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Generic Name: amitriptyline (a mee TRIP ti leen)
Brand Names: Vanatrip, Elavil, Endep

REVIEWED

By Chris Tighe at 1:53 pm, May 18, 2016

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What is amitriptyline?

Amitriptyline is a tricyclic antidepressant. Amitriptyline affects chemicals in the brain that may be unbalanced in people with depression.

Amitriptyline is used to treat symptoms of depression.

Amitriptyline may also be used for purposes not listed in this medication guide.

Important information

You should not use this medicine if you have recently had a heart attack.

Do not use amitriptyline if you have used an MAO inhibitor in the past 14 days, such as isocarboxazid, linezolid, methylene blue injection, phenelzine, rasaqiline, seleqiline, or tranylcypromine.

Before taking amitriptyline, tell your doctor if you have used an "SSRI" antidepressant in the past 5 weeks, such as citalopram (Celexa), escitalopram (Lexapro), fluoxetine (Prozac, Sarafem, Symbyax), fluoxamine (Luvox), paroxetine (Paxil), or sertraline (Zoloft).

You may have thoughts about suicide when you first start taking an antidepressant such as amitriptyline, especially if you are younger than 24 years old. Your doctor will need to check you at regular visits for at least the first 12 weeks of treatment.

Report any new or worsening symptoms to your doctor, such as: mood or behavior changes, anxiety, panic attacks, trouble sleeping, or if you feel impulsive, irritable, agitated, hostile, aggressive, restless, hyperactive (mentally or physically), more depressed, or have thoughts about suicide or hurting yourself.

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Before taking this medicine

You should not use this medicine if you are allergic to amitriptyline, or:

· if you have recently had a heart attack.

Do not use amitriptyline if you have used an MAO inhibitor in the past 14 days. A dangerous drug interaction could occur. MAO inhibitors include isocarboxazid, linezolid, methylene blue injection, phenelzine, rasagiline, selegiline, tranylcypromine, and others.

To make sure amitriptyline is safe for you, tell your doctor if you have:

- bipolar disorder (manic-depression) or schizophrenia;
- · a history of mental illness or psychosis;
- liver disease;
- heart disease:
- · a history of heart attack, stroke, or seizures;
- · diabetes (amitriptyline may raise or lower blood sugar);
- glaucoma; or
- problems with urination.

Some young people have thoughts about suicide when first taking an antidepressant. Your doctor should check your progress at regular visits. Your family or other caregivers should also be alert to changes in your mood or symptoms.

It is not known whether amitriptyline will harm an unborn baby. Tell your doctor if you are pregnant or plan to become pregnant while using this medication.

Amitriptyline can pass into breast milk and may harm a nursing baby. You should not breast-feed while you are using amitriptyline.

Amitriptyline is not approved for use by anyone younger than 12 years old.

How should I take amitriptyline?

Take amitriptyline exactly as prescribed by your doctor. Follow all directions on your prescription label. Do not take this medicine in larger or smaller amounts or for longer than recommended.

It may take up to 4 weeks before your symptoms improve. Keep using the medication as directed and tell your doctor if your symptoms do not improve.

If you need surgery, tell the surgeon ahead of time that you are using amitriptyline. You may need to stop using the medicine for a short time

Do not stop using amitriptyline suddenly, or you could have unpleasant withdrawal symptoms. Ask your doctor how to safely stop using amitriptyline

Store at room temperature away from moisture, heat, and light.

Amitriptyline dosing information

Usual Adult Dose for Depression:

Outpatients:

Usual dose: 75 mg orally per day in divided doses; this may be increased to a total of 150 mg per day if needed Alternate dose: 40 to 100 mg orally as a single dose at bedtime; this may be increased by 25 or 50 mg as needed at bedtime to a total of 150 mg per day

Maximum dose: 150 mg orally per day

Inpatients:

Initial dose: 100 mg orally per day

Maintenance dose: 40 to 100 mg orally as a single dose at bedtime

Maximum dose: 300 mg orally per day

Comments

- -Dosage should be reduced to the lowest amount that will maintain relief of symptoms, when satisfactory improvement has been obtained
- -Dose increases should preferably be made in the late afternoon or at bedtime due to the sedative effect.
- -The full therapeutic effect may take as long as 30 days to develop.
- -Maintenance therapy should be continued for 3 months or longer to lessen the possibility of relapse.

Use: Relief of symptoms of depression

Usual Geriatric Dose for Depression:

10 mg orally 3 times a day with 20 mg at bedtime

Comments

- -The full therapeutic effect may take as long as 30 days to develop.
- -Elderly patients should be monitored carefully and serum levels obtained as clinically appropriate
- -Dose adjustments should be made according to clinical response

Use: Relief of symptoms of depression

Usual Pediatric Dose for Depression:

12 years or older:

10 mg orally 3 times a day with 20 mg at bedtime

Use: Relief of symptoms of depression

See also: Dosage Information (in more detail)

What happens if I miss a dose?

Take the missed dose as soon as you remember. Skip the missed dose if it is almost time for your next scheduled dose. Do not take extra medicine to make up the missed dose.

What happens if I overdose?

Seek emergency medical attention or call the Poison Help line at 1-800-222-1222. An overdose of amitriptyline can be fatal.

Overdose symptoms may include uneven heartbeats, extreme drowsiness, confusion, agitation, vomiting, hallucinations,

teeling not or coid, muscle stiffness, seizure (convulsions), or fainting.

What should I avoid while taking amitriptyline?

Do not drink alcohol. Dangerous side effects or death can occur when alcohol is combined with amitriptyline.

This medication may impair your thinking or reactions. Be careful if you drive or do anything that requires you to be alert.

Avoid exposure to sunlight or tanning beds. Amitriptyline can make you sunburn more easily. Wear protective clothing and use sunscreen (SPF 30 or higher) when you are outdoors.

Amitriptyline side effects

Get emergency medical help if you have signs of an allergic reaction to amitriptyline: hives; difficulty breathing; swelling of your face, lips, tongue, or throat.

Report any new or worsening symptoms to your doctor, such as: mood or behavior changes, anxiety, panic attacks, trouble sleeping, or if you feel impulsive, irritable, agitated, hostile, aggressive, restless, hyperactive (mentally or physically), more depressed, or have thoughts about suicide or hurting yourself.

Call your doctor at once if you have:

- · unusual thoughts or behavior;
- · a light-headed feeling, like you might pass out;
- · chest pain or pressure, pain spreading to your jaw or shoulder, nausea, sweating;
- · pounding heartbeats or fluttering in your chest;
- · confusion, hallucinations;
- · a seizure (convulsions);
- · painful or difficult urination;
- severe constipation;
- · easy bruising, unusual bleeding; or
- sudden weakness or ill feeling, fever, chills, sore throat, mouth sores, red or swollen gums, trouble swallowing.

Common amitriptyline side effects may include:

- · constipation, diarrhea;
- · nausea, vomiting, upset stomach;
- · mouth pain, unusual taste, black tongue;
- · appetite or weight changes;
- · urinating less than usual;
- · itching or rash;
- · breast swelling (in men or women); or
- · decreased sex drive, impotence, or difficulty having an orgasm.

This is not a complete list of side effects and others may occur. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

See also: Side effects (in more detail)

What other drugs will affect amitriptyline?

Taking this medicine with other drugs that make you sleepy can worsen this effect. Ask your doctor before taking amitriptyline with a sleeping pill, narcotic pain medicine, muscle relaxer, or medicine for anxiety, depression, or seizures.

Tell your doctor if you have used an "SSRI" antidepressant in the past 5 weeks, such as citalopram, escitalopram, fluoxetine (Prozac), fluvoxamine, paroxetine, sertraline (Zoloft), trazodone, or vilazodone

Tell your doctor about all your current medicines and any you start or stop using, especially:

- · other antidepressants;
- cimetidine:
- · heart rhythm medicine such as flecainide, propafenone, quinidine, and others; or
- · medicine to treat mental illness.

This list is not complete. Other drugs may interact with amitriptyline, including prescription and over-the-counter medicines, vitamins, and herbal products. Not all possible interactions are listed in this medication guide.

Next → Side Effects











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Where can I get more information?

Your pharmacist can provide more information about amitriptyline.

Remember, keep this and all other medicines out of the reach of children, never share your medicines with others, and use amitriptyline only for the indication prescribed.

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DRUG STATUS



Availability Prescription only



Pregnancy Category Risk cannot be ruled out



CSA Schedule



Not a controlled drug



Approval History Drug history at FDA



Drug Class

Tricyclic antidepressants

Related Drugs

Pain

tramadol, oxycodone, acetaminophen, naproxen, Tylenol, aspirin, More...

Insomnia

melatonin, Iorazepam, Ativan, Ambien, zolpidem, diphenhydramine, More...

Anxiety and Stress

citalopram, Prozac, Celexa, fluoxetine, paroxetine, Paxil, More...

Fibromyalgia

prednisone, Cymbalta, Lyrica, duloxetine, Elavil, pregabalin, More...

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Amitriptyline Rating

702 User Reviews

7.8/10

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