

# Antidepressants

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This factsheet gives information about antidepressants. Antidepressants can help with different mental health problems including low mood, depression and anxiety.

 KEY POINTS

- Antidepressant medications are used to treat depression and other mood disorders.
- There are different types of antidepressants. You may need to try different ones before finding one that works for you.
- You may get side effects from antidepressants. Talk to your doctor if you get side effects that cause you problems.
- You may get withdrawal symptoms when you stop taking antidepressant medication. Talk to your doctor before you stop taking them. Your doctor may take you off your medication slowly if you have been taking them for a long time.
- Antidepressant medication can affect other medications. Tell your doctor if you take any other medication.

## This factsheet covers:

1. [What are antidepressants?](#)
2. [Are there different types of antidepressants?](#)
3. [Are there any side effects?](#)
4. [What if I want to stop taking antidepressants?](#)
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### 1. What are antidepressants?

Your doctor may offer you antidepressants if you have very low mood or symptoms of depression. They can also help if you have other mental health problems, including anxiety.

They work by making the chemicals made by your body which control your mood more powerful.

Antidepressants should be effective after about two weeks. There is no set time for how long you should take antidepressants. Your doctor may ask you to take your antidepressants for six months after your symptoms are gone. This can help stop your symptoms coming back. Your doctor will work out how much you should take and for how long. Antidepressants are not addictive.<sup>1</sup>

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### 2. Are there different types of antidepressant?

All antidepressants work in different ways. One type of antidepressant may suit you more than another. Here we give an overview of the different types.

#### **Selective serotonin re-uptake inhibitors (SSRIs)**

The National Institute for Health and Clinical Excellence (NICE) suggest that SSRIs have fewer side effects than the other types of antidepressants.<sup>2</sup> All the following medications treat low mood and depression. Some may also treat other conditions including anxiety, bulimia, panic disorder and obsessive-compulsive disorder.<sup>3</sup>

Medication name	Brand name
Citalopram	Cipramil
Escitalopram	Cipralex
Fluoxetine	Prozac
Fluvoxamine	Faverin
Paroxetine	Seroxat
Sertraline	Lustral

### Serotonin-noradrenaline reuptake inhibitors (SNRIs)

SNRIs are similar to SSRIs. They treat depression and chronic pain.<sup>4</sup>

Medication name	Brand name
Duloxetine	Cymbalta, Yentreve
Venlafaxine	Efexor
Reboxetine	Edronax

### Tricyclic antidepressants

Tricyclic antidepressants can treat depression, panic disorder, obsessive compulsive disorder and migraine.<sup>5</sup> Tricyclic antidepressants can take two to four weeks to work. These are older medicines and generally have more side effects than other antidepressants.

Below is a table of tricyclic antidepressants and their trade names.<sup>6</sup>

Medication name	Brand name
Amitriptyline	Triptafen, Tryptizol
Clomipramine	Anafranil
Dosulepin or dothiepin	Prothiaden, Dothapax
Doxepin	Xepin, Sinopin
Imipramine	Tofranil
Lofepramine	Lomont, Feprapax, Gamanil
Nortriptyline	Allegron
Mianserin	Bolvidon
Trimipramine	Surmontil

### Mono-amine oxidase inhibitors (MAOIs)<sup>7</sup>

MAOIs are an older antidepressant. These are not prescribed as much. Your doctor should monitor you if you take these. You cannot eat certain foods if you take these. Your doctor should give you more information if they prescribe these for you.

Medication name	Brand name
Isocarboxazid	Marplan
Phenelzine	Nardil
Tranylcypromine	Parnate
Moclobemide	Manerix

## Other medication

Below is a table of other medicines which can treat depression.

Medication name	Brand name	Type of medicine
Mirtazapine	Zispin	Noradrenergic and Specific Serotonergic Antidepressant
Trazodone	Molipaxin	A Tricyclic medicine

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### 3. Are there any side effects?

Different antidepressants will have different side effects. The newer antidepressants should have fewer side effects than the older ones. People can have different reactions to medication.

You should get a patient information leaflet with your medication. This leaflet will tell you all the possible side effects you might get. The table below tells you about the common side effects.

Common Side Effects	
SSRIs	Nausea and vomiting, insomnia, sexual dysfunction (including loss of sex drive and difficulty in reaching orgasm) <sup>8</sup>
SNRI	Like SSRIs, can cause high blood pressure <sup>9</sup>
Tricyclic Antidepressants	Dry mouth, blurred vision, drowsiness, weight gain, constipation <sup>10</sup>
MAOIs	Dizziness, drowsiness, dry mouth, constipation <sup>11</sup>

If you get these symptoms you can talk to your doctor. They may be able to change your dosage or medication.

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### 4. What if I want to stop taking antidepressants?

If you have been taking antidepressants for a few weeks you should not stop taking them suddenly. Antidepressants are not addictive but your body can become used to them. If you stop taking them suddenly you get withdrawal symptoms.<sup>12</sup>

You should talk to your doctor before stopping your medication. You can stop taking them slowly, which can help reduce withdrawal effects.

People can respond to coming off antidepressants differently. Some people will have no effects at all. Some common withdrawal effects are in the table below.<sup>13</sup>

<b>Antidepressant</b>	<b>Common</b>	<b>Occasional</b>
SSRIs	Dizziness, feeling irritable, problems sleeping, vivid dreaming, flu-like symptoms (for example feeling sick, headaches, sweating a lot, chills), feeling tearful, 'shock-like' feelings	Memory and concentration problems, movement disorders
SNRIs	Tiredness, dizziness, light-headedness, headache, sleeplessness, nightmares, dry mouth, loss of appetite, nausea, diarrhoea, nervousness, agitation, confusion, ringing in the ears, tingling	Electric shock sensations, weakness, sweating, seizures, or flu-like symptoms
Tricyclic Antidepressants	Problems sleeping, dreaming a lot, flu-like symptoms (for example nausea, headaches, excessive sweating, chills).	Movement problems, feeling and acting high, unusual heart pace
MAOIs	Drowsiness, anxiety and feeling irritable, sleep disturbance, dreaming a lot, slowed speech and a lack of muscle co-ordination.	Hallucinations, delusions

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## 5. Do antidepressants affect other medication?

This section is just a summary. You should tell your doctor or pharmacist about any medicines you take before you start or stop other medications. This includes over the counter medication, herbal or complementary remedies or medicines such as:

- ibuprofen,
- illegal drugs,
- other antidepressants,
- St John's Wort,<sup>14</sup> or
- anaesthetics.

Read through the medicine leaflet before you start taking any medicine. You can read through medicine leaflets online on electronic Medicines Compendium on [www.medicines.org.uk](http://www.medicines.org.uk)

### Do any foods affect antidepressants?

There are some foods that have an amino acid (protein) called tyramine that you should not eat if you are taking MAOIs. Tyramine can build up in your body if you eat it when you are taking MAOIs. Examples of foods that have this protein are:<sup>15</sup>

- cheese,
- pickled or salted meats or fish,

- overripe fruits and vegetables, and
- Oxo, Marmite or Bovril.

If you are taking this medication, ask your doctor about any foods that you should not eat.

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## 6. Does alcohol affect my antidepressants?

Drinking alcohol while taking antidepressants is not advised because alcohol can make depression worse. It can also increase the side effects of some antidepressants, like drowsiness, dizziness and co-ordination problems.<sup>16</sup>

To avoid alcohol-related harm, the NHS recommends that you should drink no more than 14 units of alcohol a week. It's best to spread this evenly over three or more days.<sup>17</sup>

You should not drink certain wines or beers if you are taking MAOIs. You should ask your pharmacist or doctor for more information.

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## 7. Can I drive when taking antidepressants?

Some antidepressants can affect your ability to drive. You may feel drowsy from your medication which can affect your reaction time. If your antidepressants make you drowsy you should not drive.<sup>18</sup>

You should tell the DVLA if you are taking medication that may affect your driving. You should also tell them if you have a medical condition that could affect your driving.

You can find out more information about '**Driving and mental illness**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 8. What else should I consider before taking antidepressants?

### Sex

Taking antidepressants may affect your sex life. Antidepressants can make you feel tired and can affect your hormones.

Side effects include:<sup>19</sup>

- lower sex drive,
- problems with getting an erection,
- difficulty ejaculating or having an orgasm, and
- poor vaginal lubrication.

If you are having these problems, talk to your doctor. You might be able to change medication or the amount you take.

### **Pregnancy**

You can take some antidepressants if you are pregnant but you should talk to your doctor. You may want to stay on antidepressants during your pregnancy if you think your symptoms will come back. Some antidepressants may be better for you during pregnancy.

If you are pregnant, some antidepressants can affect the baby. Some possible effects can be:<sup>20</sup>

- low birth weight,
- being uneasy and bad tempered,
- heart disease, and
- pulmonary hypertension (high blood pressure in the blood vessels between your lungs and heart).

Talk to your doctor if you are pregnant or plan on getting pregnant.

### **Breast feeding**

Small amounts of antidepressants can pass into your breast milk. Talk to your doctor or midwife about the risks and benefits of breastfeeding. Some antidepressants are better if you are breastfeeding and your doctor can tell you about this.

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### **Bristol Tranquilliser Project**

Bristol Tranquilliser Project provides help to people who are experiencing involuntary addiction to prescribed minor tranquilisers, sleeping pills and antidepressants. Their helpline is available to those living in England, Wales, Scotland and Northern Ireland.

**Telephone:** 0117 950 0020 (10am - 3.30pm Monday – Thursday).

**Address:** Suite 5A, Westbury Court, Church Road, Westbury-on-Trym, Bristol BS9 3EF

**Website:** [www.btpinfo.org.uk](http://www.btpinfo.org.uk)

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<sup>1</sup>Lichtigfield, F.J. & Gillman, M. A. Antidepressants are not drugs of abuse or Dependence. *Postgraduate Medical Journal*. 1998;74:529-532.

<sup>2</sup> National Institute of Health and Clinical Excellence. *Depression: the treatment and management of depression in adults (update)*. Clinical Guidance 90. London: National Institute of Health and Clinical Excellence; 2016. Page 24.

<sup>3</sup> Taylor, D. Paton, C. & Kapur, S. *The Maudsley Prescribing Guidelines*. 12th edition. Chichester: Wiley-Blackwell; 2015. Page 235-243.



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- <sup>4</sup> National Health Service. *Antidepressants - When they are used*. [www.nhs.uk/Conditions/Antidepressant-drugs/Pages/What-it-is-used-for.aspx](http://www.nhs.uk/Conditions/Antidepressant-drugs/Pages/What-it-is-used-for.aspx) (Accessed 31 October 2016)
- <sup>5</sup> Patient. *Tricyclic antidepressants*. <http://patient.info/health/tricyclic-antidepressants> (Accessed 31 October 2016)
- <sup>6</sup> British National Formulary. *Tricyclic and related antidepressant drugs*. [www.evidence.nhs.uk/formulary/bnf/current/4-central-nervous-system/43-antidepressant-drugs/431-tricyclic-and-related-antidepressant-drugs](http://www.evidence.nhs.uk/formulary/bnf/current/4-central-nervous-system/43-antidepressant-drugs/431-tricyclic-and-related-antidepressant-drugs) (Accessed: 31 October 2016)
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- <sup>8</sup> Barnet, Enfield and Haringey Mental Health NHS Trust. *Drug class – Specific serotonin re-uptake inhibitors (SSRIs)*. [www.choiceandmedication.org/behmht/class/9/](http://www.choiceandmedication.org/behmht/class/9/) (Accessed 31 October 2016)
- <sup>9</sup> The Royal College of Psychiatrists. *Antidepressants*. [www.rcpsych.ac.uk/healthadvice/treatmentswellbeing/antidepressants.aspx](http://www.rcpsych.ac.uk/healthadvice/treatmentswellbeing/antidepressants.aspx) (Accessed 31 October 2016)
- <sup>10</sup> Barnet, Enfield and Haringey Mental Health NHS Trust. *Drug class – tricyclic antidepressants*. [www.choiceandmedication.org/cnwl/class/10/](http://www.choiceandmedication.org/cnwl/class/10/) (Accessed 31 October 2016)
- <sup>11</sup> Barnet, Enfield and Haringey Mental Health NHS Trust. *Mono-Amine Oxidase Inhibitors (MAOIs)*. [www.choiceandmedication.org/cnwl/class/11/](http://www.choiceandmedication.org/cnwl/class/11/) (Accessed 31 October 2016)
- <sup>12</sup> National Health Service. *How should antidepressants be discontinued?* [www.nhs.uk/chq/Pages/869.aspx?CategoryID=73&#](http://www.nhs.uk/chq/Pages/869.aspx?CategoryID=73&#) (Accessed 31 October 2016)
- <sup>13</sup> See reference 4. Page 284.
- <sup>14</sup> Bilia, A.R. Gallori, S. & Vincieri, F. F., 2002. St. John's Wort and depression: efficacy, safety and tolerability-an update. *Life Sciences*. 2002;26: 3077-96.
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- <sup>16</sup> National Health Service. *Antidepressants-cautions*. [www.nhs.uk/Conditions/Antidepressant-drugs/Pages/Cautions.aspx](http://www.nhs.uk/Conditions/Antidepressant-drugs/Pages/Cautions.aspx) (Accessed 2 November 2016)
- <sup>17</sup> National Health Service. *Alcohol Units*. <http://www.nhs.uk/Livewell/alcohol/Pages/alcohol-units.aspx>. (accessed 15 November 2016)
- <sup>18</sup> See reference 18
- <sup>19</sup> See reference 18
- <sup>20</sup> Patient. *Depression in pregnancy*. [www.patient.info/doctor/Depression-in-Pregnancy.htm](http://www.patient.info/doctor/Depression-in-Pregnancy.htm) (Accessed 3 November 2016)



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This factsheet is available  
in large print.



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## Rethink Mental Illness Advice Service

Phone 0300 5000 927

Monday to Friday, 9:30am to 4pm  
(excluding bank holidays)

Email [advice@rethink.org](mailto:advice@rethink.org)

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We'd love to know if this information helped you.

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or write to us at Rethink Mental Illness:

RAIS  
PO Box 17106  
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We're open 9:30am to 4pm  
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### Need more help?

Go to [www.rethink.org](http://www.rethink.org) for information on symptoms, treatments, money and benefits and your rights.

### Don't have access to the web?

Call us on 0121 522 7007. We are open Monday to Friday, 9am to 5pm, and we will send you the information you need in the post.

### Need to talk to an adviser?

If you need practical advice, call us on 0300 5000 927 between 9:30am to 4pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

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