

## IMPORTANT FACTS ABOUT COMMON ANTIDEPRESSANTS PRESCRIBED FOR ELDERS

Antidepressants	Half Life	Dose Range	Major Drug Interactions	Sedation	Appetite
Celexia (Citalopram)	Adults 35 hours	20-40 mg / day	Minimal interactions	Low	Not documented
Luvox (Fluvoxamine)	Adults 16 hours Not affected by age	100-300 mg per day	/ Theophylline conc. / Warfarin effect (Conc./Action) / Phenytoin levels/toxicity / Cisapride "Propulsid" side-effects / Benzodiazepinse	High	↓
Paxil (Paroxetine)	Elderly 30 hours with 20 mg	10-40 mg/day	/ TCA levels & effects / Side-effects w/Dextromethorphan	Moderate	↓
Prozac (Fluoxetine)	Days to weeks in elderly	10-40 mg / day	/ Phenytoin conc./toxicity / TCA conc./side-effects / Benzodiazepines' effects	Very Low	↓
Serzone (Nefazodone)	Adults 2 to 4hours	100-400 mg per day	/ Benzodiazepines' side-effects / Carbamazepines levels/conc. / Cisapride side-effects / Phenytoin side-effects	High	Not documented
Zoloft (Sertraline)	Adults 26 hours Elderly↑ by 40%	25-200 mg/day	Minimal interactions	Low	No change
Remeron (Mirtazapine)	31-39 hrs. in elderly	7.5-45 mg/day	Minimal interactions	Moderate	↑
Effexor (Venlafazine)	8 hours in Adults	25-225 mg/day	Minimal interactions Can effect TCA levels/ side-effects	Moderate	↓
Pamelor (Nortriptyline)	37-45 hrs in elderly	25-75 mg/day	TCA levels/side-effects can be influenced by many	Moderate	Increased

			other drugs --- Carbamazepine may ↓ TCA levels. -Other antidepressants may ↓ TCA level		
Wellbutrin (Bupropion)	8-24 hrs.	75-400 mg/day	-Minimal interactions -Caution with L-Dopa -Caution with seizure lowering drugs	None	Decrease

**\* All antidepressants are contraindicated with MAO inhibitors**

**\* Half-life may be prolonged with the elderly**