

**Antidepressant  
Withdrawal Reactions  
Psychological, Cognitive  
and Physical**

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## **Antidepressant Withdrawal Reactions**

Antidepressant withdrawal reactions<sup>1</sup> or discontinuation symptoms which are sometimes referred to as discontinuation syndrome, are similar to antidepressant adverse reactions; this is due to neurotransmitter disruption incurred in both situations.<sup>2</sup>

Besides the many research papers depicting antidepressant withdrawal signs and symptoms there is also a wealth of personal accounts of the difficulties in withdrawal from antidepressants,<sup>3</sup> which for some people takes great determination.<sup>4</sup>

## Antidepressant Withdrawal Reactions

It is important to be aware of the potential adverse reactions to antidepressant discontinuation<sup>5,6</sup> as symptoms “can occur whenever antidepressants are used, i.e. they are not dependent on the presence of any underlying psychiatric disorder.”<sup>7</sup>

Symptoms of antidepressant discontinuation include physical and psychological changes and may be mistaken for physical illness or psychological relapse into depression and suicidal ideation.<sup>5,6,8</sup> By identifying these symptoms as discontinuation correctly, costly tests and treatment for potential mistaken diagnosis could be avoided.<sup>6</sup>

## Antidepressant Withdrawal Reactions

Discontinuation symptoms are determined by individual genetic characteristics as these affect the breakdown of antidepressants,<sup>7</sup> with Poor Metabolisers experiencing greater difficulties in withdrawal.<sup>4</sup>

Genetic characteristics i.e. to determine Poor Metaboliser status, can be determined by a genotyping test.

Discontinuation symptoms typically start when 90% or more of the drug has left the body system.<sup>9</sup> and are more likely to occur at the start of a drug, change in dosage, tapering and on discontinuation or withdrawal.<sup>1, 2, 4, 10-13.</sup>

The physical and psychological withdrawal reactions<sup>10</sup> indicate antidepressants do cause dependency. The habit forming potential of Seroxat was acknowledged in June 2003, 8 months after the BBC Panorama programme “Secrets of Seroxat”<sup>11</sup> when wording was removed from the Patient Information Leaflet that previously denied the habit forming potential of Seroxat.

## Antidepressant 'Half-life'

Discontinuation Syndrome is more likely to occur following a long duration of antidepressant use and antidepressants with a short half-life<sup>13</sup> of less than 24 hours are more hazardous compared to those with a long 'half-life'.<sup>14</sup>

This is due to the inability of the brain to adjust to the erratic biochemical imbalances caused by the fluctuating drug blood levels every day and results in impaired functioning,<sup>14</sup> unstable moods, irritability and aggression.

Antidepressants with a longer  $\frac{1}{2}$  life such as Prozac (4-6 days) and Citalopram (36 hours) may be easier to stop initially, as withdrawal reactions may not start until as much as 25 days later as in the case of Prozac or a week later with Citalopram.<sup>9</sup>

## Examples of Antidepressants with a Short Half-life

The half-life of a drug is the amount of time it takes for half of the drug dose to leave the body.

<b>Drug</b>	<b>Half-life</b>	<b>Drug</b>	<b>Half-life</b>
<b>SSRIs</b>		<b>Tricyclics</b>	
Fluvoxamine/Luvox	13-15 hours	Amitryptilene	9-25 hours
Seroxat/Paroxetine/Paxil	15-21 hours	Amoxapine	8-30 hours
<b>SNRIs</b>		Clomipramine	21 hours
Duloxetine/Cymbalta	8-17 hours	Desipramine	14-25 hours
Venlafaxine/Effexor	3-13 hours	Doxipin	11-23
Mirtazapine	20-40 hours	Imipramine/Tofranil	10-16 hours
Pristique/desvenlafaxine	12 hours	Lofepramine	5 hours
<b>Other</b>		Nortryptilene	16-38 hours
Bupropion/Wellbutrin/Zyban	12-30 hours	<b>MAOIs</b>	
Trazodone	7.1 hours	Moclobemide	2-4 hours
		Nardil/Phenlezine	1.2 hours

**Refs: 4, 9, 13.**

## Antidepressant Withdrawal

The pharmaceutical industry promoted the myth of chronic depressive disease in relation with the negative psychological and cognitive effects experienced following antidepressant discontinuation.<sup>15</sup>

Antidepressant withdrawal/discontinuation effects are different from a relapse or recurrence<sup>10</sup> and are not to be erroneously mistaken for the return of 'depression'.

**NEVER** stop taking antidepressants suddenly.



## NICE Guidelines and Improving Access to Psychological Therapies

Neither UK NICE Guidelines<sup>16</sup> or IAPT<sup>17</sup>:

- Provide information about withdrawal/discontinuation symptoms from antidepressants.
- Give information on how to stop taking antidepressants.

It is as though these ‘professional’ sources disown responsibility in acknowledgement of antidepressant withdrawal difficulties.

## SSRI and SNRI Antidepressant Psychological Withdrawal Reactions

Serotonin Selective Reuptake Inhibitors (SSRIs) and Serotonin & Norepinephrine Reuptake Inhibitors (SNRIs) have similar actions.

### SSRIs:

- citalopram/escitalopram
- prozac/fluoxetine
- seroxat/paroxetine
- sertraline/lustral
- fluvoxamine/faverin

### SNRIs:

- venlafaxine/effexor
- agomelatine/valdoxan
- reboxetine/edronax
- duloxetine/cymbalta

### Affective

Mood swings/Unstable Moods  
 Hypomania  
 Hyperarousal  
 Anxiety/Agitation  
 Impulsive behaviour  
 Aggression/irritability  
 Crying spells  
 Lowered mood/Depression

### Cognitive

Slowed thinking  
 Confusion/Memory problems  
 Decreased concentration  
 Suicidal thoughts and actions  
 Homicidal thoughts

### Sleep

Disturbed sleep, Insomnia  
 Vivid dreams and nightmares

### Psychosis

Change in personality  
 Uncharacteristic feelings of violence.  
 Disorientation  
 Mania, Hallucinations  
 Depersonalisation – feelings of unreality and detachment from surroundings

Refs: 3, 4, 12-14, 18-26.

## SSRI & SNRI Antidepressant Physical Withdrawal Reactions

Serotonin Selective Reuptake Inhibitors (SSRIs) and Serotonin & Norepinephrine Reuptake Inhibitors (SNRIs) have similar actions.

<p><b>SSRIs:</b></p> <ul style="list-style-type: none"> <li>• citalopram/escitalopram</li> <li>• prozac/fluoxetine</li> <li>• seroxat/paroxetine</li> <li>• sertraline/lustral</li> <li>• fluvoxamine/faverin</li> </ul>	<p><b>SNRIs:</b></p> <ul style="list-style-type: none"> <li>• venlafaxine/effexor</li> <li>• agomelatine/valdoxan</li> <li>• reboxetine/edronax</li> <li>• duloxetine/cymbalta</li> </ul>	
<p><b>General</b>          Flu like Symptoms – Chills          Myalgia          Sweating          Headaches          Fatigue, Lethargy, Drowsiness</p> <p><b>Gastrointestinal</b>          Nausea and Vomiting          Abdominal cramps and pain          Diarrhoea, Flatulence          Loss of appetite</p>	<p><b>Movement Disorders</b>          Extreme restlessness -          Akathisia          Muscle spasms          Tremor          Parkinsonism</p> <p><b>Loss of Balance</b>          Dizziness, Vertigo          Light Headedness          Ataxia          In-coordination</p>	<p><b>Sensory Disturbances</b>          Numbness          Pins and needles, tingling          Electric shock sensations          ‘Head zaps’          Disturbed Temperature          Burning sensations          Blurred vision          Tinnitus</p> <p><b>Cardiac</b>          Tachycardia</p>

Refs: 3, 4, 12-14, 18-20, 24-27.

## Tricyclic Antidepressant Psychological Withdrawal Reactions

### Tricyclic – (TCA):

- imipramine
- cloimipramine/anafranil
- amitriptyline
- dosulipin/prothiaden
- doxepin/sinepin
- lofepramine
- nortriptyline/allegron
- trazodone/molipaxin
- trimipramine/surmontil
- manserin

### Affective

Hypomania  
 Mood changes  
 Hyperarousal/Hyperactivity  
 Restlessness/irritability  
 Agitation/Aggression/Hostility  
 Excessive anxiety  
 Panic attacks

### Affective

Apathy  
 Social withdrawal  
 Depressed low mood

### Cognitive

Memory problems  
 Poor judgement  
 Reckless behaviour

### Psychosis

Mania  
 Psychosis/hallucinations  
 Depersonalisation  
 Disorientation  
 Delirium/Confusion

### Sleep

Insomnia, Nightmares

Refs: 3, 4, 13, 18-22, 28.

## Tricyclic Antidepressant Physical Withdrawal Reactions

### Tricyclic – (TCA):

- imipramine
- cloimipramine/anafranil
- amitriptyline
- dosulipin/prothiaden
- doxepin/sinepin
- lofepramine
- nortriptyline/allegron
- trazodone/molipaxin
- trimipramine/surmontil
- manserin

### General

Flu like symptoms-  
Hot and cold sweats  
Increased libido  
Headaches  
Lethargy

### Cardiac Disorders

Arrhythmias  
Fast or irregular heartbeat  
Low blood pressure

### Movement Disorders

Dyskinesias  
Extreme Restlessness-Akathisia  
Muscle spasms - Dystonias  
Slow rigid movement  
Parkinsonism and Tremor

### Balance Problems

Unsteadiness  
Ataxia

### Gastrointestinal

Nausea, Vomiting  
Abdominal cramps, pain  
Stomach Ache  
Bowel discomfort  
Diarrhoea  
Loss of appetite  
Dry mouth/drooling

### Sensory Disturbances

Goosebumps

Refs: 4, 13, 18-20, 28.

## MAOI Antidepressant Psychological Withdrawal Reactions

### Monoamine Oxidase Inhibitors (MAOI):

- moclobemide
- phenelzine/nardil
- tranylcypromine
- isocarboxazid

**N.B. MAOIs can cause a dangerous reaction to certain foods & drinks**

#### **Affective**

Mood changes  
 Low Mood  
 Hyperarousal  
 Anxiety/Agitation  
 Aggression /irritability  
 Pressured speech –  
 Unusual talkativeness

#### **Cognitive**

Confusion  
 Cognitive impairment

#### **Sleep**

Insomnia  
 Nightmares

#### **Psychosis**

Mania  
 Catatonic states  
 Delirium  
 Delusions  
 Hallucinations  
 Paranoia

**Refs: 4, 13, 18-22.**

## MAOI Antidepressant Physical Withdrawal Symptoms

### Monoamine Oxidase Inhibitors (MAOI):

- moclobemide
- phenelzine/nardil
- tranylcypromine
- isocarboxazid

**N.B. MAOIs can cause a dangerous reaction to certain foods & drinks**

#### General

Headaches  
Shivering

#### Movement Disorders

Myoclonic jerks  
Muscle weakness

#### Loss of Balance

Postural Hypotension –  
Low Blood Pressure on  
standing

#### Sensory Disturbance

Tingling  
Burning sensations

Refs: 4, 13, 18-20.

## **Withdrawal Information Websites**

**“COMING OFF.COM”**

<http://www.comingoff.com/>

**“The ICARUS PROJECT. Harm Reduction Guide To Coming Off  
Psychiatric Drugs & Withdrawal”**

<http://www.theicarusproject.net/downloads/ComingOffPsychDrugsHarmReductGuide2Edonline.pdf>

**MIND “Making sense of coming off psychiatric drugs”**

[http://www.mind.org.uk/help/medical\\_and\\_alternative\\_care/making\\_sense\\_of\\_coming\\_off\\_psychiatric\\_drugs](http://www.mind.org.uk/help/medical_and_alternative_care/making_sense_of_coming_off_psychiatric_drugs)

**The Road Back Programme**

<http://theroadback.org/>



## Books and DVD about Withdrawal

***Your Drug May Be Your Problem: How and Why to Stop Taking Psychiatric Medications.*** by Peter Breggin M.D. and David Cohen Ph.D.

Paperback 2007 updated edition by Perseus Books.

The first book to expose the shortcomings of psychiatric drugs and to guide patients and doctors through the process of withdrawing from them.

[http://www.breggin.com/index.php?option=com\\_content&task=view&id=17&Itemid=49](http://www.breggin.com/index.php?option=com_content&task=view&id=17&Itemid=49)

***Psychiatric Drug Withdrawal. A Guide for Prescribers, Therapists, Patients and their Families.*** by Peter Breggin, M.D.

Springer Publishing Co. 2013

[http://breggin.com/index.php?option=com\\_content&task=view&id=296&Itemid=129](http://breggin.com/index.php?option=com_content&task=view&id=296&Itemid=129)

***Coming off Psychiatric Drugs: Successful Withdrawal from Neuroleptics, Antidepressants, Lithium, Carbamazepine and Tranquilizers.*** Prefaces by Judi

Chamberlin, Pirkko Lahti, Loren R. Mosher and Peter Lehmann

Peter Lehmann Publishing 2004

<http://www.antipsychiatrieverlag.de/foreign/books1/withdraw.htm>

***Advice on Medication*** by Thomas, P. and May, R., 2003, Hearing Voices Network, Manchester. <http://www.hearing-voices.org/resources/>

***The Antidepressant Solution: A Step-by-Step Guide to Safely Overcoming Antidepressant Withdrawal, Dependence, and "Addiction"*** by Joseph Glenmullen, M.D., (Free Press, 2006).

[http://books.google.co.uk/books/about/The\\_antidepressant\\_solution.html?id=6tDzDD8S64YC&redir\\_esc=y](http://books.google.co.uk/books/about/The_antidepressant_solution.html?id=6tDzDD8S64YC&redir_esc=y)

***Halting SSRIs*** by David Healy (Withdrawal Protocol)

<http://www.seroxatusergroup.org.uk/David%20Healy%20Withdrawal%20Protocol%202009.pdf>

***“Take These Broken Wings: Recovery from schizophrenia without medication.”*** A documentary by Daniel Mackler with Joanne Greenberg, Peter Breggin, Robert Whitaker and Catherine Penney. PCCS Books

<http://www.pccs-books.co.uk/authors/daniel-mackler>

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Source: Joseph Glenmullen, M.D., *The Antidepressant Solution: A Step-by-Step Guide to Safely Overcoming Antidepressant Withdrawal, Dependence, and "Addiction"* (Free Press, 2006).

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**December 2012**