Medications Factsheet

an informative summary with answers to frequently asked questions

Clarity HEALTH CARE

ANTIDEPRESSANTS

What are antidepressants?
Antidepressants aim to relieve the symptoms of depression and help prevent it from coming back. Taken in a daily pill format, they work to stabilise your emotions, so you are able to follow a normal daily routine. They are also taken to relieve symptoms such as restlessness, anxiety, sleep problems, and to prevent suicidal thoughts.[1]

There are many different classes of antidepressants, such as serotonin and noradrenaline, which all work in different ways to restore the imbalance of chemicals in the brain.

Selecting the best antidepressant for you requires careful discussion with your doctor.
The selection decision can be influenced by:

- Age
- Chronic illness
- Pregnancy
- Breastfeeding
- Other concurrent medications

What are antidepressants used to treat?
Antidepressants are often prescribed for moderate or severe depression, and tend to be used alongside psychological treatment (also known as talking therapies). They may also be helpful in the treatment of obsessive compulsive disorder, social phobia, and post-traumatic stress disorder.

How do antidepressants work?
While it is not known exactly how antidepressants work, it is thought that they increase the levels of certain chemicals in the brain. The nerve cells in our brain use these chemicals to pass on signals and it is believed that depression is caused by an imbalance of certain chemicals, such as serotonin, which means that signals can't be passed along the nerves properly. Antidepressants aim to increase the availability of these chemicals.

How long do antidepressants take to work?
Antidepressants need to reach a certain dose before they begin to work. The level of the dose varies for different antidepressants. Most people can expect to feel a difference within about two to three weeks of reaching the required dose. For some people, it can take up to eight weeks or a little longer before they start to feel better. It is important to continue taking the medication to allow the best chance of it working.

Do antidepressants have any side effects?
All medicines have side effects, even the ones you can buy without a prescription at a pharmacy, supermarket or health food store. The important things to remember are that not everyone experiences side effects. It is important to balance unpleasant side effects against the distress and pain caused by depression. Side effects usually occur early in the treatment and many of them will settle down after a few weeks, when the body has adapted to the medications.
Most side effects occur during the initial stages of taking the medicine and last for a short period of time (about 1 to 2 weeks).

ANTIDEPRESSANTS

What if I miss a dose?
If you miss a dose, take it as soon as possible, as long as it is only a few hours after the usual time. Otherwise, wait until the next dose is due and take it as normal – **do not** try to catch up by doubling the dose.

Why is it so important to keep taking antidepressants?
It is important not to stop antidepressants immediately when you start feeling better, as this may cause you to relapse.
Antidepressants are not addictive.

When taken regularly, antidepressants will contribute to the recovery of around 60-70% of patients.

It is important that you continue with treatment, as prescribed by your doctor, even beyond the time you begin to feel better: if treatment stops too early, there is a high risk of depression returning, especially within the first six months of stopping treatment.
There is a state called 'antidepressant discontinuation reaction', which can occur with some antidepressants if they are stopped abruptly. It includes symptoms such as agitation, headache, fatigue, and dysphoria.

Do antidepressants need monitoring?
You should consult your doctor when you want to stop taking antidepressants, as the process of coming off them needs to be done slowly and must be overseen by your healthcare professional. Do not stop taking antidepressants suddenly.

Things to be aware of when taking antidepressants.

- Care should be taken when combining antidepressants with other sedative drugs or alcohol, as the sedative effects are additive.
- Care should be taken when driving or operating machinery, as reaction times may be slowed.
- Antidepressants such as **paroxetine, venlafaxine, desvenlafaxine, and duloxetine** should be slowly reduced rather than stopped suddenly, to avoid an antidepressant discontinuation reaction.
- Taking **SSRI** (selective serotonin reuptake inhibitors – a common type of antidepressant) with or after food will help prevent gastrointestinal discomfort.
- **Benzodiazepines** may be useful for short-term treatment (one to two weeks) for pronounced insomnia or anxiety.

Don't stop taking antidepressants suddenly.

References
[1] InformedHealth.org [Internet]. Cologne, Germany: Institute for Quality and Efficiency in Health Care (IQWiG); 2006-. Depression: How effective are antidepressants? [Updated 2020 Jun 18]. Available from: https://www.ncbi.nlm.nih.gov/books/NBK361016/

ANTIPSYCHOTIC MEDICATION

What are antipsychotic medications?
Antipsychotic medications, or 'antipsychotics', are often effective in controlling psychotic symptoms and helping people to return to normal life.

Typical or First Generation Antipsychotics	*Chlorpromazine, Fluphenazine, Flupenthixol, Haloperidol, Pericyazine, Thioridazine, Trifluoperazine, Zuclopenthixol*
Atypical or Second Generation Antipsychotics	*Amisulpride, Asenapine, Clozapine, Lurasidone, Olanzapine, Quetiapine, Paliperidone, Risperidone, Sertindole, Ziprasidone*
Third Generation Antipsychotics	*Aripiprazole, Brexpiprazole*

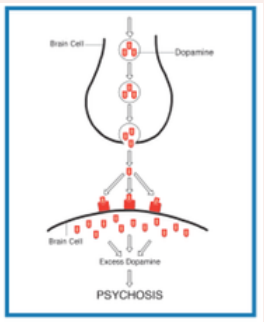
What are antipsychotic medications used to treat?
They are able to reduce distressing and disabling symptoms of psychosis, such as hallucinations, disorganised thinking, altered perceptions of reality, mood swings, extreme fearfulness and severe agitation.

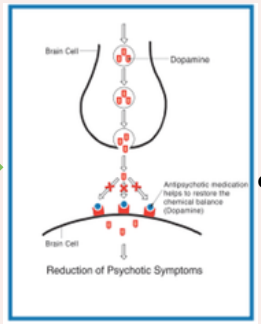
While all antipsychotics are effective in reducing or even eliminating positive symptoms of psychotic disorders, they are not as effective for negative and cognitive symptoms (low dose amisulpride, clozapine and cariprazine may have a role).

ANTIPSYCHOTIC MEDICATION

How do antipsychotic medications work?

An imbalance of the brain's natural chemicals, such as dopamine, can result in psychotic symptoms.





Antipsychotic medications help to restore the brain's natural chemical balance, especially dopamine.

This helps reduce or eliminate psychotic symptoms.

How long do antipsychotic medications take to work?
Antipsychotics begin to relieve agitation and sleep disturbances in about one week. Many people see substantial improvement by the fourth to sixth week of treatment. Antipsychotics require time to work, so do not decrease or increase the dose, or stop the antipsychotic, without discussing with your doctor first.

Do antipsychotic medications have any side effects?
All medicines have side effects - even the ones you can buy without a prescription at a pharmacy, supermarket or health food store. The important things to remember are that not everyone will have the same unwanted side effects. Side effects usually occur early in the treatment, many of them will settle down after a few weeks, when the body has adapted to the medications.

The atypical or second and third generation antipsychotics generally have fewer side effects than the older agents, especially extrapyramidal (impaired motor control) side effects such as rigidity, persistent muscle spasm, tremors, and restlessness. Also, they may be effective in improving mood, thinking and motivation.

ANTIPSYCHOTIC MEDICATION

Side Effect	Treatment
Muscle spasms, excessive rigidity, shaking, inner restlessness	These symptoms can be controlled with: **Anticholinergic agents**: benztropine, benzhexol. **Beta blockers**: propranolol. **Benzodiazepines**: diazepam, clonazepam, lorazepam.
Drowsiness / fatigue	This problem usually goes away with time. Use of other drugs that make you drowsy will worsen the problem. Avoid driving a car or operating machinery if drowsiness persists.
Dizziness	Get up from a lying or sitting position slowly; dangle your legs over the edge of the bed for a few minutes before getting up. If dizziness persists or if you feel faint, then contact your doctor.
Dry mouth	Sour candy, ice cubes, popsicles, and sugarless gum helps increase saliva in your mouth; try to avoid sweet, calorie-laden beverages. Drink water and brush your teeth regularly.
Blurred vision	This usually occurs at start of treatment and may last one to two weeks. Reading under a bright light or at a distance may help; a magnifying glass can be of temporary assistance. If the problem continues, discuss with your doctor.
Constipation	Increase bulk foods in your diet, drink plenty of fluids, and exercise regularly. A bulk laxative or a stool softener helps regulate the bowels.
Weight changes	Monitor your food intake. Maintain a healthy diet and try to avoid foods with high fat content. Establish a regular exercise regime. Let your doctor know if you notice a rapid increase in your weight or waist measurement.

ANTIPSYCHOTIC MEDICATION

Continued...

Side Effect	Treatment
Nausea or heartburn	If this happens, take the medication with food.
Change in sexual ability / desire	Discuss with your doctor about other medications without this side effect and which may be an appropriate alternative for you.

What if I miss a dose?
If you miss a dose, take it as soon as possible, as long as it is only a few hours after the usual time. Otherwise, wait until the next dose is due and take it as normal – do not try to catch up by doubling the dose.

Why is it so important to keep taking antipsychotic medications?
Following a first episode of psychosis, it is recommended that antipsychotic medication be continued for at least one to two years, as this decreases the chance of becoming ill again. For individuals that have had a psychotic illness for several years or repeated psychotic episodes, antipsychotic medication should be continued indefinitely. This is similar to someone with diabetes requiring lifelong insulin.

It is important that antipsychotic medication is not stopped abruptly. Instead, consult the prescribing doctor or pharmacist about any concerns you have.

Do antipsychotic medications interact with any other medications?
Antipsychotics can change the effect of other medications, or may be affected themselves by other medication. Always check with your doctor or pharmacist before taking other drugs, vitamins, minerals, herbal supplements, and alcohol. Always inform any doctor or dentist that you see that you are taking an antipsychotic medication.

ANTIPSYCHOTIC MEDICATION

Depots/long-acting antipsychotic injections
Depots or long-acting antipsychotic injections (LAI) can be an important option for those who find it difficult to stick to a regular medication schedule, and can help to reduce relapse and readmission to hospital. Where feasible, they should be prescribed when this is the person's preference and as part of a treatment plan in order to maintain wellness. They provide a convenient alternative to multiple daily oral doses of antipsychotics.

A test dose of oral antipsychotic may be necessary before starting LAI preparation to avoid unexpected side effects. It is important to make sure that the intended changeover is completed appropriately. For example, it is necessary to continue oral antipsychotic for at least three weeks while starting risperidone LAI; while paliperidone and olanzapine LAIs, which have particular starting schedules, may not require the addition of an oral antipsychotic.

- **Paliperidone** is also available as a three-monthly injection, but stabilisation on the once-monthly is required before going onto three monthly.
- **Aripiprazole** is also available in depot/LAI form. It is usually given every four weeks and oral antipsychotic medication should be continued for two weeks after the first injection.

In rare instances, olanzapine depot/LAI can cause severe sedation, dizziness, weakness, altered speech, and increased blood pressure after the injection, so it is important to monitor for these effects for the two to three hours after each dose.

Typical or first generation antipsychotics

- Flupenthixol decanoate (Fluanxol Depot)
- Fluphenazine decanoate (Modecate)
- Haloperidol decanoate (Haldol)
- Zuclopenthixol decanoate (Clopixol Depot)

Atypical or second generation antipsychotics

- Aripiprazole extended release injection (Abilify maintena)
- Olanzapine pamoate (Relprevv)
- Paliperidone palmitate (Invega-sustenna)
- Paliperidone 3-monthly (Invega-trinza)
- Risperidone microsphere (Risperdal-consta)

ANTIPSYCHOTIC MEDICATION

It may take two to four months for depot/LAI to achieve the desired effects, so it is important to review and adjust the dose carefully.

Things to be aware of when taking antipsychotic medications

- Avoid exposure to extreme heat and humidity, since antipsychotics may affect your body's ability to regulate temperature changes and blood pressure.
- Antipsychotics may increase the effects of alcohol, making you more sleepy, dizzy, and lightheaded.
- Antipsychotics can impair the mental and physical abilities required for driving a car or operating machinery. Avoid these activities if you feel drowsy or slowed down.
- Do not break or crush the medication unless you have been advised to do so by your doctor or pharmacist.
- Antacids interfere with absorption of these drugs in your stomach and therefore may decrease their effect. To avoid this, take the antacid at least two hours before or one hour after taking your antipsychotic.
- Excessive use of caffeinated beverages (coffee, tea, colas, etc.) can cause anxiety, agitation and restlessness, and counteract some of the beneficial effects of your medication.
- Cigarette smoking can change the amount of antipsychotic that remains in your bloodstream, ***especially clozapine, olanzapine, and haloperidol***. Inform your doctor if you make any changes to your current smoking habit.
- Do not stop antipsychotic medication suddenly as this may result in withdrawal symptoms such as nausea, dizziness, sweating, headache, sleeping problems, agitation and tremor, and also result in the return of psychotic symptoms.
- There are differences in effectiveness and side effects between various antipsychotics. If possible, the antipsychotic with the lowest risk of side effects should be selected.
- It is essential to take **ZIPRASIDONE** and **LURASIDONE** with food or immediately after food to enhance the availability of these medications in your blood.
- **ASENAPINE**: if you are taking other medications, asenapine should be taken last. The wafer must be placed under the tongue and allow to dissolve completely. **DO NOT EAT OR DRINK FOR 10 MINUTES**, because eating or drinking during this time will affect how well asenapine works.

CLOZAPINE

What is clozapine?
Clozapine belongs to a group of medicines known as antipsychotics. These medicines are used mainly in the treatment of schizophrenia.

What is clozapine used to treat?
Clozapine is used to control symptoms of schizophrenia such as hallucinations, hearing voices and delusionary ideas. It is used in patients with schizophrenia for whom other antipsychotics have not worked or have caused severe side effects.

How does clozapine work?
Clozapine works by helping the brain to balance dopamine levels (a neurotransmitter in the brain which enhances feelings of pleasure), serotonin (a neurotransmitter that promotes feelings of wellbeing and happiness), and the noradrenergic system (which plays an important role in managing the body's response to stress and stimuli).[i]
It helps to relieve symptoms of schizophrenia such as hallucinations, delusions, and dementia. Clozapine has also been shown to reduce suicidal behaviour and limit substance abuse.[ii]

How long does clozapine take to work?
When taken regularly, clozapine begins to relieve agitation within the first week. Many people see substantial improvement by the fourth to sixth week of treatment.

Does clozapine have any side effects?

Common side effects of Clozapine

Tiredness & drowsiness (sedation) may be troublesome	Giving most of the dose at night may help, or a dose change may be required. Contact your doctor if symptoms persist.
Weight gain	Monitor your food intake. Maintain a healthy diet and try to avoid foods with high fat content. Establish a regular exercise regime. Let your doctor know if you notice a rapid increase in your weight or waist measurement.

CLOZAPINE

Common side effects of Clozapine continued...

High temperature can occur in the first couple of weeks of treatment. Sore throat, mouth ulcers, any 'flu-like' symptoms such as swollen glands or other signs of infection.	High temperature usually goes away. Nevertheless, contact your doctor to make sure there are not other causes, such as an infection, especially when the fever continues and you also have other symptoms too.
A fast heartbeat even when you are resting is common in the first few weeks of treatment.	It usually goes away. Contact your doctor if it persists or if you experience chest pain or breathlessness at the same time.
Loss of bladder control, especially at night (bed wetting) can occur at any time during treatment.	Changing the night dose of clozapine or limiting fluid intake before bedtime can be helpful. Contact your doctor if symptoms continue.
Dizziness, light-headedness or fainting on standing.	Get up from a lying or sitting position slowly; dangle your legs over the edge of the bed for a few minutes before getting up. If dizziness persists or if you feel faint, then contact your doctor.
Increased saliva production may be bothersome at night.	Contact your doctor, as there are medications that can reduce / overcome this problem.

CLOZAPINE

Common side effects of Clozapine continued...

Constipation can be a persistent problem.	Contact your doctor, as there are medications that can reduce / overcome this problem.
Nausea and vomiting can occur in the first week of treatment.	If this happens, contact your doctor, as an anti-nauseant medication may be required.

Rare side effects of Clozapine

Agranulocytosis is a blood condition where the number of white blood cells may be reduced. This is important because these white blood cells are needed to fight infection.	There is no way of knowing who is at risk of developing agranulocytosis. However, with regular blood tests it can be detected early. If clozapine is stopped as soon as possible, the white blood cell numbers should return to normal. In some patients, addition of lithium (one to two tablets) may help to restore the white cell and neutrophil numbers to normal.
A fast heartbeat even when you are resting is common in the first few weeks of treatment.	If you develop a fast or irregular heartbeat that is present even when you are resting, together with rapid breathing, shortness of breath, chest pain, or dizziness or light-headedness, contact your doctor immediately or go to the Emergency Department at your nearest hospital. You may need to be referred to a cardiologist.
Seizures or fits can occur at any stage in treatment and are often related to the dose or dose increase.	Contact your doctor immediately or go to the Emergency Department at your nearest hospital when seizures occur. Your clozapine dose may need to be reduced or you may need medication to control the seizures.

CLOZAPINE

Rare side effects of Clozapine continued...

Diabetes, where blood sugar levels are high.

Contact your doctor immediately if you experience any signs of loss of blood sugar control such as excessive thirst, dry mouth and skin, flushing, loss of appetite, or passing large amounts of urine.

What if I miss a dose?
If you miss a dose, take it as soon as possible, as long as it is only a few hours after the usual time. Otherwise, wait until the next dose is due and take it as normal – do not try to catch up by doubling the dose. ***If you have missed taking clozapine for more than two days, you must contact your doctor immediately*** - do not start taking your regular clozapine dose again without consulting your doctor.

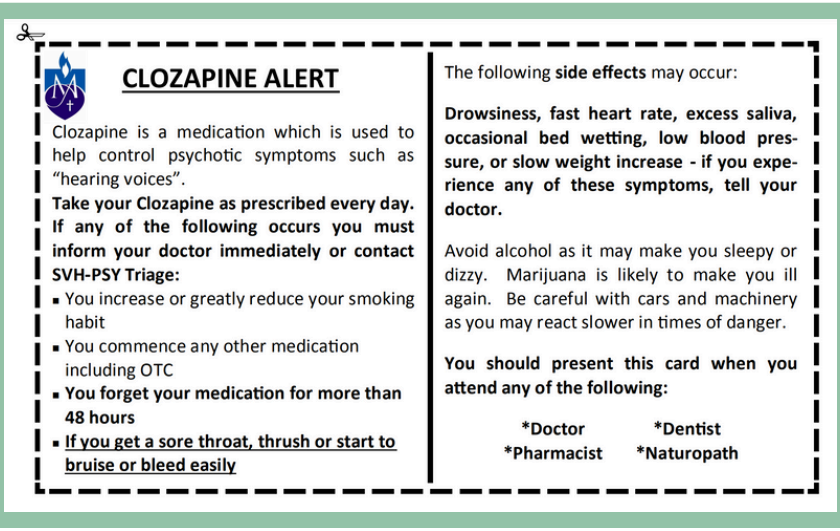
Why is it so important to keep taking clozapine?
It is important to keep taking your clozapine even if you feel well, as it is used not only to get you well, but also to keep you well. This is similar to someone with diabetes requiring lifelong insulin. Clozapine should never be stopped suddenly unless your doctor tells you to.

Does clozapine need monitoring?
You must have strict and regular blood tests while taking clozapine due to the rare potential problems for your blood cells. After starting on clozapine, you must have a blood test at least once a week for the first 18 weeks of treatment, thereafter at least every four weeks for as long as you are taking clozapine, and for one month after stopping the medicine.

What happens if I have taken too much?
Immediately contact your doctor or the Poisons Information Centre (Tel: 13 11 26) for advice, or go to your local Emergency Department. Do this even if there are no signs of discomfort or poisoning, as you may need urgent medical attention.

Does clozapine interact with any other medications?
Clozapine can change the effect of other medications, or it may be affected by other medication. Always check with your doctor or pharmacist before taking other drugs, vitamins, minerals, herbal supplements and alcohol. Cigarette smoking can also change the amount of clozapine that remains in your bloodstream; inform your doctor if you make any changes to your current smoking habit.

CLOZAPINE



CLOZAPINE ALERT

Clozapine is a medication which is used to help control psychotic symptoms such as "hearing voices".

Take your Clozapine as prescribed every day. If any of the following occurs you must inform your doctor immediately or contact SVH-PSY Triage:

- You increase or greatly reduce your smoking habit
- You commence any other medication including OTC
- **You forget your medication for more than 48 hours**
- **If you get a sore throat, thrush or start to bruise or bleed easily**

The following **side effects** may occur:

Drowsiness, fast heart rate, excess saliva, occasional bed wetting, low blood pressure, or slow weight increase - if you experience any of these symptoms, tell your doctor.

Avoid alcohol as it may make you sleepy or dizzy. Marijuana is likely to make you ill again. Be careful with cars and machinery as you may react slower in times of danger.

You should present this card when you attend any of the following:

***Doctor** ***Dentist**
***Pharmacist** ***Naturopath**

Things to be aware of when taking clozapine.

- Clozapine should **never be stopped suddenly** unless your doctor tells you to.
- If you stop clozapine abruptly, you can experience 'cholinergic rebound' such as excessive sweating, headache, nausea, vomiting and diarrhoea and a relapse of symptoms of psychosis.
- Tell your doctor or pharmacist as soon as possible if you do not feel well while you are taking clozapine.
- Clozapine may increase the effects of alcohol, making you more sleepy, dizzy, and lightheaded.
- Clozapine can impair the mental and physical abilities required for driving a car or operating machinery. Avoid these activities if you feel drowsy or slowed down.
- Excessive use of caffeinated beverages (coffee, tea, colas, etc.) can cause anxiety, agitation and restlessness, and can also increase clozapine plasma levels significantly.

References

[i] Khokhar JY, Henricks AM, Sullivan EDK, Green AI. Unique Effects of Clozapine: A Pharmacological Perspective. Adv Pharmacol. 2018;82:137-162. doi:10.1016/bs.apha.2017.09.009

[ii] Khan AH, Zaidi S. Clozapine: Improvement of Negative Symptoms of Schizophrenia. Cureus. 2017;9(12):e1973. Published 2017 Dec 20. doi:10.7759/cureus.1973

MOOD STABILISERS

What are mood stabilisers?
Mood stabilisers are a type of medications used in the management and treatment of bipolar disorder.

What are mood stabilisers used to treat?
Mood stabilisers are used to reduce the severity of mood swings in bipolar disorder. They are also used to prevent recurrence of bipolar episodes. These medicines are a diverse group of drugs that include lithium. They also contain sodium valproate, carbamazepine, and lamotrigine, which are anticonvulsants that can help control seizures.

Mood stabilisers are used to keep your mood level and help prevent swings to higher or lower extremes.

How do mood stabilisers work?
It is not clear exactly how mood stabilisers work to control episodes of mania or depression, although there is some evidence that suggests ways in which the different groups might work. For example, it's thought that lithium targets specific enzymes inside cells within the body, while carbamazepine is believed to help control seizures by blocking certain pathways in the brain, which prevents seizure-causing neurons from travelling. [i]

The dose of mood stabilisers is different for every patient and is based on the amount of drug in the blood as well as the response to treatment. Control of manic symptoms or stabilisation of mood may require up to 14 days of treatment.

How long do mood stabilisers take to work?
Mood stabilising medications sometimes take a while to become effective, therefore it is important to continue to take the medication as prescribed and have regular appointments with your doctors so they can check your progress.

MOOD STABILISERS

Do mood stabilisers have any side effects?
All medicines can have side effects – even the ones you can buy without a prescription at a pharmacy, supermarket, or health food store. The important things to remember are that not everyone experiences side effects and they usually occur early in the treatment. Many of them will settle down after a few weeks, when the body has adapted to the medications

Common side effects of Mood Stabilisers

Lithium: Increase thirst, frequent urination, nausea, vomiting and diarrhoea, metallic taste, fatigue, difficulty concentrating, fine muscle tremor, weakness, dry skin, worsening of acne or psoriasis.	*These problems usually reduce with time. Discuss with your doctor.*
Valproate: Nausea, indigestion, weight gain, sedation, trembling hands, transient hair loss.	*Discuss with your doctor if these problems become bothersome as this may require an adjustment in your dosage.*
Carbamazepine: Unsteadiness or ataxia, drowsiness, dry mouth, blurred vision, headache, ringing in the ears.	*Discuss with your doctor. Sour candy and sugarless gums help increase saliva in your mouth. Reading under a bright light or at a distance may help with blurred vision.*
Lamotrigine: Headache, drowsiness, tremors, ataxia, blurred vision, constipation, dizziness, double vision or diplopia, dry mouth.	*Mostly these are short-lived but if if they persist, discuss with your doctor*

MOOD STABILISERS

Rare side effects of Mood Stabilisers

Lithium:

- Loss of balance, slurred speech
- Visual disturbances (e.g. double vision)
- Severe nausea
- Vomiting
- Persistent diarrhoea
- Marked trembling (shaking that interferes with holding a cup)
- Frequently muscle twitching
- Abnormal general weakness or drowsiness.

Stop taking lithium immediately and contact your doctor at once, as they may be result of lithium toxicity.

Anticonvulsants

Valproate, Carbamazepine:

- Fever, unusual tiredness or weakness, severe nausea, vomiting or drowsiness.
- Confusion or change in vision, irritability restlessness or agitation.
- Unusual bruising or bleeding.
- Yellowing of the skin or eyes, darkening of urine, particularly with valproate.

Lamotrigine:
Serious skin rash.

If you experience any of these symptoms stop taking the anticonvulsant and contact your doctor *immediately*.

What if I miss a dose?
If you miss a dose, take it as soon as possible, as long as it's only a few hours after the usual time. Otherwise, wait until the next dose is due and take it as normal – do not try to catch up by doubling the dose.

Why is it so important to keep taking mood stabilisers?
Many people with bipolar disorder experience frequent episodes of mania and depression. Following the first episode of mania, it is recommended that mood stabilisers be continued for one year. For individuals who have several episodes of mania or depression, mood stabilisers should be continued indefinitely.

MOOD STABILISERS

It is important to continue taking mood stabilisers, as prescribed by your doctor, even beyond the time you begin to feel better. If treatment stops too early, there is a high risk manic or depressive episodes will return.

Do mood stabilisers need monitoring?

Many mood stabilisers require blood tests to ensure that the amount of medication is in the right range for you and is effective. On the morning of your mood stabiliser blood test, take the morning dose after the test to avoid inaccurate results. Your doctor should also monitor blood, kidney function, thyroid, and liver function where appropriate.

Things to be aware of when taking mood stabilisers.

- Do not stop your mood stabilisers suddenly as this may result in withdrawal symptoms, such as anxiety, irritability, and emotional liability (rapid and intense changes in mood).
- Mood stabilisers may impair the mental and physical abilities and reaction time required for driving a car or operating other machinery. Avoid these activities if you feel drowsy and slowed down.
- If you are on a mood stabiliser and you plan to become pregnant, or are pregnant, you should contact your doctor as soon as possible for advice regarding your medication.

MOOD STABILISERS

Things to be aware of when taking these mood stabilisers:

Lithium:

- It is important to drink 8-12 cups of fluids daily, especially during hot weather and during activities that cause you to sweat heavily; and do not change your salt intake during your treatment with lithium.
- Also avoid the use of non-steroidal anti-inflammatory drugs (e.g. ibuprofen and naproxen) as they can affect the amount of lithium in a person's blood and this may result in toxicity - paracetamol is a safer alternative.
- Avoid consuming large amounts of electrolyte supplements containing sodium (e.g. UralÒ and CitravescentÒ for urinary tract infection), as they may reduce the effectiveness of lithium.

Valproate:
Avoid the use of high dose (greater than 300mg per day) aspirin or any products containing aspirin if you are taking sodium valproate, as it can affect the level of this drug found in the blood. Paracetamol is a safer alternative.

Carbamazepine:
Avoid drinking grapefruit juice while on carbamazepine as it can affect the level of carbamazepine in your body.

Lamotrigine:
Rarely, lamotrigine can cause a rash serious enough to result in a medical emergency. However, the risk of this potential serious side effect can be reduced by starting with a low dose and then increasing the dose slowly.

References
[i] Gould TD, Chen G, Manji HK. Mood stabilizer psychopharmacology. Clin Neurosci Res. 2002;2(3-4):193-212. doi:10.1016/S1566-2772(02)00044-0