

Time to Talk

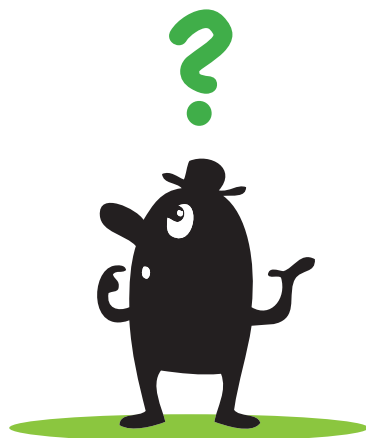
Medication Management – your self help guide

helping you make the
changes that you want,
so you can feel better

*Feeling sad or despairing?
Losing interest in things?
Irritable?
Worried?
Stressed?
Tearful?*



Getting started



Taking pills can be daunting, particularly if you are already worried about how you are feeling. But, if you know what they are and what to expect – it's easier to make them work for you, helping you feel better and manage your difficulties differently.

This booklet describes the different types of medication that your GP can prescribe for you.



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Introduction

Taking medication can be frightening, especially if you think you might experience side effects. You may not be sure how you might benefit from them. You may worry about becoming dependent on medication to make you feel better. These concerns are common amongst patients who start taking medication.

This booklet aims to help you understand the antidepressants medication and/or anti-anxiety medication that you have been prescribed by your GP. It will discuss the different types of antidepressants and anti-anxiety medications available the side effects they can cause and what to do if you experience any of these symptoms. This booklet will look at frequently asked questions about medication and suggest what to do if you feel you require further help. The aim is to reduce any fear and uncertainty you may have about your medication. This will help you to overcome your depression and anxiety in a safe and manageable way.

If you feel that you need more help, at the end of the booklet a list of local and national organisations is included where you can find further information about depression, antidepressants, anxiety, anxiety medications and other treatment available.

What are antidepressants?

When someone suffers from depression it is likely that they experience a reduction in the level of certain chemical messengers in their brain. These chemicals, called neurotransmitters, transmit messages between nerve cells in the brain in order to regulate our mood and emotions. The two most common ones are serotonin and noradrenalin. The brain requires an optimum level of these chemicals so that it can influence how we feel, emotionally and physically. Therefore, when this balance is altered, the way we feel can be altered too. In depression, it is thought that too little serotonin and noradrenalin is passed between the nerve cells causing low mood, sleep and appetite problems, low energy levels, poor concentration, and other common symptoms.

The role of antidepressants is to regulate the balance of these chemicals in the brain by increasing the levels serotonin and noradrenalin.

When are antidepressants necessary?

It is common for GPs to prescribe antidepressants for depression, low mood, sleep problems, fatigue, chronic pain, anxiety attacks, loss of interest or concentration, nervousness or tension and appetite problems. Although depression can go away on its own, taking antidepressants can speed up the recovery process.

When will I start to feel better?

These drugs take some time to be effective. It might take a few weeks until you feel the maximum benefits. Do not expect to notice them immediately. Most people find that they start to feel better after 2 to 3 weeks. However, the full effect of antidepressants is usually felt after 4 to 6 weeks. It is very important to continue taking the antidepressants so that the full effects can be felt.

Are antidepressants addictive?

Antidepressants are NOT addictive but, as with most medication, they do need to be taken with care. Some people find that they experience “discontinuation” effects if they stop taking their medication suddenly (e.g. anxiety, dizziness, nausea, and sleep difficulties). Coming off the medication gradually with the help of your GP should prevent these side effects.

In summary

- Taking antidepressants is NOT a sign of weakness
- Antidepressants won't change your personality
- They are NOT addictive, but should not be stopped suddenly as you may experience discontinuation effects, with the advice of your GP you should be able to prevent them.

Are there different types of antidepressants?

There are three main groups of antidepressants depending on which neurotransmitter(s) they interact with. They all have different effects and interactions. The following is just a brief description of the main groups:

1) SSRI

The most widely known of these is Prozac (Fluoxetine), but other common ones include Seroxat (Paroxetine) and Lustral (Sertraline). They are mainly used to treat depression. However they may also help if you suffer from anxiety, eating disorders, panic, obsessive-compulsive disorder or social phobia. SSRIs affect only one chemical in the brain: serotonin. They can be stimulating, in which case they are best taken in the morning. However, some people may find that they make them feel drowsy, in which case they are best taken at night to help with falling asleep.

2) Tricyclic

Work on both serotonin and noradrenalin. Some examples of Tricyclic antidepressants that you may have heard of are: Amitriptyline (Tryptizol), Clomipramine (Anafranil), Imipramine (Tofranil), and Nortriptyline (Allegron). They are used to treat depression but may also help if you suffer from anxiety, panic and sleep problems. If you are having trouble sleeping, it is best to take these medicines at night as they may help you get to sleep.

3) MAOI

The most widely known are: Isocarboxazid (Marplan) and Phenelzine (Nardil). They are particularly useful in resistant depression when other medicines have failed. Your GP may have already spent some time explaining how they work and their interactions, particularly with some types of food. However, if you are taking them and want more information please get further advice from your GP or pharmacist.

4) Other antidepressants

If you have not been prescribed any of the drugs you have seen here, don't worry! Some people respond better to other antidepressant drugs which do not fall into one of the categories described. There are newer drugs that follow the general principles explained here. Some examples are: Reboxetine (Edronax), Tryptophan (Optimax), and Venlafaxine (Efexor).

In summary

- There are 3 main groups of antidepressants: SSRI, Tricyclic and MAOI.
- Some antidepressant drugs do not fall into any of these categories but are just as effective.
- Antidepressants treat the symptoms of depression such as sleep problems, anxiety and low energy levels.
- The wide choice of drugs is necessary because different people respond differently to them. What suits one person will not necessarily suit another.

Kate

"I had only been taking my antidepressants for a day or so when I started to feel really sick and anxious. I spoke to my GP straight away because I was so worried about feeling this way. He said it sounded like I was having some side effects to the pills but that they should fade away. I decided to wait a few more days to see if he was right – and he was! Things are much better now."

How about side effects of antidepressants?

Side effects are fairly common when taking antidepressants, but are usually minor. Most people will experience some side effects during the first two weeks of taking their tablets. After that the side effects usually fade and disappear. As it may take as long as 4 weeks for the antidepressants to start working, some people feel a little worse before they begin to feel better and may give up on the medication too soon.

If you find that your side effects do not disappear after two weeks or if they are bothering you too much, discuss them with your GP. DO NOT stop taking the medicine on your own. Your GP can help you determine if you are experiencing a minor side effect that will go away soon, or if you need to switch to a different antidepressant. It is common for GPs to adjust the dosage or to switch medications. Your goal is to get the best possible therapeutic effects whilst keeping side effects to a minimum.

The table below gives you some useful hints about what to do if you experience any side effects. Remember that not everyone will get the side effects shown. Do ask your GP if you are worried about anything else that you think might be a side effect.

1) SSRI – Side effects

Common side effects	What to do?
Anxiety or restlessness	This should wear off fairly quickly, but discuss with your GP if not
Diarrhoea	This should wear off fairly quickly, but discuss with your GP if not
Insomnia	Discuss with your GP – you may want to change the time of your dose
Loss of appetite	Contact your GP if this is a problem
Nausea and vomiting	This should wear off fairly quickly but discuss with your GP if not
Sexual dysfunction (lack of libido, no interest in sex, inability to maintain an erection or have an orgasm)	Discuss this with your GP

2) Tricyclic – Side effects

Common side effects	What to do?
Dry mouth	Sucking sugar-free boiled sweets, chewing gum or eating citrus fruits may help
Blurred vision	See your GP if you are worried about this
Constipation	Eat more fibre e.g. bran, fruit and vegetables. Increase activity such as walking. Drink plenty of fluid. A mild laxative from the chemist may help
Weight gain	Avoid fatty foods. Eat plenty of vegetables and fibre. Try to increase your activity level

Uncommon side effects	What to do?
Headaches	It should be safe to take aspirin or paracetamol
Nausea	Taking each dose with or after food may help
Palpitations	Are not usually dangerous but talk to your GP if you feel concerned
Postural hypotension (low blood pressure causing you to feel faint when you stand up)	This is not usually dangerous but try not to stand up too quickly
Sexual dysfunction (lack of libido, no interest in sex, inability to maintain an erection or have an orgasm)	Discuss with your GP
Sweating (especially at night)	Discuss with your GP if it is bothering you

3) MAOI – Side effects

Common side effects	What to do?
Postural hypotension (low blood pressure causing you to feel faint when you stand up)	This is not dangerous. However, try not to stand up too quickly. If you feel dizzy do not drive

Uncommon side effects	What to do?
Constipation	Eat more fibre e.g. bran, fruit and vegetables. Increase activity such as walking. Drink plenty of fluids. A mild laxative from the chemist may help
Drowsiness	Don't drive or use machinery
Dry mouth	Sucking sugar free boiled sweets, chewing gum or eating citrus fruits usually helps. See your GP if this is causing you problems
Fatigue	Discuss this with your GP – your dose may need to be adjusted
Headache	It should be safe to take aspirin or paracetamol. See your GP if it persists
Insomnia	This is common with tranylcypromine – take your last dose before 3pm

Rare side effects	What to do?
Blurred vision	Don't drive. Contact your GP
Oedema (swelling on the legs)	This is not dangerous but do see your GP
Skin rashes	Stop taking your medication and see your GP
Sweating	Contact your GP to get your blood pressure checked
Urine retention (not passing much urine)	Contact your GP now

In summary

- You should start seeing an improvement after 2-4 weeks. If you are not feeling better after 4-6 weeks go back to see your GP.
- Don't worry if you have mild side effects, these are quite common and normally go away after 7-10 days.
- Make sure you tell your GP about any serious side effects
- Always consult your GP before stopping the medication
- Don't just stop them suddenly!

What if the side effects are severe or don't go away?

If the side effects don't decrease after 2 weeks, are difficult to manage or concern you in any way, mention them to your GP. You might need to try a different type of antidepressants or change the dose you are taking.

How and when should I take them?

Most medications now come with an information leaflet that you should read carefully. In addition, the label on your medication will have the appropriate instructions on how and when you should take them. Your GP can advise you on what time of the day you should take them. In general, medications with sedative effect are better taken at night, and activating medications are best taken in the morning. If you are on tricyclics, you need to gradually increase the dose as advised by your GP. It is important that you take them regularly, not just when you feel low.

What should I do if I forget to take them?

If you forget a dose, take it as soon as you have remembered it, unless it is almost time for your next dose. Some people take the medicine at the same each day, which helps to remember. During the first weeks you might want to leave yourself a reminder. Don't try to catch up by taking two or more doses at once as you may get more side effects.

Will the antidepressants affect my other medication?

If you are taking SSRIs or tricyclics you should be fine, although some painkillers or antihistamines can make you feel a bit drowsier. If you are on fluvoxamine and want to take indigestion tablets, wait for at least 2 hrs between each type of tablet. MAOIs can interact with some medications, and some foods, so please make sure your GP knows all the other pills you are taking. You need to be especially careful when taking medication for flu, colds, hay fever, asthma or coughs with MAOIs. It is also recommended not to take St. Johns Wort together with any antidepressant medication!

Can I stop taking them once I feel better?

No. Your GP will have advised you about how long to take your antidepressants for. Continuing to take your medication for at least 6 months after you are feeling better is normal and reduces your chances of becoming depressed again. If you stop taking them before this time, your original symptoms may return. Also, remember not to stop taking your antidepressant suddenly as this can cause discontinuation effects.

What if the antidepressants don't work?

The full effects of antidepressants are usually felt after 4 - 6 weeks of taking them. If you do not feel any better after this time, go back and see your GP. It may be that the class of drug or dosage you have been prescribed does not suit you. Your GP will be able to prescribe you a different drug or dosage that will be better for you. Remember that everyone is different – what works for one person will not necessarily work for another. Don't be concerned if things take time to settle down.

What are anti-anxiety medications?

Anti-anxiety medications are also known as tranquilizers. They are medications that help to relieve anxiety by slowing down the body's central nervous system. Anti-anxiety medications can be useful to relieve some symptoms of anxiety. However, they only provide short term relief of anxiety. Non-drug treatments are required to provide long term relief from anxiety by dealing with the underlying cause of anxiety.

Are there different types of anti-anxiety medications?

There are two main groups of anti-anxiety medications. They all have different effects and interactions. The following is a brief description of the main groups:

1) Benzodiazepines

There are two main types of Benzodiazepines – Anxiolytics and hypnotics. Anxiolytics are mainly used for treating anxiety and hypnotics are mainly used for treating insomnia. Benzodiazepines work by slowing brain activity. They do this by increasing the action of a neurotransmitter chemical called GABA. Benzodiazepines can only be prescribed by your GP. They normally bring about rapid or moderate relief of symptoms in most individuals.

2) Beta-blockers

There are many types of beta-blockers, and they work by blocking the transmission of a chemical messenger called noradrenaline. They widen the arteries, slowdown the heart and decrease the force of its contraction, maintaining heart activity at a lower level. Like Benzodiazepines, they can only be prescribed by your GP.

What are the names of common anti-anxiety medications?

(1) Benzodiazepines mainly for anxiety (anxiolytics)

Generic names	Examples of common brand names
Alprazolam	Xanax
Chlordiazepoxide	Librium, Tropicum
Diazepam	Valium, Dialar
Lorazepam	Ativan

(2) Benzodiazepines mainly used as sleeping tablets or sedatives (hypnotics)

Generic names	Examples of common brand names
Flurazepam	Dalmane
Loprazolam	
Lormetazepam	
Nitrazepam	Mogadon, Remnos
Temazepam	

(3) Beta-blockers

Generic names	Examples of common brand names
Acebutolol	Sectral
Atenolol	Tenormin
Atenolol in combination with calcium-channel blocker	Beta-Adalat, Tenif
Bisoprolol	Cardicor, Emcor
Carvedilol	Eucardic
Celiprolol	Celectol
Esmolol	Brevibloc

Generic names	Examples of common brand names
Labetalol	Trandate
Metoprolol	Betaloc, Lopresor, Betaloc-SA, Lopressor SR
Nadolol	Corgard
Nebivolol	Nebilet
Oxyprenolol	Trasicor, Slow-Trasicor
Pindolol	Visken
Propranolol	Inderal, Half-Inderal LA, Inderal-LA
Sotalol	Beta-Cardone, Sotacor
Timolol	Betim

What are the side-effects of anti-anxiety medications?

1) Benzodiazepines

Side effects
Drowsiness, lack of energy
Muscle weakness
Decreased ability to concentrate
Dizziness, light-headedness
Blurred vision
Nausea
Appetite changes
Slowed reaction times
Depressive symptoms
Confusion
Aggression

Benzodiazepines can temporarily affect your coordination and reasoning skills. Therefore, activities such as driving, drinking alcohol, operating machinery or signing legal documents are not recommended whilst taking this medication.

2) Beta-blockers

Common Side effects
Cold hands and feet
Tiredness
Headaches
Dizziness
Sleep disturbance (e.g. vivid dreams, nightmares)
Sexual problems
Wheezing
Indigestion
Visual disturbances
Skin rashes
Dry eyes

What should I do if I experience side-effects of anti-anxiety medications?

The degree of these side-effects depends on the dose and the individual's sensitivity to the medication. Discuss with your GP if the symptoms persist and impair your daily function.

Are anti-anxiety medications addictive?

If Benzodiazepines are taken for more than a few weeks, they can cause physical and psychological dependence. Beta-blockers are not addictive, however, if used on a chronic basis can cause physical dependence.

Can I stop taking anti-anxiety medications once I feel better?

Anti-anxiety medications do not cure anxiety. Rather, they provide short-term relief of anxiety. Also, abrupt discontinuation of benzodiazepine can lead to withdrawal symptoms such as confusion, anxiety, appetite and weight loss, sweating, light sensitivity, tremor, ringing in the ears, insomnia, restlessness and agitation. If you have been taking a benzodiazepine for some time and are concerned that you might be dependant on it, you should discuss this with your GP. Sudden withdrawal can cause very unpleasant and dangerous side effects - so **DO NOT STOP YOUR MEDICATION SUDDENLY** - consult your GP on how to safely and gradually discontinue medication.

Will anti-anxiety medications affect psychological treatments?

YES. They can interfere with psychological treatments, such as blocking exposure therapy – which is a behavioural intervention to help you slowly come in contact with causes of anxiety and overcome them. Also, taking medication can become a ‘safety behaviour’ – a behaviour that you engage in when you feel anxious to make you feel safer. Safety behaviours will reduce your anxiety in the short term, however, they prevent you from gaining the useful experiences that will help you to overcome your anxiety in the long-term.

Can I drink alcohol when taking antidepressants and / or anti-anxiety medications?

It is recommended that you don't drink while taking antidepressant and/or anti-anxiety medication (see instructions for further detail), especially when you are taking an MAOI (antidepressant), you should totally avoid some types of alcoholic drinks. Both your medication and the alcohol can cause drowsiness and this can become severe if taken together. Also, the antidepressants and anti-anxiety medications will be less effective. However, once you get used to your medication, you may be able to drink small amounts of alcohol occasionally. The best thing to do is to see how it makes you feel. If in doubt, consult your GP.

What about other drugs?

In general, if you are experiencing emotional or psychological difficulties, using non-prescribed drugs makes things worse and is not advisable. You should certainly refrain from using any illegal drugs while taking antidepressant and/or anti-anxiety medication, as it greatly increases the risk of adverse side effects and overdose.

What else can I do to feel better?

There are a number of coping strategies that you can use to help you recover faster from your depression, and to help prevent a recurrence of it. Remember that you have to take small steps to overcome your depression safely!

These are just some examples of things you can do to help yourself feel better while taking the medication:

- You can try to identify current life problems or social stresses and think of small steps you might take to reduce these problems. In general, it is advisable to avoid major decisions or life changes when you are feeling low.
- Plan short-term activities that will give you some enjoyment or that could help you build your self-confidence. You can make a list of pleasant activities that you already do or that you used to enjoy but have stopped doing (e.g. phone a friend, buy some flowers, go somewhere you like, do some gardening).
- Keeping good sleep patterns and a balanced diet can also help you feel better.
- Try to do some physical exercise; this will boost your mood and also help you to increase your activity levels. Here are some examples: take a walk, ride a bike, walk up and down the stairs, do a sport, go to the gym, swim.
- Find time to relax. Easy activities such as the following may help ease any tension you might be experiencing: listening to music, taking a bath, having a massage, going for a walk. There are also many relaxation techniques you can learn.
- Strengthen your support system. When people are depressed they often don't want to socialise, and it is easy to become even more depressed. You might want to increase your contacts with family and friends.
- Do one thing at a time; set yourself specific but realistic goals to work toward.
- Keep a diary of your achievements; it always helps to look back at what you have accomplished.
- Finally, be aware of possible setbacks and obstacles. Making changes in your life can be difficult!

Further help and useful organisations

Depression Alliance – 020 7633 0557

(Monday-Friday, 10am-5:30pm)

www.depressionalliance.org

This is a national charity providing information and support for those affected by depression, and their carers.

NHS Direct – 0845 4647

(24 hours every day of the week)

www.nhsdirect.nhs.uk

Advice and information on health problems.

Emergencies

If you are in crisis, especially if you feel at risk of harming yourself or someone else, contact your GP. Alternatively, you could contact:

West SUSSEX Mental Health Line: 24 hour support – 0300 5000 101

Support and information 24 hours a day, for anyone experiencing mental health problems and their carers.

Surrey Crisis Line – 0300 456 8342

For people in distress or with mental health problems. The service is staffed by care professionals who are experienced in working with people with mental health issues. The Helpline is available out of hours from 5.00pm to 9.00am Monday to Friday with 24-hour cover at weekends including Bank Holidays.

Samaritans – 0845 790 9090

Confidential emotional support, 24 hours a day, for people who are experiencing feelings of distress or despair, or feeling suicidal.

SANeline – 0845 767 8000

Open 1pm-11pm every day. SANeline is a national out-of-hours telephone helpline offering emotional support and information for people affected by mental health problems.

You can also go to your nearest Accident & Emergency department / Urgent Treatment Centre where you will be seen by someone who can discuss your difficulties with you.

Advice on medication:

If you have a query about medication, never hesitate to discuss it with your GP. Alternatively, you can also contact:

NHS Direct – 0845 4647

This booklet is yours to keep, so,
please make use of it again and again

To contact **Time to Talk**
Sussex Community NHS Trust,
please telephone your Locality Office

Crawley office

(Crawley area)

Tel: 01293 843 300

Mid Sussex office

(Burgess Hill, East Grinstead, Haywards Heath, Hurstpierpoint)

Tel: 01444 251 084

Horsham office

(Horsham, Storrington, Steyning, Henfield)

Tel: 01403 227 048

Worthing office

(Worthing, Shoreham, Lancing, Littlehampton)

Tel: 01903 703 540

Chichester office

(Chichester, Bognor, Arundel, Pulborough, Petworth,
Midhurst, the Witterings, Selsey, Southbourne)

Tel: 01243 812 537

www.sussexcommunity.nhs.uk/timetotalk