

Sertraline

(pronounced ser – tra - leen)

Why has sertraline been prescribed?

Sertraline is an antidepressant known as a selective serotonin re-uptake inhibitor or SSRI. These medications are prescribed to treat depression and other mood disorders such as anxiety and obsessive compulsive disorder.

What are the benefits of taking sertraline?

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 sertraline?

Sertraline is suitable for most people. As with all medicines, however, there are precautions. Your prescriber will usually check that it is safe to prescribe sertraline, 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, a history of stomach ulcers or suffer from heart, liver or kidney trouble.
- b) if you are taking any other medication, particularly the antibiotics linezolid, clarithromycin, erythromycin, telithromycin, and the drug rifampicin used in tuberculosis, selegiline used in Parkinson's disease, drugs for schizophrenia, bipolar disorder, depression and anticoagulants such as warfarin, anti-inflammatory drugs or drugs for migraine. 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 sertraline.
- c) if you are pregnant, breast feeding, or wish to become pregnant.
- d) If you are lactose intolerant the Sandoz brand of sertraline tablets contains lactose, all other brands should be fine.

What is the usual dose of sertraline?

The starting dose is usually 50mg a day. The usual dose of sertraline may be between 50mg and 200mg depending on the condition for which it has been prescribed. It may take some time to get to the dose that is most suitable.

How should sertraline be taken?

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

What form does sertraline come in?

Sertraline is available only in tablet form. The tablets are available as 50mg and 100mg.

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 sertraline is first taken?

Sertraline, 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 sertraline may help them feel more alert and less slowed down. 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 sertraline addictive?

Sertraline 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, electric shock sensations, anxiety, dizziness and vivid dreams. Reducing the dose of sertraline slowly may make these symptoms less severe.

What about alcohol?

It is recommended that people taking sertraline 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 may have with your doctor, pharmacist or nurse.



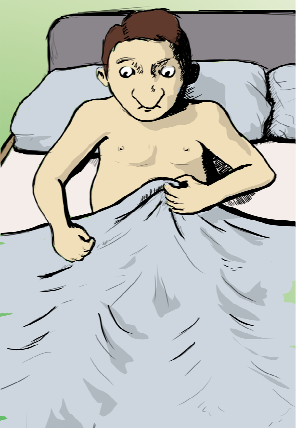

Is it OK to stop taking sertraline when symptoms go away?

No. If you stop taking sertraline, your original symptoms are very likely to return. Most people need to remain on sertraline 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 sertraline?

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>Nausea - Common</p> <p>What can be done about it? This should wear off within a few days. Taking the medication with food may help. Discuss with your prescriber if this persists.</p> 	<p>Anxiety or restlessness - Common (feeling worried and agitated)</p> <p>What can be done about it? This should wear off within a few days. Discuss with your prescriber if this persists.</p> 
<p>Sexual dysfunction - Common</p> <p>Reduced libido (desire) and lack of orgasm in males and females. Impotence in males.</p> <p>What can be done about it? 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.</p> 	<p>Insomnia or disturbed sleep - Common</p> <p>What can be done about it? This should wear off within a few days. Sertraline should be taken in the morning. Discuss with your prescriber if this persists.</p> 
(Other less common) side effects	How common is it and what can be done about it?
Diarrhoea – loose stools	Uncommon This should wear off within a few days. Discuss with your prescriber if this persists.
Loss of appetite	Uncommon This should wear off within a few days. Discuss with your prescriber if this persists.
Drowsiness	Uncommon This should wear off within a few days. Discuss with your prescriber if this persists. Taking the medication at a different time may help.
Dry mouth	Rare 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.
Headache	Rare This should wear off within a few days. Paracetamol can be taken but discuss with your prescriber if this persists.
Liver problems – jaundice (skin turns yellow and is itchy)	Rare Any changes will be noted by your prescriber and the medication will be stopped.

Very common = almost everyone affected
Rare = few people affected

Common = many people affected
Very rare = very few or no one affected

Uncommon = some people 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:

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