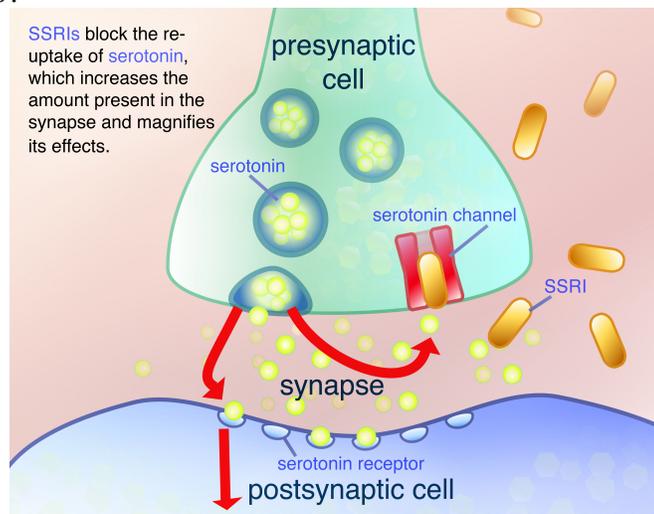


## **SSRI's Fact Sheet: Information for Parents from the office of Dr.Aparna Vuppala Child and Adolescent Psychiatrist**

What are SSRI's ?

**SSRI's** (Selective Serotonin Reuptake Inhibitors) **are FDA approved medications for children 6 years old and above for treatment of OCD (Obsessive compulsive disorder), Depression and other Anxiety disorders.** They have different potencies and side effects due to having different molecular structures and are taken just once a day. SSRI's include **Zoloft** or Sertraline (approved for children >6 yrs for OCD), **Prozac** or Fluoxetine (approved for children >7yrs for OCD and >8yrs for Depression), **Luvox** or Fluvoxamine (approved for children >8yrs for OCD) and **Lexapro** or Escitalopram (approved for children >12 yrs for Depression). The vast majority of research on Celexa and Paxil has been with adults, so they are currently being used on a trial basis with children.

How can these medications help?



Most people will notice a **gradual improvement** in mood and anxiety and will require **at least a few weeks of medication taken every day** to notice significant improvement.

Medication is not the only answer for OCD, Depression and Anxiety. The medication often works best when used together with individual therapy, especially **CBT (Cognitive behavioral therapy)**. Sometimes family therapy and group therapy are indicated as well. CBT is an empirically supported treatment that focuses on patterns of thinking that are maladaptive and the beliefs that underlie such thinking. People who seek CBT can expect their therapist to be active, problem-focused, and goal-directed.

How will the doctor **monitor this medication**?

At every visit, the doctor will enquire about the symptoms of depression and or anxiety and any side effects, from the parent and the child/adolescent, and work with them to achieve remission of symptoms without undue side effects. At times, reports from other adults in the child's life are requested as well.

What side effects can this medication have?

Any medication may have side effects, including allergy to the medication. Because each patient is different, your doctor will work with you to get the most positive effects and the fewest negative effects from the medication. This list may not include rare or unusual side effects, so please talk to the doctor if you suspect that the medicine is causing a problem.

**Common side effects:** these often go away in 1-2 weeks, or if the dose is lowered by the doctor.

Nausea, Headache : *Take meds after breakfast or a meal to avoid these side effects*

Constipation or Diarrhea, Physical restlessness or the need to move legs

Insomnia (trouble sleeping): Zoloft and Prozac need to be taken in the morning and not at night

Drowsiness or tiredness: Luvox and Lexapro preferably should be taken at night

Weight changes occasionally as well as Dry mouth, Excessive sweating, Reduced sex drive

**Serious side effects:** Celexa can cause abnormal heart rhythms at high dosages.

All SSRI's can cause potentially life threatening **Serotonin syndrome** if taken within weeks of taking medications known as MAO inhibitors. These include Nardil, Parnate, Marplan and rarely chemotherapy meds. The symptoms of Serotonin syndrome include confusion, muscle twitching, rigidity, abnormal muscle movements, over-reaction to reflexes, euphoria, sweating, drowsiness, and loss of consciousness and death if not promptly treated.

**FDA Warning:** In 2004, the FDA advisory committee recommended a “black box warning” be placed on all antidepressants. In this instance, the doctor needs to inform you that there is a chance of increased risk of suicidal thoughts and behaviors in youth taking these medications. The FDA committee determined that about 3-4% of adolescents or children with depression who took antidepressants had some type of suicidal behavior (attempt or thoughts), while 1-2% of those taking placebo did. There were no completed suicides in any of these studies, which included over 4000 children. For those with an anxiety disorder, there was no difference in suicidal behavior in those treated with antidepressants as compared to placebo. It is important to note that, in the studies, 9% of adolescents in the general population make a suicide attempt, in addition, another 3-4% had some suicidal behavior secondary to untreated depression.

### **How does this affect your child?**

In most cases these increased risks occur during the first weeks of treatment. If your child has recently started one of these meds, **you and your doctor need to closely monitor him/her for any changes in behavior.** Suicidal thoughts are a symptom of depression which is one of the largest risk factors for suicide. It is difficult to interpret whether these thoughts and behaviors are due to the illness itself or due to meds. In some people the antidepressant has still not been effective early on, so this warrants close monitoring of all patients.

Talk to your child/ adolescent about whether they are having any suicidal thoughts, and let them know they should come to you if they start having such thoughts. You and your doctor can then develop a safety plan for your child. Be on the look out for certain behaviors that appear for the first time, seem worse or worry your child or you. These include new or more thoughts of suicide, new or worse depression, new or worse anxiety, or feeling agitated or restless. **If these appear, the doctor needs to be contacted right away.** It is important to not change the dose or stop the meds without first discussing with the doctor.

### **How long will this medication be needed?**

This will depend on family history of Depression/Anxiety/OCD, co-existing psychiatric disorders and the duration and severity of the symptoms. The doctor will discuss what is right for your child and not taking meds regularly will affect the duration of treatment. **Discontinuation syndrome** can occur if doses are missed or if the medications are stopped suddenly: Headache, nausea, insomnia, anxiety, tremor, irritability, vertigo, difficulty with balance and sensation of electrical discharges in the brain.

### **What else should I know about this medicine?**

You should always **take these medications as prescribed** and never casually share the medication with other people. For most children, adult supervision of medication intake is advised. Note that these medications should not be taken or mixed with alcohol or illicit drugs of abuse.

Sometimes, SSRI's cause an **activation state** that may include increased physical activity, faster thinking, decreased need for sleep, or irritability. Please inform the doctor if this happens.

**Notify your doctor** if your child has or develops any medical conditions such as : low blood pressure, liver disease or hepatitis, seizures, allergic reactions to meds, heart or kidney disease, intestinal disease or pregnancy. If you are having surgery, including dental surgery, tell the doctor or dentist that you are taking this medication.

It is essential to **inform the doctor of all prescribed medications**, herbal or any nutritional **supplements** that your child is taking to avoid any potential drug-drug interactions. It is assumed that the child is not engaging in substance abuse (vaping, drinking alcohol or using marijuana or other substances).