 - Uncomfortable, not unsafe. Self-limiting
- Bleeding risk
 - GI bleed, bruising, nose bleed
 - Increase risk when used with aspirin, NSAIDs, anticoagulants or antiplatelet agents.

Unique features of antidepressants:

- Bupropion -
 - May be helpful for depression associated with fatigue and poor concentration
 - Seizure risk - highest in higher dose. Avoid in pts with seizure history
- Desvenlafaxine
 - No advantage over venlafaxine but more expensive
 - Monitor BP
- Duloxetine
 - Also approved for neuropathic pain, fibromyalgia, chronic musculoskeletal pain.
 - Common GI side effects
 - Contraindicated in liver disease, rare cases of hepatotoxicity
- Mirtazapine
 - Weight gain and sedation are problematic side effects
- Citalopram
 - Max dose capped at 40mg due to risk of QTc prolongation
- Escitalopram
 - Considered “cleanest”, few drug-drug interactions
- Fluvoxamine
 - Twice daily dosing
 - Most data on efficacy is for OCD
- Paroxetine
 - Problematic side effect profile - greatest sexual side effects, weight gain, sedation, constipation
 - Large drug interaction profile
- Trazodone
 - Used off label for sedation
 - Rare priapism

Other antidepressant prescribing information

- Higher doses of SSRIs are required for OCD.
- Use lower initial starting doses of SSRIs for patients with anxiety disorders.

Branded medications (not available in generic formulation = more expensive)

Levomilnacipran

Selegiline transdermal

Vilazodone

Vortioxetine

Puzantian, T. & Carlat, D. (2016). *Medication Fact Book for Psychiatric Practice* (3rd ed.).
Newburyport, MA: Carlat Publishing, LLC.