

SHARED DECISION MAKING

AID CARDS

ADHD

Joint Partnership Between:



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Purpose of the Cards: To allow a collaborative and meaningful discussion about the risks and benefits of the outcomes of prescribed medications. These cards also allow for prescribers to work with members and having them take ownership in one's healthcare. Allow members to get the treatment they need in the way they want to be treated.

Treatment engagement and health outcomes: ADHD symptoms can be improved by lifestyle changes, self-care practices, psychotherapy, and/or pharmacotherapy. There can be differences in efficacy, safety, cost, and burden to the member.

Three Main Points:

- What are the options?
- What are the pros & cons?
- How likely will you experience these possible outcomes?

What You Should Know

Will this medication work for me or my child?

Stimulant medications improved symptoms in 7 out of 10 children who take them. Non-stimulant medications may be a little less helpful for some people.

What will change?

- It is important that a trusted adult give the medication and watch the individual take it. Many parents find it's easier to give the medication to the child's school staff to give. Ask your doctor about this option.
- Eating breakfast before taking medications may help reduce side effects related to decreased appetite and weight loss.
- If this medicine causes side effects, it is important to let your doctor know.



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Key Talking Points

Before treatment can begin, each individual must have a careful review of his or her medical history, and a physical examination should be conducted. Family and personal cardiac history should also be reviewed. ADHD symptoms should be assessed by a health care professional qualified to evaluate children with ADHD.

Medication is a highly effective way to treat the symptoms, but it only works when it is taken as prescribed.

There is no ADHD medication that will cure this condition.

Up to 90 percent of people with ADHD can improve significantly with a combination of medication and behavioral treatment.

"Don't expect miracles! ADHD medication is effective, but you'll likely need to try a few formulations and dosages before you find one that works for you." (Additude)

* When to Call the Doctor Immediately:

- If you or your child feel faint or dizzy; complains of unusual heartbeats (such as rapid or skipped beats), chest pains, or shortness of breath; becomes agitated; begins having hallucinations; seems depressed; or voices suicidal thoughts
- If you or your child complains of itching, right upper belly pain, or unexplained flu-like symptoms or has dark urine or yellow eyes or skin

*From ADHD parent guide

Things to Remember

Medication is one of the many tools that can help with behaviors of distraction and hyperactivity. Changing some of your lifestyle habits may improve mental health:

- Regular therapy and/or connection with supportive people
- Going to bed early and waking up at the same time every day
- Scheduling activities: “work before play”
- Being active and participating in activities you enjoy
- Limiting screen time

Other symptoms can look like ADHD such as stress, trauma and sleep deprivation.

You and your doctor may decide not to start with medications and try other things, such as therapy, first. Therapy and medication used together works best.

Many people with ADHD also experience periods of anxiety or sadness and depression. It is important to communicate often with your doctor or therapist about how you are feeling.

Key Talking Points:

Individuals who have other mental-health conditions, such as depression and anxiety, were especially helped by having individual and family treatment as part of their treatment plan.

Behavioral treatments work to improve problems with:

- Behavior and learning at school
- Relationships with friends, parents, and siblings
- Following through with request

Monitoring weight and height is primarily the doctor’s responsibility, but it is helpful for parents/individuals to pay attention as well.

Physical exercise has a great impact on decreasing ADHD symptoms.

Physical activity promotes brain growth, improve brain functioning and strengthens learning abilities.






























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Duration/Daily Routine

Short Acting Stimulants		Duration of Action	When to take it?	Method
methlyphnidates	Ritalin®	4-6	Every 4 hours	
	Focalin®	4-6	Every 4 hours	
	Methylphenidate HCL CHEWABLE TABLET	4-6	Every 4 hours	
	Methylin® Solution	4-6	Every 4 hours	
amphetamines	Adderall®	4-6	Every 4 hours	
	Evekeo®	4-6	Every 4 hours	
	Zenzedi®	4-6	Every 4 hours	
	ProCentra®	4-6	Every 4 hours	
Long Acting Stimulants		Duration of Action	When to take it?	Method
methlyphnidates	Ritalin® LA	8-9	.45 minutes before activity	
	Metadate® CD	8-9	.45 minutes before activity	
	Concerta®	10-11	90 minutes before activity	
	Focalin XR®	8-9	.45 minutes before activity	
	Aptensio XR®	11-12	.45 minutes before activity	
	Quillivant XR®	11-12	.45 minutes before activity	
	Quillichew ER®	8	.45 minutes before activity	
amphetamines	Daytrana® (PATCH)*	9+1	2hrs. before activity, lasts 3 hrs. after removal	
	Dexedrine® Spansule	6-8	60 minutes before activity	
	Adderall® XR	8-9	.45 minutes before activity	
	Vyvanse®	10-12	60 minutes before activity	
	Dyanavel® XR	11-12	60 minutes before activity	
	Adzenys® XR-ODT/ER Suspension	11-12	60 minutes before activity	
Long Acting Non-Stimulants Talk With Your Doctor.		Duration of Action	When to take it?	Method
Strattera® (atomoxetine)		24	 Based on FDA-approved drug labeling After 3 weeks of use, should work 24 hrs. a day	
Intuniv® (guanfacine)		24	 Based on FDA-approved drug labeling	
Kapvay® (clonidine ER)		24	 Based on FDA-approved drug labeling	

* This patch takes effect after two (2) hours and lasts up to three (3) hours after removing.
Please dispose of safely after removal.

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Key Talking Points:

Individuals can help doctors find the correct medication and dosage by keeping a medication diary or log to track how well they are doing, what side effects they may be experiencing and when the medication wears off.

Family/teachers can also assist tracking behaviors throughout the day to assess how well the medicine is working.

It is important not to miss doses of any medication. Missing a single dose can leave the individual without the beneficial effects of the medication, and symptoms may return.

Some children may need to take their medication during school hours. Parents and guardians should contact the school principal, nurse, or counselor if their child needs to take medicine while at school. The guardian and/or prescriber may need to complete a ***school medication administration form**.

*Public schools won't administer or store medication without this form.

Stopping Approach

When thinking about stopping any medication it is always important to talk with your doctor first about the reason why you want to stop.

		None	→	More Side Effects	Sick If You Skip
methlyphenidates	Short Acting Stimulants				
	Ritalin®	+	+	+	+
	Focalin®	+	+	+	+
	Methylphenidate HCL CHEWABLE TABLET	+	+	+	+
amphetamines	Methylin® Solution	+	+	+	+
	Adderall®	+	+	+	+
	Evekeo®	+	+	+	+
	Zenzedi®	+	+	+	+
methlyphenidates	Long Acting Stimulants				
	Ritalin® LA	+	+	+	+
	Metadate® CD	+	+	+	+
	Concerta® **	+	+	+	+
amphetamines	Focalin XR®	+	+	+	+
	Aptensio XR®	+	+	+	+
	Quillivant XR®	+	+	+	+
	Quillichew ER®	+	+	+	+
amphetamines	Daytrana® (PATCH)*	+	+	+	+
	Dexedrine® Spansule	+	+	+	+
	Adderall® XR	+	+	+	+
	Vyvanse®	+	+	+	+
Long Acting Non-Stimulants	Dyanavel® XR	+	+	+	+
	Adzenys® XR-ODT/ER Suspension	+	+	+	+
	Strattera® (atomoxetine)	+	+	+	+
	Intuniv® (guanfacine)	+	+	+	+
Long Acting Non-Stimulants	Kapvay (clonidine® ER)	+	+	+	+

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Key Talking Points:

No medication should be stopped without consultation with your provider.

- Stimulants in general do not build up in your body and generally don't need to be reduced gradually when stopping.
- Dosages for non-stimulant medications such as Clonidine ER, Intuniv, and sometimes Strattera are often lowered gradually over time so your body can adjust.
- Drug holidays are not recommended for non-stimulant medications

You and your provider may discuss stopping/reducing medication when:

- symptom-free for more than a year
- doing better and better on the same dose
- behavior is appropriate despite missing a dose or two, or
- ability to concentrate has improved.

Drug holidays:

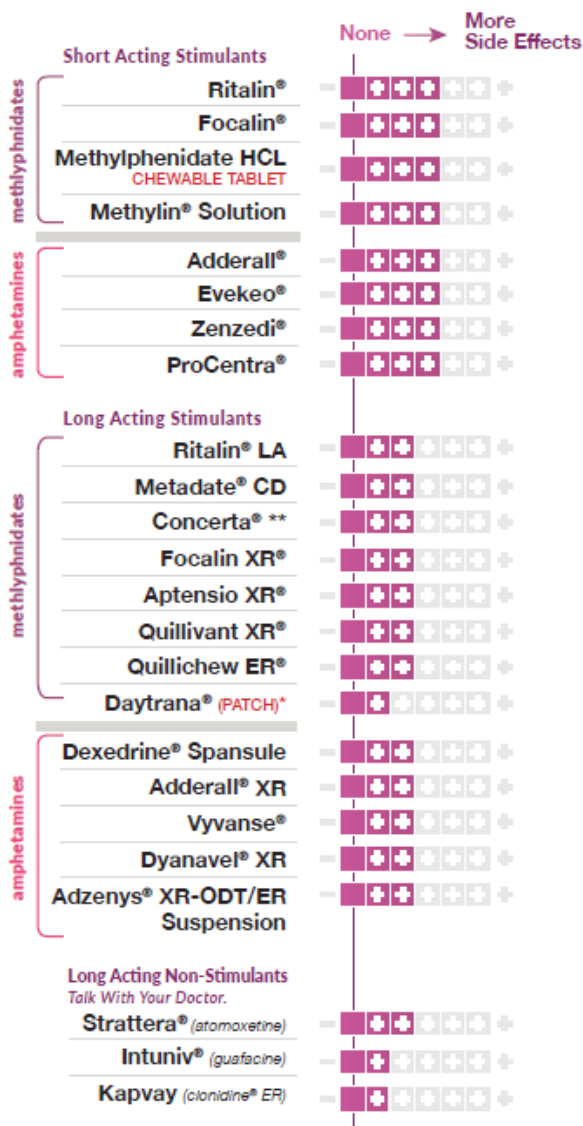
In the past some Providers recommended a break from ADHD medication after school, on weekends, and during the summer. Now, Providers may recommend that children stay on their ADHD medication full-time to get the benefits at home and at play.

Teens may benefit from ADHD medication outside of school to improve focus and concentration when making decisions as well as completing their homework and paying attention while driving.

There may be times where breaks from medication are taken or dosage is reduced to decrease side effects.

Side Effects: Stomach Issues

Stomach Issues can include loss of hunger, weight loss and upset stomach. Eating breakfast before taking medicine may help.



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Key Talking Points

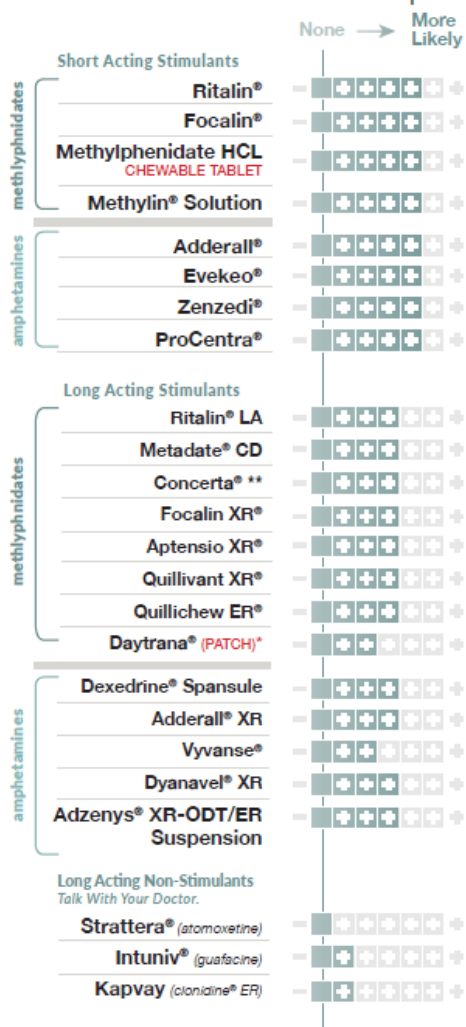
- Administer the medication at or after a meal
- Eat nutrient dense foods before those with "empty calories;"
- Meals with high fat content may delay the onset and increase peak concentrations of some formulations (eg, Metadate CD, Methylin chewable tablets or oral solutions, Adderall XR)
- Acidic beverage/Vitamin C may reduce stimulant/amphetamine levels.

Please consider the following for children:

- Offer food that the child likes for the noon meal
- Let children eat while doing other activities (finger foods, cheese sticks, etc.)
- Consider a large afterschool snack and/or second dinner
- Other meal replacements (puddings; ensure; boost)
- As part of Individual Education Plan (IEP) – have a lunch monitor to ensure that food or food supplement have been taken prior to going out for playtime/free time; breaks for snacks
- Consider 6 small meals a day instead of 3 meals

Risk of Misuse

ADHD medicine can be misused. Medicine should never be shared and should be secured in a safe place.



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Key Talking Points & Safety Measures:

- Take medication exactly as prescribed (both the dose and the frequency)
- Let the provider know if the medication does not seem to be working
- Avoid alcohol, tobacco, marijuana, and other illicit substances
- Administer medication at school in a safe location with adult supervision (eg, school nurse's office)
- Keep medication in a safe location – (Do not sell, share or give away)
- To support the transition into adulthood, develop a plan to prepare the adolescent with becoming fully responsible for managing and administering their medication.
- Don't carry backpack or keep in the car

Provider Safety Considerations:

It is important for Providers to monitor symptoms and prescription refills (**controlled substance registry**) for evidence of misuse or diversion.

To reduce stimulant diversion and misuse risk, consider prescribing long-acting stimulants with less potential for abuse and by keeping track of prescription dates.

It is also helpful to have an open discussion about stimulant diversion and misuse with patients and parents so that students can be prepared if they are approached by peers to sell or misuse medications and parents can remain vigilant in monitoring medications.

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AID CARDS

Anxiety

Provided by:



Purpose of the Cards: To allow a collaborative and meaningful discussion about the risks and benefits of the outcomes of prescribed medications. These cards also allow for prescribers to work with members and having them take ownership in one's healthcare. Allow members to get the treatment they need in the way they want to be treated.

Treatment engagement and health outcomes: Anxiety can be improved by lifestyle changes, self-care practices, psychotherapy, and/or pharmacotherapy. There can be differences in efficacy, safety, cost, and burden to the member.

Three Main Points:

- What are the options?
- What are the pros & cons?
- How likely will you experience these possible outcomes?

What You Should Know & Things to Remember

Will this medication work for me?

- Doctors use different medicines to treat anxiety because everyone responds differently.
- Some medicines are only used short-term, while others are taken as needed or on a daily basis.
- It may take several weeks for the medicine to work at its best.
- You and your doctor might choose therapy before medications.

Understanding side effects:

- Most people who take anxiety medicines have at least one side effect.
- Withdrawal symptoms can occur if stopped abruptly.
- Lifestyle changes can help reduce side effects.

Things to remember:

Medication is one of many tools to help with anxiety. Changing some of your lifestyle habits can also improve your mental health such as:

- Regular therapy and or connection with supportive people
- Being active and doing some activities you enjoy
- Going to bed and waking up at the same time every day
- Spending less time on social media/limiting screen time
- Eating a healthy diet
- Limiting alcohol use

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Key Talking Points:

- First line treatment is CBT(cognitive behavioral therapy) as well as SSRI's and SNRI's. For partial response, other agents may be added.
- As the prescriber you may talk with the member about adding additional medications to assist with treatment.
- Medications do not cure anxiety. Best outcomes are obtained when medications are used in combination with psychotherapy.

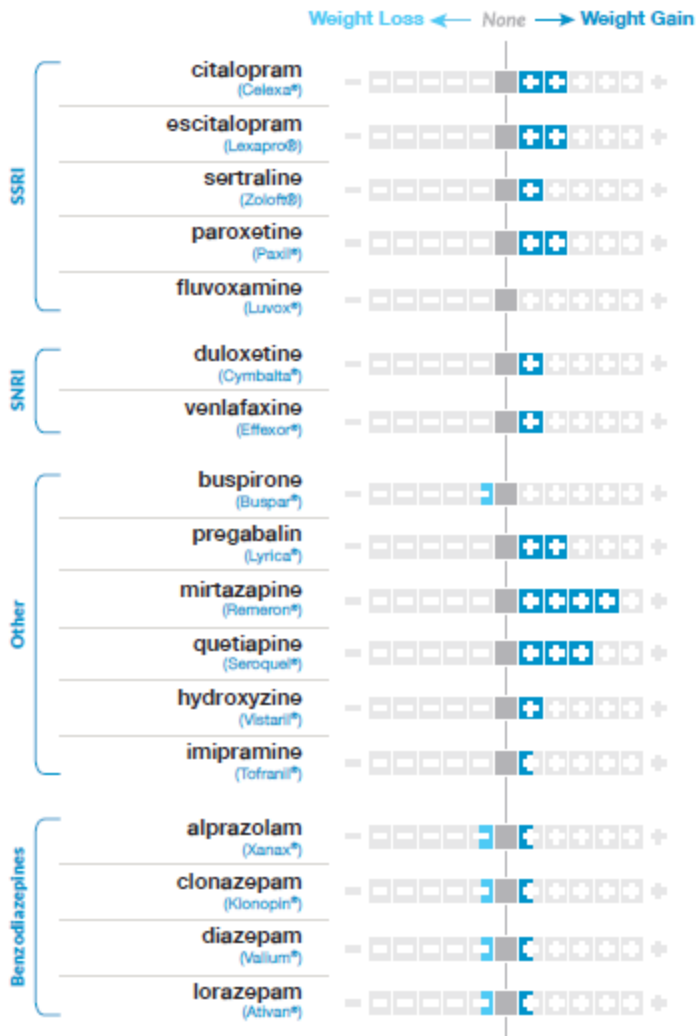
KEY Points on Side Effects

- Continuation and discontinuation of the medications should also be based on the doctor's advice, as there are possible withdrawal side effects like increased anxiety, confusion, insomnia, etc., associated with these drugs. One should never abruptly discontinue the drug
- **Stress affects everyone and can greatly impact anxiety and depression.**
- **Long-term stress can harm your health and may contribute to other serious problems like heart disease, high blood pressure and diabetes.**
- **Lifestyle changes are important in managing physical and behavioral health**

Several other disorders, such as depression, bipolar disorder, PTSD and others also include anxiety as a symptom. It's important to get an accurate diagnosis, so you can get appropriate treatment.

Weight Change

Some people may experience weight change. It is most likely to occur over six to twelve months.



**Data base on Harvard research for weight gain on benzos

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Key Talking Points:

When looking at the numbers related to weight gain, this information was found in the data base on Harvard Research for weight gain on benzos.

- While experts may not be certain about why these medicines cause weight gain, they do know that switching medicine may make a difference.
- Some medicine may be less likely to affect weight. Venlafaxine generally does not cause weight gain, while mirtazapine generally does.
- Sometimes switching within the same class of medicine can make a huge difference. Paroxetine is more likely to cause weight gain, while sertraline is the least likely.
- If you are taking these medicine, you should never use any weight loss medication without the consent of your physician.
- Eating healthy and getting enough exercise can be useful tools to help control weight and improve mood.

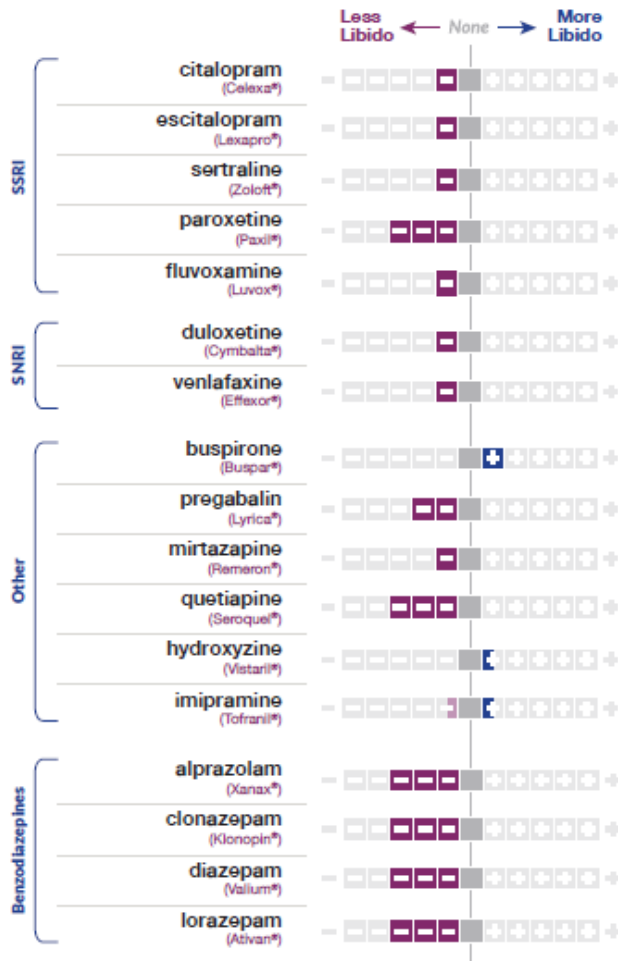
Due to the high risk of misuse, some providers have policies to not prescribe benzos for anxiety, when risks outweigh benefits.

Benzos should be avoided in those with a history of substance use disorders or those at high risk of developing substance abuse.

When presenting options for the treatment of anxiety, you may want to let patients know benzos may not /are not an option for them.

Sexual Side Effects

Some people may experience changes in sexual desire (libido) or loss of ability to reach orgasm because of their medication. Additional side effects may include erectile dysfunction. Speak with your doctor if this occurs.



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Key Talking Points:

Buspar can help when you are taking another SSRI

Sexual dysfunction is one of the most common side effects of SSRI and SNRI and impacts about 50% of patients.

- Sexual side effects from antidepressants affect both men and women. Understanding how these medications affect sex life can help you manage side effects.
- The SSRI and SNRI's raise levels of serotonin in the body, producing a feeling of calm and less anxiety.
- These medicines can reduce sex drive
- Women trying to conceive, should talk to their doctor. Some antidepressants have been proven to cause birth defects.
- Common side effects in men include
 - decreased libido and difficulty getting an erection.
 - trouble maintaining an erection.
 - delayed or blocked orgasm
 - decreased sperm count (citalopram)
- Strategies to deal with sexual side effects include:
 - wait and see if side effects decrease
 - decreasing your dose
 - changing the timing of your dose
 - erectile dysfunction meds in men

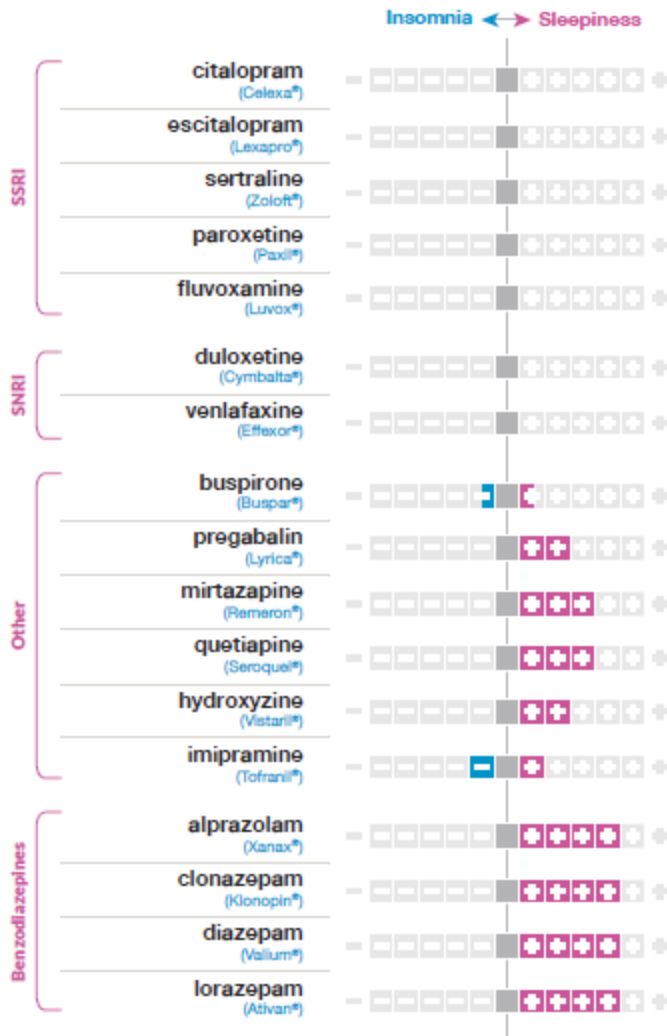
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Sleep

Some people may experience sleepiness or insomnia because of their medicine.



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Key Talking Points

Consider these strategies:

- Take your medicine in the morning if your provider approves.
- Avoid caffeinated food and drinks, particularly late in the day.
- Get regular physical activity or exercise — but complete it several hours before bedtime so it doesn't interfere with your sleep.
- Suggest using CBT for insomnia, PMR (progressive muscle relaxation) prior to initiation of medication for insomnia
- If insomnia is an ongoing problem, ask your doctor about taking a sedating medicine at bedtime or ask whether taking a low dose of a sedating medicine to help.
- Many of these medicines suppress REM (mentally restoring) sleep. Escitalopram (Lexapro), sertraline (Zoloft), duloxetine (Cymbalta), and paroxetine (Paxil) have all been shown to have this effect. When your REM sleep is suppressed, you might wake up more frequently, which then allows you to remember more dreams
- These sleep-related side effects often aren't permanent and often subside after a couple of weeks.

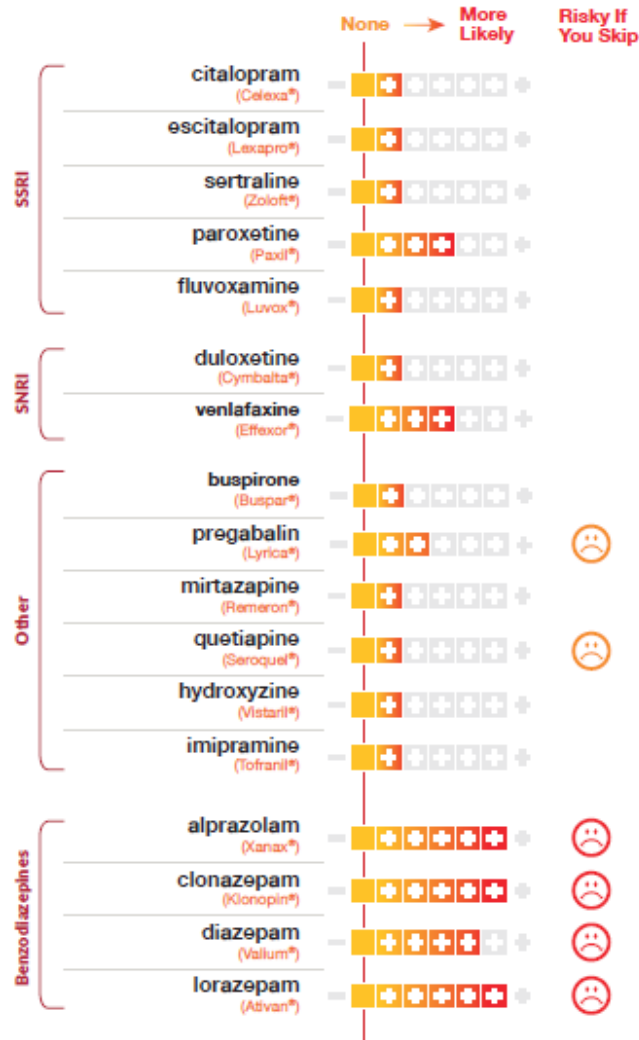
Due to the high risk of misuse, some providers have policies to not prescribe benzos for anxiety, when risk outweigh benefits.

Benzos should be avoided in those with a history of substance use disorders or those at high risk of developing substance abuse.

When presenting options for the treatment of anxiety, you may want to let patients know benzos may not /are not an option for them.

Stopping Approach

Quitting your medicine all at once can make you feel sick, as if you had the flu. Stopping benzodiazepines abruptly can be life threatening (e.g. seizures).



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Key Talking Points:

It is important not to stop taking them without the help of a doctor. When it is time to stop the medication, the doctor will help the person slowly and safely decrease the dose. It's important to give the body time to adjust to the change.

Stopping treatment abruptly or missing several doses can cause withdrawal like symptoms and quitting suddenly may cause a sudden worsening of depression.

Antidepressant discontinuation syndrome, also called antidepressant withdrawal, occurs when a person abruptly stops taking antidepressant medication. Many people who experience antidepressant withdrawal feel like they have the flu or a stomach bug. They may also experience disturbing thoughts or images.

Withdrawal from benzodiazepine is very unpleasant and dangerous. (severe anxiety, insomnia, tremors, seizures)

Pregabalin: Per FDA label, following abrupt or rapid discontinuation of LYRICA, some patients reported symptoms including insomnia, nausea, headache, anxiety, hyperhidrosis, and diarrhea.

If LYRICA is discontinued, taper the drug gradually over a minimum of 1 week rather than discontinue the drug abruptly.

Due to the high risk of misuse, some providers have policies to not prescribe benzos for anxiety, when risk outweigh benefits.

Benzos should be avoided in those with a history of substance use disorders or those at high risk of developing substance abuse.

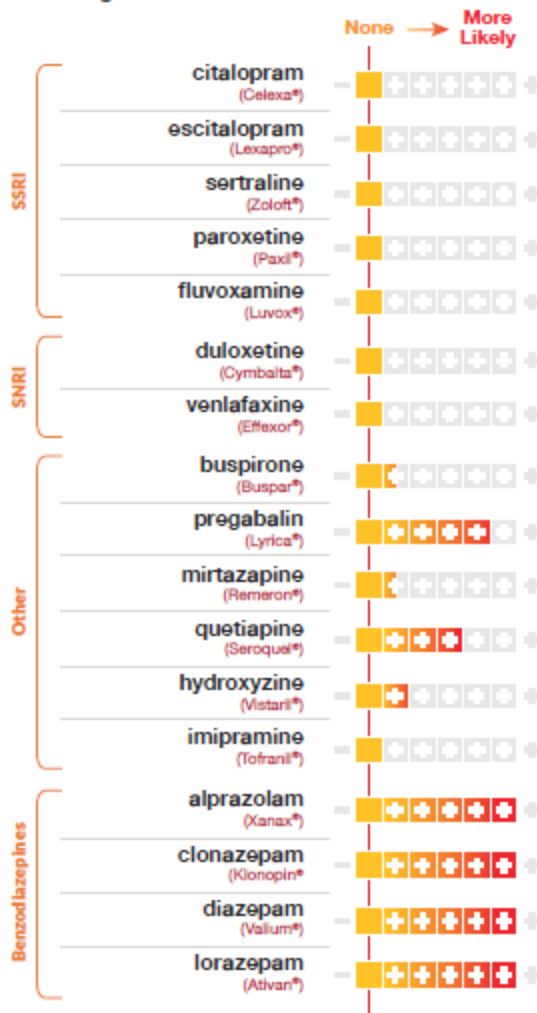
When presenting options for the treatment of anxiety, you may want to let patients know benzos may not /are not an option for them.

Risk of Misuse

Anxiety medicine can be misused. Medicine should never be shared and should be secured in a safe place.

Some risks of benzodiazepine use include:

- physical dependence, even after a short period of use
- addiction and overdose, especially in combination with other drugs or alcohol



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Key Points to discuss

Withdrawal from benzodiazepines may lead to:

- anxiety and restlessness
- depression
- sleep problems
- sweating
- seizures

More severe risks of benzodiazepines may include:

- addiction
- cognitive decline
- cause falls that may result in hip fractures
- motor vehicle accidents, as they can affect a person's ability to drive
- overdose, especially in combination with opioid drugs or alcohol

Pregabalin: Recreational users of drugs given 450mg of pregabalin reported having a “high” similar to diazepam 30mg. In controlled clinical studies euphoria was reported in up to 12% of the population.

Those with a personal or family history with a substance use disorder, as well as some others are at greater risk of benzodiazepine abuse.

Generally this abuse can be either

- intentional (deliberate/recreational) or
- non-intentional abuse that begins as legitimate use which later develops into inappropriate use.

If benzodiazepines are used at all, ONLY short term use of low dose benzodiazepines (2-6 weeks) is recommended with gradual tapering once the primary anxiety medicine takes effect.

Due to the high risk of misuse, some providers have policies to not prescribe benzos for anxiety, when risk outweigh benefits.

Benzos should be avoided in those with a history of substance use disorders or those at high risk of developing substance abuse.

When presenting options for the treatment of anxiety, you may want to let patients know benzos may not /are not an option for them.

Pharmacology benzodiazepines for anxiety. www.uptodate.com;
<https://www.uptodate.com/contents/image/print?imageKey=PC%2F65653&topicKey=PSYCH%2F14631&search=anxiety%20treatment&rank=1~150&>. Retrieved 03/15/2019

Meds for treatment of generalized anxiety disorder.
<https://www.uptodate.com/contents/image/print?imageKey=PSYCH%2F77409&topicKey=>
[y](https://www.uptodate.com/contents/image/print?imageKey=PSYCH%2F77409&topicKey=). Retrieved 03/12/2019

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Depression

Joint partnership between:

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Treatment engagement and health outcomes: Depression can be improved by lifestyle changes, self-care practices, psychotherapy, and/or pharmacotherapy. There can be differences in efficacy, safety, cost, and burden to the member.

Video: <http://shareddecisions.mayoclinic.org>

What You Should Know

Will this medication work for me?

- 6 out of 10 people will feel better with the first antidepressant they try and the rest will have to try a different antidepressant **or another type of medicine** before they find one that works for them.

Understanding side effects:

- Most people need to take an antidepressant have at least one side effect.
- Many side effects go away after a few weeks, but some only go away after you stop the medicine.
- Lifestyle changes can help reduce side effects.



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IMPORTANT Consideration!!!

- 1) **Most Dangerous Side Effects:** Serotonin Syndrome (very rare but MD's will monitor for), Allergic Reaction, Suicidal Ideation
- 2) **Most Common Side Effects:** N&V, Sleep Disruption, Abdominal Discomfort; Suggest taking after meals, at night, start low and slow
- 3) **Pregnancy:** Asking member's if they are pregnant, or planning to get pregnant

Several other disorders, such as bipolar disorder, include depression as a symptom. It's important to get an accurate diagnosis, so you can get appropriate treatment.

Although all antidepressants can cause side effects, some are more likely to cause certain side effects than others. You may need to try several different antidepressant medicines before finding the one that improves your symptoms and has side effects that you can manage.

Most antidepressants are generally safe, but the U.S. Food and Drug Administration (FDA) requires that all antidepressants carry black box warnings, the strictest warnings for prescriptions. In some cases, children, teenagers, and young adults under age 25 may experience an increase in suicidal thoughts or behavior when taking antidepressants, especially in the first few weeks after starting or when the dose is changed. The warning also says that patients of all ages taking antidepressants should be watched closely, especially during the first few weeks of treatment.

If a family member has responded well to an antidepressant, it may be one that could help you. Or you may need to try several medications or a combination of medications before you find one that works. This requires patience, as some medications need several weeks or longer to take full effect and for side effects to ease as your body adjusts.

Lifestyle changes can reduce side effects and can improve your response to treatment.

- Avoid alcohol and recreational drugs. It may seem like alcohol or drugs lessen depression symptoms, but in the long run they generally worsen symptoms and make depression harder to treat. Talk with your doctor or therapist if you need help with alcohol or substance use.
- Take care of yourself. Eat healthy, be physically active and get plenty of sleep.
 - Sleeping well is important for both your physical and mental well-being. If you're having trouble sleeping, talk to your doctor about what you can do.

Things to Remember

Medication is one of many tools to help with depression symptoms. Changing some of your lifestyle habits can improve your mental health:

- Regular therapy and or connection with supportive people
- Going to bed and waking up at the same time every day
- Eating nutritious foods
- Being active and doing some activities you enjoy

Antidepressants can be helpful for a variety of reasons such as anxiety, irritability, pain, sadness and trauma. Your doctor may prescribe 'anti-depression' medicine for another diagnosis.

You and your doctor might choose not to start medications and try other things such as therapy first.

It's important to communicate with your doctor or therapist often about how you are feeling.



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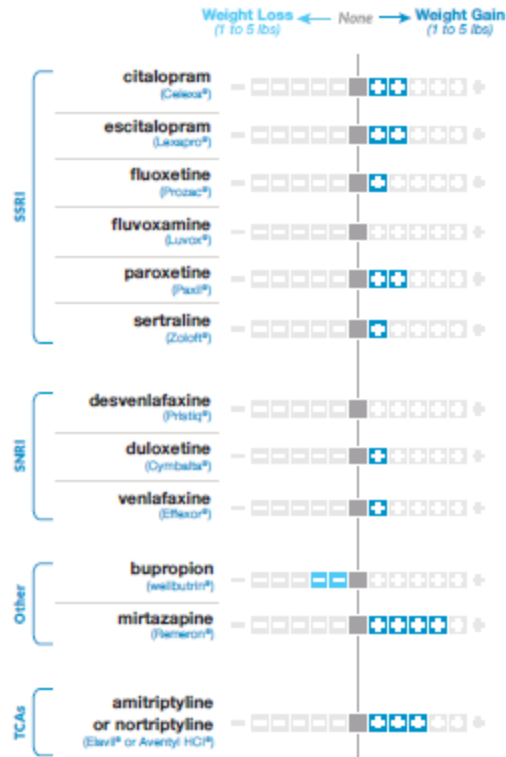
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- Sometimes living with depression can seem overwhelming, so build a support system for yourself. Your family and friends are a great place to start. Talk to trusted family members or friends to help them understand how you are feeling and that you are following your doctor's recommendations to treat your depression.
- Several types of psychotherapy—or “talk therapy”—can help people with depression. There are several types of psychotherapies that may be effective in treating depression. Examples include cognitive-behavioral therapy, interpersonal therapy, and problem-solving therapy.
- In addition to your treatment, you could also join a support group. These are not psychotherapy groups, but some may find the added support helpful. At the meetings, people share experiences, feelings, information, and coping strategies for living with depression.
- Eat a well-balanced diet. Depression may tempt you to under- or overeat (especially junk food). A diet lacking the necessary vitamins and minerals can make you feel worse. Eat more whole grains, fruits, vegetables, nuts and legumes, and lean meats, chicken, and seafood. Eat less empty carbohydrates (sweets) , refined starches (white bread or pasta, potato etc) and highly processed foods which increase risk for depression:
- Consider walking, jogging, swimming, gardening or another activity that you enjoy. Exercise stimulates your levels of brain chemicals and make you feel more alert and motivated.
-

<https://www.nimh.nih.gov/health/publications/depression-what-you-need-to-know/index.shtml>

Weight Change

Some people may experience weight change. It is most likely to occur over six to twelve months and depends on your actual weight. The chart below is based on a 150 lb person.



Key Talking Points:

- Some antidepressants may be less likely to affect weight. Venlafaxine generally does not cause weight gain, while bupropion can cause weight loss.
- Sometimes switching within the same class of drugs can make a huge difference. Mirtazapine and Paroxetine are more likely to cause weight gain, while sertraline is the least likely.
- If you are taking antidepressants, you should never use any weight loss medication without the consent of your physician.
- Eating healthy and getting enough exercise can be useful tools to help control weight and improve mood.
- <https://www.webmd.com/depression/features/antidepressants-weight-gain#1>

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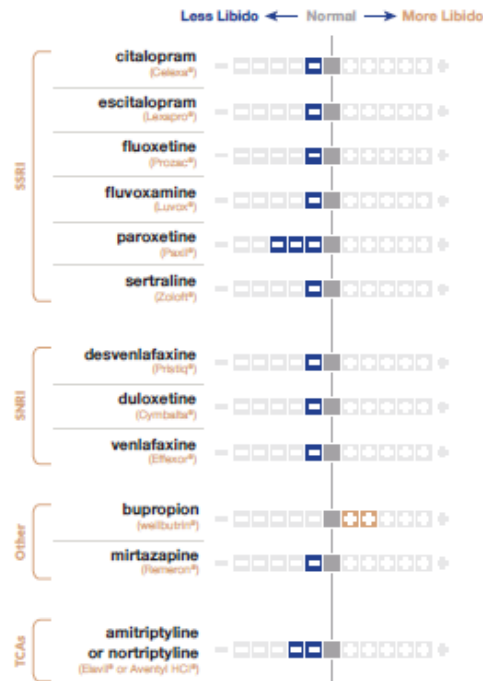
Depression

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Sexual Side Effects

Some People may experience loss of sexual desire (libido) or loss of ability to reach orgasm because of their antidepressant.



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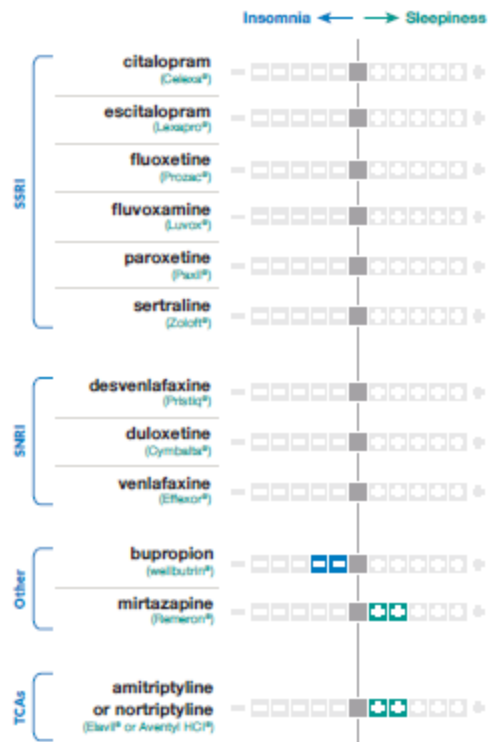
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Key Talking Points:

- Sexual side effects are among the most common complaints about antidepressants.
- Sexual side effects from antidepressants affect both men and women. Understanding how these medications affect sex life can help you manage side effects.
- The SSRI and SNRI's raise levels of serotonin in the body, producing a feeling of calm and less anxiety.
- However, that same sense of calm and stability can lower our libido. It prevents the hormones that cause our bodies to respond to sex from transmitting their message to our brains. Simply put, antidepressants can turn the dial down on our sex drive.
- Women taking SSRIs may experience
 - Delayed lubrication as well as delayed or blocked orgasm.
 - Lack of desire for sex
 - Discomfort during sex
- Women on antidepressants trying to conceive, should talk to their doctor. Some antidepressants have been proven to cause birth defects.
- Common side effects in men include
 - Decreased libido and difficulty getting an erection.
 - Trouble maintaining an erection.
 - Delayed or blocked orgasm
 - Decreased sperm count (citalopram)
- Strategies to deal with sexual side effects include:
 - Wait and see if side effects decrease
 - Decreasing your dose
 - Changing the timing of your dose
 - Erectile dysfunction meds in men, bupropion for women
- <https://www.healthline.com/health/erectile-dysfunction/antidepressant-sexual-side-effects#management>

Sleep

Some People may experience sleepiness or insomnia because of their antidepressant.



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Key Talking Points:

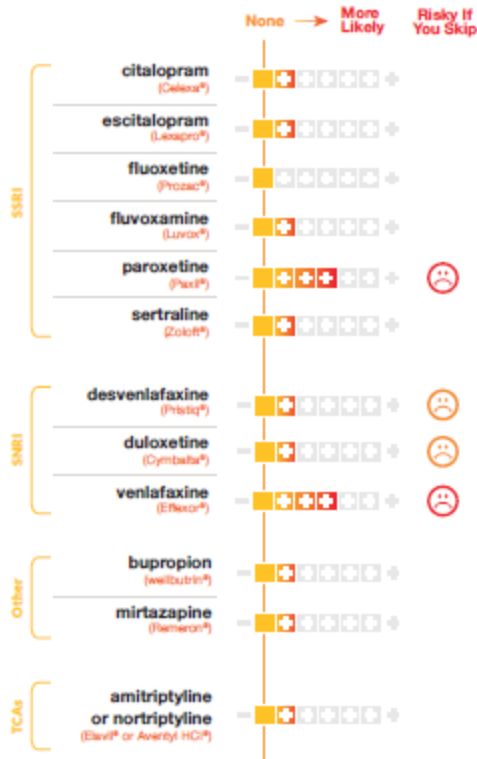
Some antidepressants like bupropion increases the levels of norepinephrine and dopamine in the brain which can result in feeling extra-energized, potentially causing insomnia. This can make it difficult to get to sleep or stay asleep. So you may be tired during the day.

Consider these strategies:

- Take your antidepressant in the morning if your provider approves.
- Avoid caffeinated food and drinks, particularly late in the day.
- Get regular physical activity or exercise — but complete it several hours before bedtime so it doesn't interfere with your sleep.
- If insomnia is an ongoing problem, ask your doctor about taking a sedating medication at bedtime or ask whether taking a low dose of a sedating antidepressant such as trazodone or mirtazapine before bed might help.
- <https://www.mayoclinic.org/diseases-conditions/depression/in-depth/antidepressants/art-20049305>
- Many antidepressants suppress REM (mentally restoring) sleep. Escitalopram (Lexapro), sertraline (Zoloft), duloxetine (Cymbalta), and paroxetine (Paxil) have all been shown to have this effect. When your REM sleep is suppressed, you might wake up more frequently, which then allows you to remember more dreams
- These sleep-related side effects often aren't permanent and often subside after a couple of weeks.

Stopping Approach

Quitting your medicine all at once can make you feel sick, as if you had the flu (e.g. headache, dizziness, light-headedness, nausea, or anxiety).



Key Talking Points:

Once a person is taking antidepressants, it is important not to stop taking them without the help of a doctor.

Sometimes people taking antidepressants feel better and stop taking the medication too soon, and the depression may return. When it is time to stop the medication, the doctor will help the person slowly and safely decrease the dose. It's important to give the body time to adjust to the change.

People don't get addicted, or "hooked," on the medications, but physical dependence (which is different from addiction) can occur. Stopping treatment abruptly or missing several doses can cause withdrawal like symptoms and quitting suddenly may cause a sudden worsening of depression.

Antidepressant discontinuation syndrome, also called antidepressant withdrawal, occurs when a person abruptly stops taking antidepressant medication. Many people who experience antidepressant withdrawal feel like they have the flu or a stomach bug. They may also experience disturbing thoughts or images.

Work with your doctor to gradually and safely decrease your dose. If a medication does not work, it may be helpful to be open to trying another one.

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SHARED DECISION MAKING

AID CARDS

Antipsychotic

Joint Partnership Between:

Alliance
Health

Alameda County
Behavioral Health

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Purpose of the Cards: To allow a collaborative and meaningful discussion about the risks and benefits of the outcomes of prescribed medications. These cards also allow for prescribers to work with members and having them take ownership in one's healthcare. Allow members to get the treatment they need in the way they want to be treated.

Treatment engagement and health outcomes: Research suggestions that members benefit immensely from learning about their illness. Education interventions are attributed to significantly reducing relapse and readmission rates, decrease fewer days in the hospital, increasing adherence to medication and improved quality of life.

What You Should Know & Things to Remember

Will this work for me?

- Antipsychotic medications help ease symptoms of psychosis, such as delusions and hallucinations.
- Antipsychotics can be used to treat other mental health symptoms and disorders.
- Some people may need to try different medications to see what works best for them.
- People using Clozapine or long-acting injections are less likely to need hospital care.

Understanding side effects:

- There may be times when it is important to contact your doctor immediately.
- There are other medications that can help with side effects. Making some lifestyle changes can help reduce side effects.

Things to remember:

- Antipsychotic medicines generally should not be stopped abruptly.
- If you miss your Clozapine dose for more than 48 hours (2 days), you **MUST** contact your doctor, so that your dose can be adjusted to prevent dangerous side effects.
- If you miss your appointment for long acting injections, call your doctor immediately to reschedule.
- If you stop taking these medicines abruptly you may become sick or unwell quickly.
- Everyone responds to medication differently.

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Important Consideration!!

- 1) Share with members FDA status for medications related to treating diagnosis, discuss rational of benefits and document when using off label
- 2) Most Serious Side Effects: Neuroleptic Malignant Syndrome, Allergic Reaction, Abnormal Movements
- 3) Most Common Side Effects: Sedation

Suggested Talking Points:

If you are experiencing muscle stiffness, spasms, or abnormal movements tell your doctor right away stating what your symptoms are. They can give you something to help with these symptoms.

Please consider giving specific instructions on what to do if clozapine dosage is missed; re-titration is necessary if therapy is missed for ≥ 48 hours due to cardiac side effects.

Antipsychotic withdrawal side effects that should be monitored for include: agitation, activation, insomnia, rebound psychosis, withdrawal-emergent dyskinesia, "anticholinergic rebound": nausea, malaise, diaphoresis, vomiting, and/or insomnia

Dizziness due to a drop in blood pressure may occur when starting some medications. Getting up slowly from a sitting/lying position helps decrease dizziness, **ESPECIALLY** this is very important to talk about and consider older patients when prescribing. It may cause increased constipation

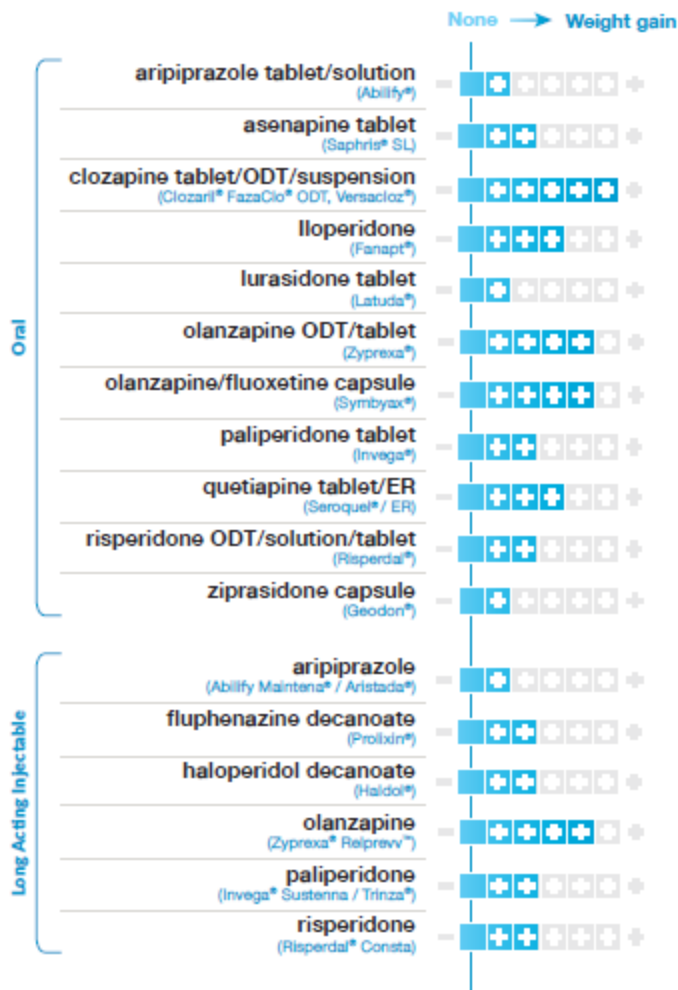
Older and younger people may be more sensitive to side effects (weight gain; tolerate vs not; heart disease; etc).

Weight Change/Diabetes Risk

Some people may experience weight gain, increases in cholesterol and blood sugar.

Sometimes other medications will be added to prevent or treat these physical changes.

A healthy diet and physical activity are very important.



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Key Talking Points:

“All atypical antipsychotics carry a risk of metabolic disturbance; clozapine and olanzapine have the highest risk, followed by quetiapine and risperidone.

- **Newer atypical antipsychotics may carry less of a risk** of metabolic side effects, but long-term data are lacking.

- **Obtain baseline and periodic monitoring** of BMI, waist circumference, HbA_{1c}, fasting plasma glucose, and fasting lipids.

ADA guidelines recommend a fasting lipid panel every 5 years; however, good clinical practice dictates obtaining a lipid panel annually

- If you find an **abnormality of any of these parameters**, consider one or more of the following: switching to an agent that is less risky; decreasing the dose or discontinuing therapy; recommending diet and exercise; and referring the patient to a program or clinician with expertise in the management of weight, diabetes, or lipids.

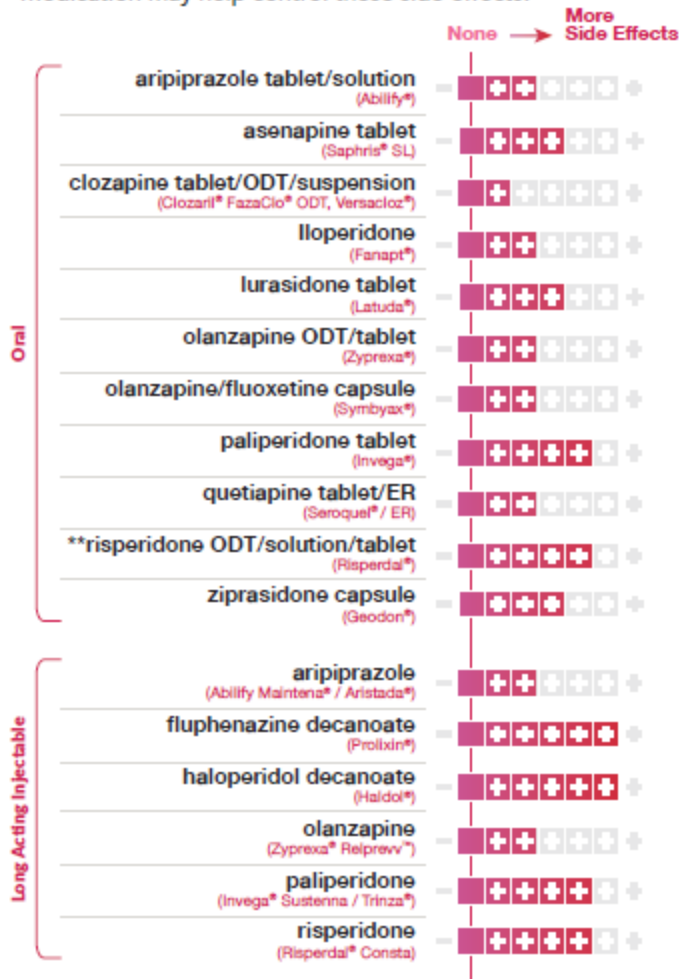
- **Use monotherapy when appropriate** to decrease the risk of side effects.” (Zier-link below)

https://mdedge-files-live.s3.us-east-2.amazonaws.com/files/s3fs-public/Document/September-2017/051_0913CP_SavvyPsych_FINAL.pdf

Muscle Stiffness, Spasms, Shakiness, Abnormal Movement

These movements can happen within hours or days of treatment ("acute") or develop after a long period of time ("chronic"). If you feel any of these, tell your doctor right away. It does not matter which muscle is stiff! In rare cases abnormal movement can become a medical emergency.

Medication may help control these side effects.



** Risperidone dose above 6mg have higher risk of muscle stiffness

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Key Talking Points:

As a group, these are called extrapyramidal side effects (EPS) and need to be monitored closely.

These symptoms include dystonia (continuous spasms and muscle contractions), akathisia (motor restlessness –discussed on a separate card), parkinsonism (stiffness/ rigidity), bradykinesia (slowness of movement), tremor (shakiness), and tardive dyskinesia (irregular, jerky movements).

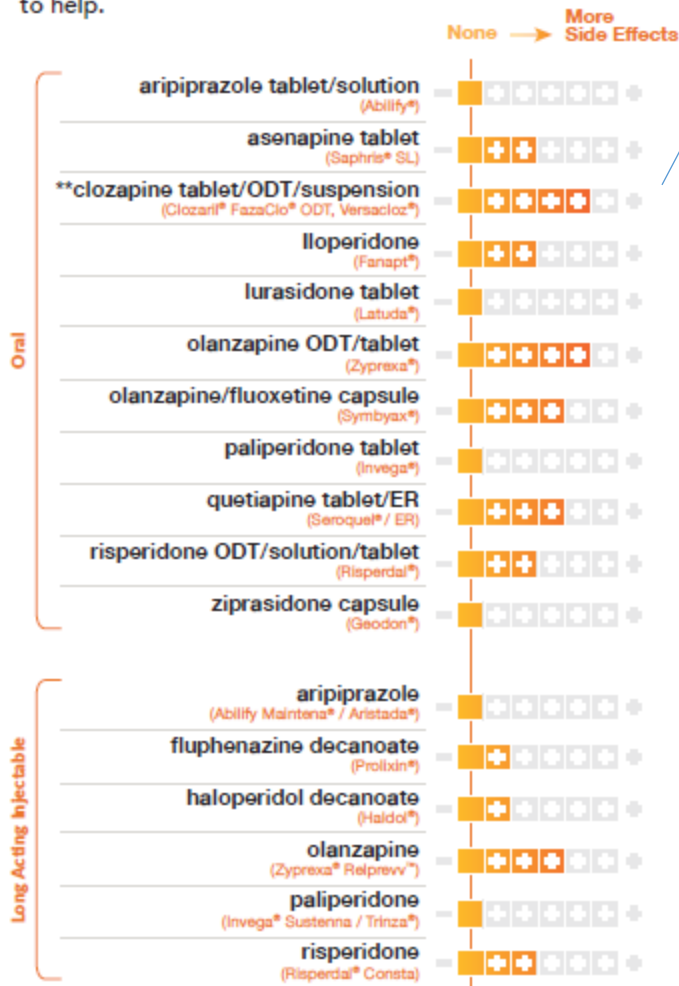
What is ODT? Orally Dissolving Tablets

Must be dissolved on the tongue and not swallowed whole

Dry Mouth, Blurred Vision & Constipation

Some medications may cause dry mouth, blurred vision, constipation, as well as confusion, decreased sweating, urinary retention and increased heart rate.

If you have any of these side effects, please speak with your doctor. There are things that you can do and medicines to help.



**Clozapine causes drooling, for which there are treatments.

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Key Talking Points:

Anticholinergic side effects include: dry mouth, blurred vision, constipation, as well as confusion, decreased sweating, urinary retention and increased heart rate.

When starting clozapine due to higher risk of constipation, prevent constipation by:

- Exercising, drinking plenty of water and eating a well-balanced diet high in fiber.
- Start prophylactic laxatives (stool softeners) for/in those at higher risk of constipation, (on opioids or other anticholinergic meds, poor hydration, sedentary and low fiber diets)
- Avoid bulking agents such as psyllium or fiber supplements.

TREAT Constipation:

- Prescribe laxatives to soften stool and shorten transit time through GI tract.
- Osmotic laxatives: Lactulose, polyethylene glycol (e.g., Dulcolax, Glycolax, Miralax)
- Stimulant laxatives: (e.g., Senna, cascara)
- Stool softeners: (eg docusate sodium)
- Consider an enema for persistent constipation.
- Develop a plan for ongoing individualized monitoring of patients with a known history of constipation

Dry Mouth

- Brushing and flossing teeth regularly.
- Eating sugar free lozenges/gum
- Avoid mouthwashes that contain alcohol
- Use dry mouth rinses, sprays or gels
- Stop tobacco use

Blurred vision

- Blurred vision may get better over time and can be corrected with reading glasses.

Sexual Side Effects

Some people who take antipsychotics may experience decreased sex drive (libido), arousal, changes in sexual functioning and other body changes such as irregular periods.

Let your doctor know if you experience these side-effects. Often an adjustment in dose or change of medication can help.



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Key Talking Points:

- Women may be unable to have an orgasm
- Men may have difficulty getting or keeping an erection or ejaculating
- Patients may also see breast enlargement, discharge.

Dysfunction in all phases of sexual activity (libido, arousal, and orgasm) is common with antipsychotic treatment. Several pharmacologic mechanisms are likely to contribute to sexual problems:

- Loss of desire through inhibition of dopaminergic motivation and reward pathways
- Erectile dysfunction through alpha-adrenergic blockade and anticholinergic activity. Men may have difficulty getting or keeping an erection or ejaculating.

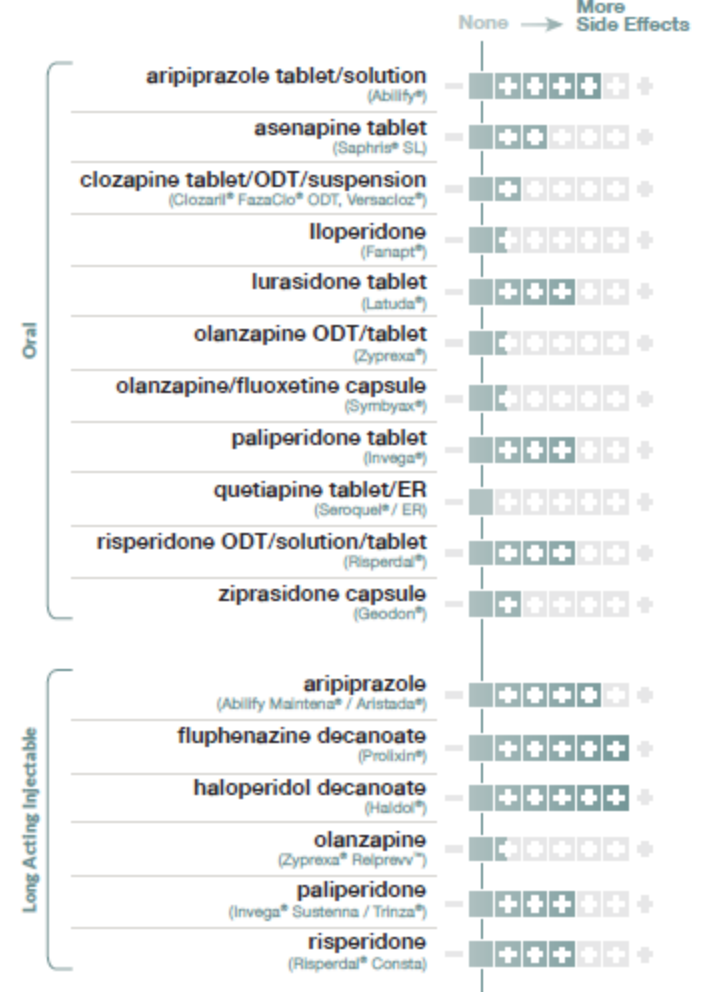
Impairment in desire, arousal, and orgasm due to prolactin elevation [60] due to intense blockade of dopamine D2 receptors. Patients may also see Breast enlargement, discharge. Highest prolactin elevation are seen with risperidone and paliperidone, then haloperidol and most other first-generation antipsychotics.

A normal prolactin level is less than 25 ng/mL in women and less than 20 ng/mL in men. Endocrinologists divide hyperprolactinemia into three categories: mild hyperprolactinemia is a level of 25-50 ng/mL, moderate is 51-100 ng/mL, and severe is anything over 100 ng/mL.

<https://www.mdedge.com/psychiatry/article/152504/schizophrenia-other-psychotic-disorders/schizophrenias-silent-epidemic>

Restlessness

Restlessness can feel like the need to keep moving, leading to difficulty sitting still, feet tapping and/or pacing. It usually appears within days of beginning an antipsychotic medication or after a dose increase.



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Akathisia is the term for restlessness. It is a movement disorder that makes it hard for you to stay still. It causes an urge to move that you can't control. You might need to fidget all the time, walk in place, or cross and uncross your legs. Usually, akathisia is a side effect of antipsychotic drugs

Not everyone taking an antipsychotic drug gets the disorder. Symptoms usually appear within a few days. Older, first-generation versions of these drugs are more likely to cause akathisia than newer ones. You're also more likely to get it if you start with a high dose, suddenly increase the dose, or stop a medicine suddenly.

The main sign of akathisia is a sense of restlessness and intense need to move. To relieve this feeling, you need to stay in motion. It usually affects your legs, usually while you're sitting. People with akathisia are likely to:

- Rock back and forth
- Pace or march in place
- Shift their weight from foot to foot
- Cross and uncross their legs
- Squirm or fidget
- Grunt or moan

Other symptoms include feeling irritable, stressed, impatient, or panicked. You may feel like jumping out of your skin.

Some of the signs can be mistaken for part of other problems if not reported and can be easily missed in diagnosis. **It's important to see your doctor if you have symptoms of akathisia. If left untreated, it can lead to distress, disruptive behaviors, or sometimes even suicidal thoughts. Don't stop taking medications unless your doctor says it's ok.**