## <u>Unit VIII – Problem 11 – Pharmacology: Summary of Antidepressant Drugs</u>

## - Monoamine reuptake inhibitors:

- Non-selective (which means that they can inhibit the reuptake of NE, dopamine or serotonin):
  - ✓ Tricyclic (considered to be  $1^{st}$  generation):
    - Amitriptyline: it is used to treat neuralgia.
    - Imipramine: used to treat nocturnal enuresis
      - ADR of tricyclics (3 C's): convulsions, coma and cardiotoxicity.
  - ✓ <u>Heterocyclic:</u>
    - 2<sup>nd</sup> generation (Bupropion): which is used for smoking cessation. As an adverse effect, it lowers the seizure threshold so it is contraindicated in patients with epilepsy.
    - ✤ 3<sup>rd</sup> generation (Mitrazapine): it is used to treat a patient who presents with (depression + anorexia) or (depression + insomnia).

## • Selective Serotonin Reuptake Inhibitors (SSRIs):

- ✓ <u>Example</u>: fluoxetine.
- ✓ Adverse effects of SSRIs:
  - They cause sexual dysfunction (but notice that they have a benefit in treating patients with premature ejaculation).
  - Severe anxiety at the beginning of treatment which will disappear later.
  - Suicide risk especially when used with children and adolescents.
  - ✤ Weight loss.
  - ✤ Inhibition of CYP<sub>450</sub> so causing a lot of drug-drug interactions.
  - Notice that all SSRIs belong to category-C except peroxetin which belongs to category-D.
- ✓ <u>Augmentation stratigies with SSRIs:</u>
  - \* Lamotrigine.
  - ✤ Lithium.
  - Bupropion.
  - ✤ Thyroxine.
- Selectine Norepinephrine Reuptake Inhibitors (SNRIs):
  - $\checkmark$  <u>Example</u>: duloxetine (which is used for urinary stress incontinence).
- Monoamine oxidase inhibitors (MAOIs):
  - Non-selective (inhibiting both MAO-A which is degrading serotonin and NE and MAO-B which is degrading dopamine):
    - ✓ <u>Example</u>: phenelzine.
  - Selective (reversible inhibition of MAO-A):
    - ✓ <u>Example</u>: moclobemide

Adverse effects of monoamine oxidase inhibitors (MAOIs):

- ✓ When combined with food rich in tyramine  $\rightarrow$  it leads to severe hypertension crisis.
- ✓ When combined with tricyclic antidepressants or SSRIs overdose  $\rightarrow$  serotonine syndrome (which is characterized by: hypethermia, hyperreflexia, shivering, penile erection, seizure and coma).
- ✓ Notice that MAOIs are not given with pethidine.
- Treatment of mania (with mood stabilizers):
  - Lithium: adverse effects include cardiotoxicity, hypothyroidism, diabetes insepidus, teratogenic and it has a low therapeutic index.
  - Olanzepine.
  - Respiridone.
  - Carabmazepine.