

TABLE 49-1

Nursing Implications for Pharmacology: Antidepressants

AGENTS/DRUGS	ACTION IN BRAIN SYNAPSES AND PURPOSE	NURSING RESPONSIBILITIES	CLIENT TEACHING
<p>Tricyclic and related agents (TCAs)</p> <ul style="list-style-type: none"> ■ Amitriptyline (Elavil) ■ Amoxapine (Ascendin) ■ Clomipramine (Anafranil) ■ Desipramine (Norpramin) ■ Doxepin (Sinequan) ■ Imipramine (Tofranil) ■ Maprotiline (Ludiomil) ■ Nortriptyline (Pamelor) ■ Protriptyline (Vivactil) ■ Trimipramine (Surmontil) 	<p>Block reuptake of serotonin and norepinephrine.</p> <p>Used to treat depression and as an adjunctive treatment for chronic pain.</p>	<p>Assess for side effects (S/Es): sedation, orthostatic hypotension, weight gain, anticholinergic effects, tachycardia or cardiac dysrhythmias.</p> <p>Assess VS, mental status.</p> <p>Notify physician if client has glaucoma.</p> <p>Assess for suicidal thinking; TCAs can be fatal in overdose. Older adults require lower doses. Use with caution in the elderly, who are more likely to have S/Es.</p>	<p>Efficacy takes 2–4 weeks. Make position changes slowly; sit before standing.</p> <p>Do not drink alcohol (causes potentially fatal CNS depression).</p>
<p>Selective serotonin reuptake inhibitors (SSRIs)</p> <ul style="list-style-type: none"> ■ Citalopram (Celexa) ■ Escitalopram (Lexapro) ■ Fluoxetine (Prozac) ■ Fluvoxamine (Luvox) ■ Paroxetine (Paxil) ■ Sertraline (Zoloft) 	<p>Inhibit reuptake of serotonin.</p> <p>Used to treat depression; panic disorder (paroxetine); obsessive compulsive disorder (fluvoxamine, fluoxetine); premenstrual dysphoric disorder, bulimia nervosa (fluoxetine); anxiety (paroxetine); PTSD (sertraline).</p>	<p>Assess for S/Es: nausea, loose stools, sexual side effects (decreased libido), headache, anxiety or sedation, insomnia, slight anticholinergic symptoms, orthostatic hypotension.</p> <p>Assess VS, mental status.</p> <p>Low potential for harm in overdose.</p> <p>Decrease dose in elderly.</p>	<p>Efficacy takes 2–3 weeks, may take 5 weeks to reach peak effect.</p> <p>Avoid alcohol.</p> <p>Notify physician if taking herbal medicines (especially St. John's wort or tryptophan).</p>
<p>Novel antidepressants</p> <ul style="list-style-type: none"> ■ Bupropion (Wellbutrin) ■ Duloxetine (Cymbalta) ■ Mirtazapine (Remeron) ■ Nefazodone (Serzone) 	<p>Inhibit reuptake of norepinephrine, dopamine, and/or serotonin.</p> <p>Used to treat depression, aid to stop smoking (bupropion), in-</p>	<p>Assess for S/Es: anxiety, nausea, agitation or sedation, insomnia, weight loss, increased BP (venlafaxine), seizures (bupropion),</p>	<p>Same as SSRIs.</p>