



ANTIPSYCHOTICS Pronounced: An-tea-

What are antipsychotics used for?

Antipsychotics are usually used to help treat people with schizophrenia and similar conditions such as psychosis. They are also used to treat problems such as mania, hypomania and mood disorders. Occasionally antipsychotics are used to help manage agitation or anxiety. They are often used to treat more than one condition, so if you are why you have been prescribed an antipsychotic, you should discuss this with your doctor.

Antipsychotics are classified into two groups, 'typical antipsychotics' and 'atypical' or 'second generation antipsychotics'. The 'typical antipsychotics' were the first to become available. Examples of 'typical antipsychotics' include haloperidol, chlorpromazine and piperazine. The 'atypical antipsychotics' include risperidone, aripiprazole. The difference in the side effects and frequency of the side effects between the two groups is not clear.

Medicines Information

SSRI antidepressants

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What are Selective Serotonin Reuptake Inhibitors (SSRIs) antidepressants used for?

Selective Serotonin Reuptake Inhibitors (SSRIs) are a group of medicines usually used to help treat people with depression. They can also be used to treat conditions such as anxiety, eating disorders, panic disorders, obsessive-compulsive disorder, post-traumatic stress disorder and social phobia. If you are unsure why you have been prescribed an SSRI, you should discuss this with your doctor. Examples of SSRIs include citalopram, fluoxetine, sertraline, paroxetine, and fluvoxamine. Your medicine may also have a trade or brand name. This is the name that the manufacturer gives to the medicine, for example Cipramil® is a brand name for citalopram, Prozac® is a brand name for fluoxetine, Lustral® is a brand name for sertraline, Seraxat® is a brand name for paroxetine and Favenin® is a brand name for fluvoxamine.

What are the benefits of taking SSRIs?

People with depression may feel fed up, unhappy and miserable most of the time, and this usually interferes with their everyday life. This feeling of depression is worse than short periods of unhappiness that people can experience from time to time. Restlessness, agitation and tiredness are common, as well as difficulty in sleeping and loss of appetite. People with depression may also feel hopeless and inadequate, and find it difficult to enjoy life. They may also have thoughts of harming themselves or committing suicide.

SSRIs can help to treat these symptoms in people who are unwell, and may also help to keep them well in the longer term. They may also help people to cope better so that they can enjoy life and be able to deal with any problems they may have.

How quickly do SSRIs work?

SSRIs work over a period of weeks. Some symptoms may start to improve before others, but it may take up to four weeks before they have their full effect. Not everybody benefits from SSRIs, but most people do. If you do not feel any benefit after four to six weeks, you should discuss this with your doctor or healthcare worker. Occasionally, thoughts of suicide or self-harm may increase in the first few weeks of treatment until your medicine has taken its full effect. If this happens to you tell your doctor immediately or go to the nearest hospital.

What are the usual doses of SSRIs and how should I take them?

Refer to the manufacturer's patient information leaflet for the SSRI that you have been given. The usual doses to treat depression for some SSRIs are given below but do not change your dose of medication without checking with your doctor, as doing so may affect your response to the medication, or be harmful.

- The usual dose of fluoxetine is between 20mg and 60mg daily.
- The usual dose of citalopram is between 20mg and 60mg daily.
- The usual dose of sertraline is between 50mg and 200mg daily.
- The usual dose of fluvoxamine is between 100mg and 300mg daily.
- The usual dose of paroxetine is between 20mg and 40mg daily.

What are the side effects of SSRIs?

As with all medicines there is a risk of unwanted effects (side effects). Some can occur soon after starting treatment so you may experience these before you feel better. Most are temporary and should go away after a few days or weeks. Not everyone will get side effects and many people experience them to different degrees. If you feel that you have side effects that are causing you discomfort, discuss this with your doctor, pharmacist, nurse or healthcare worker. The table on the following page lists some of the main recognised side effects of SSRIs but the chance of experiencing each of these side effects will depend on the individual SSRI that you have been prescribed.

What about alcohol or 'street' drugs?

Both alcohol and SSRIs can affect the brain so it is not recommended that you drink alcohol while taking SSRIs. Drinking alcohol can cause drowsiness, especially heavy drinking. Once you are used to medication, and know the effects of taking alcohol you may choose to drink occasionally and in small amounts. It is good to be aware because alcohol affects people in different ways, especially if you are experiencing each of these side effects will depend on the individual SSRI that you have been prescribed.

Do not stop taking your medication because you feel ill or if you drink alcohol, drink only small amounts. Never drive while taking medication.

'Street' drugs (for example, cannabis, ecstasy, speed, cocaine) may affect your antidepressant treatment. Taking cocaine whilst taking SSRIs may increase the risk of side effects and may be harmful. It is best if you do not take any 'street' drugs. You may need to get advice and support from your doctor or pharmacist that they are safe.

What about other medicines?

If you take any other medicines or herbs, you should tell your doctor or pharmacist. Some medicines may have been newly prescribed or bought, and some may be over-the-counter medicines. Some medicines may interact with your SSRI, so you should tell your doctor or pharmacist that they are safe.

When I should be cautious?

- It is usually safe to take SSRIs but there are some situations where they are not suitable for everyone. If you are taking an SSRI, you should tell your doctor if you have any of the following conditions:
- 1 If you are allergic to any of the ingredients or have had an allergic reaction before and developed a rash.
 - 2 If you are taking or have taken monoamine oxidase inhibitors (MAOIs), used sumatriptan used to treat migraines, or have taken a MAOI in the last 14 days.
 - 3 If you are taking or have taken tramadol, a painkiller.
 - 4 If you have previously had a seizure or are at risk of committing suicide.
 - 5 If you have diabetes, kidney or liver disease, or are pregnant or breastfeeding.

- 1 If you have a history of seizures.
- 2 If you have a history of low sodium levels.
- 3 If you have a history of low potassium levels.
- 4 If you have a history of low magnesium levels.
- 5 If you have a history of low calcium levels.
- 6 If you have a history of low iron levels.
- 7 If you have a history of low vitamin B12 levels.
- 8 If you have a history of low vitamin D levels.

Central & North West London Mental Health NHS Trust has developed a set of leaflets on medicines used to treat mental illness. The leaflets aim to provide high quality, evidence-based, unbiased information to service users and carers. Service users have been involved in the content and design of these leaflets. They have been reviewed by the Plain English Campaign and are designed to be easily understood.

Patient information leaflets support people to make informed decisions about their medicines. They also promote concordance by ensuring people have an awareness of the benefits and risks of taking medicines. As recommended by the National Institute for Clinical Excellence (NICE), these leaflets have been translated into a range of foreign languages to support service users and carers with a limited command of the English language.

Leaflets are provided in:

Albanian	Arabic	Bengali	English	Farsi	French	Kurdish
Tamil	Turkish	Gujarati	Greek	Somali	Urdu	

The following leaflets are available:

Acetyl Cholinesterase Inhibitors	Fluphenazine Decanoate	Propranolol
Amisulpride	Haloperidol Decanoate	Quetiapine
Anticholinergics	Lamotrigine	Reboxetine
Antipsychotics	Lithium	Risperidone
Aripiprazole	Long Acting Risperidone Injection	SSRI Antidepressants
Atomoxetine	MAOI Antidepressants	Sulpiride
Benzodiazepines	Methylphenidate	Tricyclic Antidepressants
Carbamazepine	Mirtazapine	Valproate
Clozapine	Moclobemide	Venlafaxine
Discontinuing Antidepressants	Olanzapine	Zuclopentixol Decanoate
Flupentixol Decanoate	Pipotiazine Palmitate	

A CD-ROM of Patient Information Leaflets is available for **£5,000** for use within a single Trust and can be freely distributed within your Trust and placed on your Trust intranet

I enclose a cheque for: £ 5,000
Made payable to : **CNWL MH NHS Trust**
Please send cheque to
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Greater London House
Hampstead Road
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Please keep me informed about future publications of CNWL Patient Information Leaflets
Email Address: _____

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If you require further information please email : pharmacy.cnwl@nhs.net or telephone 0203 214 5896

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