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"The bulk of mental health services for people with depression are provided in primary care settings. Primary care providers prescribe 79 percent of antidepressant medications and see 60 percent of people being treated for depression in the United States, and they do that with little support from specialist services."

Barkil-Oteo A. Collaborative care for depression in primary care: how psychiatry could "troubleshoot" current treatments and practices. Yale J Biol Med. 2013 Jun 13;86(2):139-46. PMID: 23766735; PMCID: PMC3670434.

Goals

- Review basic treatments for anxiety and depression
- Training on picking between first-line treatments
- Troubleshooting for side effect alleviation
- Useful labs to rule out medical causes of symptoms
- Review maintenance labs for medications

Labs to Consider

TSH, T4 – hypothyroidism

CMP – electrolyte abnormalities, liver dysfunction

CBC – anemia

Urine Pregnancy Test

How to Choose?

- Start with something available in generic
- Consider side effects
- Consider dosage range
- Consider long-term risks

SSRIs (Selective Serotonin Reuptake Inhibitors)

- First-line for most anxiety and depressive disorders
- Ex: Prozac, Zoloft, Celexa, Lexapro, Paxil
- Most are well-tolerated
- Do not require any lab monitoring
- Most are safe to continue in pregnancy (exception Paxil)
- Common temporary side effects: nausea, diarrhea, dizziness, headache, increased anxiety, suicidal ideation, mania
- Common long-term side effects: affective flattening, sexual side effects, increased bleeding

Prozac (fluoxetine)

- Starting dose: 20 mg PO qAM
- Max recommended daily dose: 60 mg PO qAM
- Key Side Effect/Feature: Energizing/stimulating, long half-life
- Wide dosage range may be ideal for disorders requiring higher doses like Obsessive Compulsive Disorder or Posttraumatic Stress Disorder
- Cost-effective: available in generic

Zoloft (sertraline)

- Starting dosage: 50 mg PO qday
- Max recommended daily dose: 200 mg PO qday
- Key Side Effect/Feature: GI (nausea and diarrhea), not stimulating (may be sedating)
- Wide dosage range may be ideal for disorders requiring higher doses like Obsessive Compulsive Disorder or Posttraumatic Stress Disorder
- Cost-effective: available in generic

Celexa (Citalopram)

- Starting dosage: 20 mg PO qday
- Max recommended daily dose: 40 mg PO qday
- Key Side Effect/Feature: not stimulating (may be sedating)
- Narrow dosage range
- Cost-Effective: available in generic

Lexapro (escitalopram)

- Starting dosage: 10 mg PO qday
- Max recommended daily dose: 20 mg PO qday
- Key Side Effect/Feature: not stimulating (may be sedating) - thought to have less side effects than Celexa
- Narrow dosage range
- Cost-Effective: available in generic

Paxil (paroxetine)

- Starting dosage: 20 mg PO qday
- Max recommended daily dose: 50 mg PO qday
- Key Side Effect/Feature: sedation, constipation, short half-life
- average dosage range
- Cost-Effective: available in generic
- Not safe in pregnancy

Trintellix (vortioxetine)

- Starting dosage: 5 mg PO qday
- Max recommended daily dose: 20 mg PO qday
- Key Side Effect/Feature: marketed as being free of sexual side effects
- average dosage range
- Not available in generic

SNRIs (Selective Norepinephrine Reuptake Inhibitors)

- Second line for most anxiety and depressive disorders
- Ex: Effexor, Cymbalta
- Generally well-tolerated
- Do not require any lab monitoring
- It would be preferable to switch to an SSRI if pt is pregnant
- Common temporary side effects: nausea, diarrhea, dizziness, headache, increased anxiety, suicidal ideation, mania
- Common long-term side effects: affective flattening, sexual side effects, increased bleeding

Effexor (venlafaxine)

- Starting dosage: 75 mg PO qday (XR formulation available and recommended)
- Max recommended daily dose: 225 mg PO qday
- Key Side Effect/Feature: stimulating, may increase blood pressure, short half-life, may help with chronic pain
- Wide dosage range
- Cost-Effective: available in generic

Cymbalta (Duloxetine)

- Starting dosage: 30 mg PO qday
- Max recommended daily dose: 60 mg PO qday
- Key Side Effect: sedation, short half-life, may help with chronic pain
- Wide dosage range
- Cost-Effective: available in generic

Wellbutrin (bupropion)

- Dopamine/Norepinephrine-Reuptake Inhibitor
- Starting dosage: 75 mg PO qAM
- Max recommended daily dose:
- Key Side Effect/Feature: stimulating, not particularly effective for anxiety, increased risk of seizures
- Wide dosage range
- Cost-Effective: available in generic
- Can be added to SSRIs to alleviate sexual side effects

Buspar (buspirone)

- Antianxiety Medication affinity for 5-HT1A, 5-HT2, D2 receptors
- Starting dosage: 5 mg PO BID (notice twice daily administration)
- Max recommended daily dose: 60 mg daily
- Key Side Effect/Feature: dizziness, no sexual side effects
- Average dosage range
- Cost-Effective: available in generic

Remeron (mirtazapine)

- Antidepressant alpha-2 antagonist
- Starting dosage: 7.5 mg PO qHS
- Max recommended daily dose: 60 mg
 PO qHS
- Key Side Effect/Feature: sedation, weight gain, no sexual side effects
- Wide dosage range
- Cost-Effective: available in generic

PRNs for Anxiety

Hydroxyzine

- 10 mg, 25 mg, 50 mg doses
- Dry mouth, sedation

Propranolol

- 10 mg, 20 mg doses
- Great for performance anxiety
- Need to check BP
- Do not use if history of asthma

Augmenting

Most are second generation antipsychotics

Abilify, Latuda, Rexulti, Seroquel

Risks: weight gain, increased insulin resistance, elevated cholesterol, akathisia, sedation

How to choose between medications?

Look for side effect profiles that might be preferable

Keep it simple (try to keep to one medication if possible)

Look at your target dose

Look at longterm risks Look at medical comorbities

Example: 35 year old woman with a history of depression characterized by severe fatigue, apathy, and excessive sleeping.

- Choose a medication that is stimulating: Prozac, Wellbutrin, Effexor
- Avoid medications that could worsen sedation: Remeron, Cymbalta

Example: 48 year old man with depression with appetite suppression and difficulty sleeping.

Remeron could increase appetite and help with sleep

Example: 22 year old woman with a history of obsessive fear of contamination with compulsive hand washing.

- SSRIs are first-line for OCD
- Choose a medication with a wide dosage range: Prozac, Zoloft

Example: 18 year old man with a history of anxiety who is unwilling to take any medication that might cause sexual side effects.

- Consider medications that are less likely to cause sexual side effects
- BuSpar will need to be taken multiple times a day
- Remeron may cause weight gain and sedation
- Trintellix new reports that this might cause sexual side effects after all
- Hydroxyzine helpful as a PRN

Thank You!

• Questions?