

# Medication Management of Depression

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# Disclosures

**Nothing to Disclose**

# Learning Objectives

**Be able to discuss reasons to choose and reasons to avoid certain antidepressants.**

**Be able to discuss the importance of antidepressant treatment duration.**

# Which Antidepressants Do We Have?

## SSRI

Fluoxetine (Prozac)

Paroxetine (Paxil)

Escitalopram (Lexapro)

Citalopram (Celexa)

Sertraline (Zoloft)

## SNRI

Venlafaxine (Effexor XR)

Duloxetine (Cymbalta)

## Tricyclic Antidepressants TCA

Amitriptyline (Elavil)

Nortriptyline (Pamelor)

Doxepin

## Other

Mirtazapine (Remeron)

Bupropion (Wellbutrin XL)

Trazodone

Vilazodone (Viibryd)

Vortioxetine (Trintellix)

# Key Principles

- **If a medication can help a person with more than one problem, some patients will be more likely to try it**
- **Encourage taking the medication daily, and at the same time daily**
- **Set the expectation that these medications can take 6 weeks or more to help**
- **Generally recommend taking antidepressants with some food to reduce chance of nausea (possible side effect during initiation)**
- **Alcohol interacts with antidepressants by decreasing their effectiveness, but in nearly all cases there is no dangerous drug interaction with alcohol**
- **Medications are most effective when combined with other interventions such as Psychotherapy or Behavioral Activation**
- **Most antidepressants are also helpful for anxiety**



**Zoloft**  
↓

CURRENTLY ON  
**Prozac**  
↓

EXIT 58A-B  
**Paxil**  
↓ LAST EXIT BEFORE TOLL ↓

**Buspar**  
↙

**Wellbutrin**  
↓

**Celexa**  
↓

**Xanax**  
↘

# When to Consider Particular Medications

The following medication characteristics may help

## SSRI

Fluoxetine	Longest duration of action, so most forgiving when some doses are missed
Paroxetine	Among the most helpful for anxiety / FDA approval for PTSD / Some evidence for earlier onset of benefit
Escitalopram	Among the most helpful for anxiety / Generally very well tolerated
Sertraline	FDA approval for PTSD / Considered Safest Antidepressant in Pregnancy and During Lactation

## SNRI

Venlafaxine	Among the most helpful for anxiety / Helpful for ADD/ADHD
Duloxetine	Among the most helpful for anxiety / Helpful for Chronic Musculoskeletal, Neuropathic and Myofascial Pain

## TCA

Amitriptyline	Helpful for Insomnia, Migraine Prophylaxis, Neuropathic Pain, Myofascial Pain
Nortriptyline	Helpful for Migraine Prophylaxis

Bupropion	No Sexual Side Effects / Helpful for Tobacco Cessation / Helpful for Methamphetamine Use / Helpful for ADD/ADHD
Mirtazapine	No Sexual Side Effects / Helpful for Methamphetamine Use / Helpful for Insomnia, Chronic Nausea, Low Appetite
Trazodone	No Sexual Side Effects / Helpful for Insomnia

# When to Avoid Particular Medications

## Or Use With Caution

### SSRI

Fluoxetine	Use with caution if already on many medications due to medication interactions / Most likely to cause hyponatremia
Paroxetine	<b>Avoid Use if Pregnant</b> / Use with caution if already on many meds / Most likely to cause hyponatremia / Notable Discontinuation Syndrome
Escitalopram	If QTc Interval is Prolonged or if there is risk for this
Citalopram	If QTc Interval is Prolonged or if there is risk for this
Sertraline	If nausea is already present / if patient is prone to GI side effects

### SNRI

Venlafaxine	Avoid if patient is prone to running out or losing med - has Notable Discontinuation Syndrome
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### TCA

Amitriptyline	Use with Caution if: Suicidal Ideation Present / Over Age 65 / Trouble with Anticholinergic Side Effects / Already Prolonged QTc Interval
Nortriptyline	

Bupropion	Avoid use if there is a history of seizures
Mirtazapine	Use with caution if weight/BMI are already elevated



# **Treatment Duration**

**data from the STAR\*D trial**

**Average duration of treatment to achieve remission was 7 weeks**

**40% of those who achieved remission required 8 weeks or more**

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