

## IM 6 Antidepressants

Antidepressant	MOA	Time to Effectiveness	Side Effects	Nursing Interventions / Teaching
SSRIs	Block reuptake of 5-HT	2 to 3 weeks	Weight gain (but less than with other antidepressants), anxiety, agitation, akathisia, nausea, insomnia, and sexual dysfunction such as decreased sex drive or difficulty achieving an erection or orgasm, Less common: Sedation, sweating, diarrhea, hand tremors & headaches. Nonlethal in overdose. Serotonin syndrome may occur.	Take with food to reduce nausea. Akathisia may be treated with propranolol or a benzodiazepine. Take in the am to reduce insomnia or may need sedative-hypnotic for sleep. For missed doses take within 8 hours or omit dose for the day. Teach signs of serotonin syndrome.
TCAs	Block reuptake of NE and to a lesser degree 5-HT. Also block cholinergic receptors causing anticholinergic effects.	4 to 6 weeks	Anticholinergic effects such as dry mouth, constipation, urinary hesitancy or retention, dry nasal passages, & blurred near vision. More severe anticholinergic effects are agitation, delirium, and ileus. Others side effects include orthostatic hypotension, sedation, weight gain, tachycardia. Sexual dysfunction. <b>Lethal in overdose.</b>	Use sugar free candies or mints for dry mouth, Dietary fiber and liquids for constipation. Go from lying or sitting to a standing position slowly. Monitor caloric intake & exercise for weight gain. Take at night. For missed doses take within 3 hours or omit dose for the day. <b>Use with caution in elderly due to side effect profile.</b>
MAOIs	Inhibits enzyme that degrades NE and 5-HT	2 to 4 weeks	Daytime sedation, insomnia, weight gain, dry mouth, orthostatic hypotension, & sexual dysfunction. Life-threatening: Hypertensive crisis due to increased tyramine levels.	Do not eat food containing tyramine. Do not take with SSRIs & some TCAs, buspirone, or opiate derivatives. Teach about risk of hypertensive crisis.

5-HT = Serotonin    NE = Norepinephrine