

Common Groups of Antidepressants

Generic Name	Actions and Cautions	Common Side Effects
<p><u>Tricyclic Antidepressants (TCAs):</u> Amitriptyline Clomipramine Dothiepin Doxepin Imipramine Nortriptyline Trimipramine</p> <p><u>Heterocyclic:</u> Mianserin</p>	<p>TCAs and Heterocyclic: work by slowing down reuptake of serotonin and noradrenaline, but also have other effects on the nervous system.</p> <p><u>Serotonin Syndrome:</u> <i>If combined with other drugs that can also affect serotonin, such as Tramadol, SSRIs, Venlafaxine, MAOIs, Mirtazapine, there is a risk of 'serotonin syndrome'.</i> <i>Symptoms include:</i> <i>agitation/restlessness, sweating, diarrhoea, hyperreflexia, lack of coordination, shivering and tremor</i></p>	<ul style="list-style-type: none"> - over-sedation - dry mouth, blurred vision - urinary retention, constipation - sweating - weight gain - dizziness when standing quickly - sexual dysfunction <p><i>TCAs can cause serious side effects at doses higher than normal; care is required in people with a history of heart disease</i></p>
<p><u>Monoamine Oxidase Inhibitors (MAOIs):</u> Phenelzine Tranylcypromine</p>	<p>MAOI: block the action of monoamine oxidase A and B.</p> <p>Precaution: <i>a potential fatal reaction can occur as a result of eating certain foods or combining with other medicines.</i></p> <p>A strict diet must be adhered to while under-going treatment with an MAOI and for 2 weeks after stopping the drug.</p> <p><u>See also 'Serotonin Syndrome' above</u></p>	<ul style="list-style-type: none"> - over-stimulation, restlessness - insomnia, blurred vision - low blood pressure - chronic use may cause liver damage
<p><u>Reversible Inhibitor of Monoamine Oxidase A (RIMA):</u> Moclobemide</p>	<p>RIMA: block the action of monoamine oxidase A enzyme but not irreversibly.</p> <p><u>See also 'Serotonin Syndrome' above</u></p>	<ul style="list-style-type: none"> - nausea, headaches, dizziness, - insomnia
<p><u>Selective Serotonin Reuptake Inhibitors (SSRIs):</u> Citalopram Escitalopram Fluoxetine Fluvoxamine Paroxetine Sertraline</p>	<p>SSRIs: work by slowing down re-absorption of serotonin (neurotransmitter) in gaps between the nerve cells.</p> <p><u>See also 'Serotonin Syndrome' above</u></p>	<ul style="list-style-type: none"> - nausea, indigestion, diarrhoea - headaches, loss of appetite - nervousness, irritability - excess stimulation in some patients - sleep disturbance therefore morning dosing - drowsiness, tiredness - sexual dysfunction

<p><u>Serotonin & Noradrenaline Reuptake Inhibitors (SNRIs):</u> Venlafaxine Duloxetine Desvenlafaxine</p>	<p>SNRIs: work by slowing down the reuptake of both serotonin and noradrenaline, but more selectively than other drugs.</p> <p><u>See also 'Serotonin Syndrome' above</u></p>	<ul style="list-style-type: none"> - nausea, sedation, drowsiness - dizziness - dry mouth, headaches, sweating
<p><u>Noradrenergic & Specific Serotonin Antagonist (NaSSA):</u> Mirtazapine</p>	<p>NaSSA: block the adrenergic alpha & serotonergic receptors; thus enhance the release of noradrenergic and serotonergic transmission.</p> <p><u>See also 'Serotonin Syndrome' above</u></p>	<ul style="list-style-type: none"> - dry mouth, dizziness - sedation, weight gain
<p><u>Noradrenaline Reuptake Inhibitors (NARIs):</u> Reboxetine</p>	<p>NARIs: increase the amount of noradrenaline in the brain.</p>	<ul style="list-style-type: none"> - urinary retention, dry mouth - constipation - sweating, blood pressure increase - insomnia.
<p><u>Melatonergic Agonist:</u> Agomelatine</p>	<p>Enhances the effectiveness of melatonin receptors and selectively blocks the serotonin receptor.</p>	<ul style="list-style-type: none"> - dizziness, headache and nausea
<p><u>Multimodal (serotonin modulator)</u> <u>Vortioxetine</u></p>	<p>Selectively increase the amount of serotonin in the brain via</p>	<ul style="list-style-type: none"> -Nausea, diarrhoea, dizziness, constipation, vomiting & sexual dysfunction