

Amitriptyline

(pronounced amee-trip-ta-leen)

Why has amitriptyline been prescribed?

Amitriptyline is an antidepressant. These medications are prescribed to treat depression and other mood disorders such as anxiety. Amitriptyline is also used to treat neuropathic pain and for migraine prevention.

What are the benefits of taking amitriptyline?

Antidepressants are effective in reducing the severity of the symptoms of depression. They also shorten the time to recovery and prevent depression returning.

Are there any precautions with amitriptyline?

Amitriptyline is suitable for most people. As with all medicines, however, there are precautions. Your prescriber will usually check that it is safe to prescribe amitriptyline, but let your prescriber know if any of the following apply to you, as extra care may be needed:

- a) if you have epilepsy, diabetes, glaucoma, phaeochromocytoma, porphyria or suffer from heart, liver, kidney, thyroid or prostate trouble
- b) if you are taking any other medication, especially anticoagulants such as warfarin, medication for schizophrenia, medication for anxiety or insomnia, medication for high blood pressure, amiodarone, cimetidine, HIV medications, anticonvulsants or strong pain killers. Also, tell your prescriber if you buy any medicine 'over the counter' from a pharmacy or supermarket. Please also tell your prescriber if you take any alternative or complementary medicine such as Chinese herbal medicines. St John's Wort should not be taken by patients prescribed amitriptyline.
- c) if you are pregnant, breast feeding, or wish to become pregnant.
- d) If you have lactose intolerance as this is an ingredient of the tablets (but not the liquid).

What is the usual dose of amitriptyline?

The starting dose is usually 25mg at night. The dose is then usually slowly increased. For most people, the most effective dose of amitriptyline is between 100mg and 150mg at night. It may take some time to get to the dose that is most suitable. In conditions other than depression, lower doses are used.

How should amitriptyline be taken?

Amitriptyline is usually taken once a day, at night. However, you and your prescriber may decide that it is better for you to take the medicine at another time.

What form does amitriptyline come in?

Amitriptyline is available as tablets and liquid. The tablets are available as 10mg, 25mg and 50mg. The liquid comes as 25mg per 5ml or 50mg per 5ml.

What should be done if a dose is missed?

If you forget a dose, take it as soon as you remember. If you miss a whole day's dose – just carry on as normal with the next day's dose. If you miss more than a day's dose, speak to your prescriber.

What will happen when amitriptyline is first taken?

Amitriptyline, like many medicines, does not work straight away. For example, it may take several days or even weeks for some symptoms to improve. To begin with, some people find that amitriptyline may help them feel more calm and relaxed. Later, (usually in two to three weeks) other symptoms should begin to improve. Many people do not experience any side effects. However some people may experience some side effects. We have listed potential side effects in the table below, whether or not they are likely to be short or long-term and what measures can be taken is also described. There are other possible side effects – we have listed only the most important ones. Ask your doctor, pharmacist or nurse if you are worried about anything else that you think might be a side effect. Further information on side effects is available in the official manufacturer's leaflet.

Reporting side effects

The 'Yellow Card' scheme encourages patients to report any side effects that they feel may be caused by their medication. Ask your doctor, pharmacist or nurse for the forms if you wish to report any side effects. Alternatively, telephone 0800 100 3352 or go to www.mhra.gov.uk.

Is amitriptyline addictive?

Amitriptyline is not addictive, but if you stop taking the medicine suddenly, you may experience unpleasant physical feelings. Symptoms are fairly common and include nausea, insomnia, dizziness, diarrhoea, excess salivation and vivid dreams. Reducing the dose of amitriptyline slowly may make these symptoms less severe.

What about alcohol?

It is recommended that people taking amitriptyline should not drink alcohol. This is because both antidepressants and alcohol can cause drowsiness. If the two are taken together, severe drowsiness can result. This can lead to falls and accidents. As well as this, drinking alcohol may make depression and anxiety worse. However, once people are used to taking medication, then *very small amounts* of alcohol may not be harmful. It pays to be very careful, because alcohol affects people in different ways, especially when they are taking medication. Never drink alcohol and drive. Discuss any concerns you have with your doctor, pharmacist or nurse.

Is it OK to stop taking amitriptyline when symptoms go away?

No. If you stop taking amitriptyline, your original symptoms are very likely to return. Most people need to remain on amitriptyline for at least six months after they have fully recovered. You should always discuss with your prescriber any plans you have to reduce or stop any of your prescribed medicines.

Are there any alternatives to amitriptyline?

Yes, there are alternatives available. Although antidepressants have broadly similar therapeutic effects they differ in the side effects they produce. There are more than 20 antidepressants available so most people can find one which suits them. Psychological therapies can also help in some types of depression, either as an alternative to medication or alongside it.

Summary of side effects

Side effect	Side effect
<p>Drowsiness - Very common</p> <p>What can be done about it? This should wear off within a few days or weeks. Discuss with your prescriber if this persists. Taking the medication at night-time may help, but beware of drowsiness in the following morning.</p> 	<p>Dry mouth – Very Common</p> <p>What can be done about it? This should wear off within a few days. Sugar-free boiled sweets, chewing gum or eating citrus fruits may help. Discuss with your prescriber if this persists.</p> 
<p>Constipation – Very Common</p> <p>What can be done about it? Eat lots of fibre – fruit and vegetables are good sources. Drink plenty of fluids. Your prescriber may prescribe a laxative.</p> 	<p>Blurred vision - Common</p> <p>What can be done about it? This should wear off within a few days. Discuss with your prescriber if this persists. It may be necessary to switch to another medication. Symptoms will go away when switched to another medication.</p> 
<p>Postural hypotension - Common (low blood pressure)</p> <p>What can be done about it? Try not to stand up too quickly. If you feel dizzy do not drive. This dizziness is not dangerous and should wear off after a few days.</p> 	
(Other less common) Side effects	How common is it and what can be done about it?
Increased appetite	Uncommon Try to eat healthily and take exercise.
Agitation	Uncommon This should wear off in a few days. Discuss with your prescriber if this persists.

Sweating	Uncommon Discuss this with your prescriber if it becomes troublesome.
Sexual dysfunction – reduced libido (desire) and lack of orgasm in males and females. Impotence in males	Uncommon Any changes should be reported to your prescriber. It may be necessary to switch to another medication. Symptoms should go away when switched to another medication.
Nausea	Uncommon This should wear off within a few days. Taking the medication with food may help. Discuss with your prescriber if this persists.
Tachycardia (palpitations)	Rare Contact your prescriber if you experience palpitations.
Urinary retention (difficulty passing water)	Rare Contact your prescriber if you have any difficulty passing water.

Very common = almost everyone affected Common = many people affected Uncommon = some people affected
Rare = few people affected Very rare = very few or no one affected

Disclaimer

This leaflet is to help you understand more about your medication. This is not an official manufacturer's Patient Information Leaflet (see <http://www.medicines.org.uk/emc/>). Remember, leaflets like this can only describe some of the effects of medication. You may also find other books or leaflets useful. If you have access to the internet you may find a lot of information there as well, but be careful, as internet based information is not always accurate. If in doubt consult your GP or a health care professional.

This leaflet has been supplied by:

Medicines Information, Pharmacy Department, Maudsley Hospital, London SE5 8AZ | **Telephone:** 020 3228 2317

Artwork by Oscar Millar
www.millarstratton.co.uk