

A Keele University Teaching Trust

**Fluoxetine** (say: flew-ox-e-teen)



#### What is fluoxetine?

- Fluoxetine is mainly used to help treat the symptoms of depression (by reducing the time it takes to recover and to help stop the symptoms coming back), anxiety, and OCD It can also help social anxiety, PTSD, panic, PMS and seasonal affective disorder
- It is often known as an SSRI (Selective Serotonin Reuptake Inhibitor)
- It is made as capsules, a dispersible tablet and a liquid.

#### What does fluoxetine help?

- Fluoxetine can help many symptoms e.g. feeling low, nervous, very shy, panicky, or having to do things exactly the right way and checking all the time
- In lower doses (e.g. 10mg a day) it can help anxiety, worries and distress.
- For depression, about 2 in 3 (65%) of people get better with a first antidepressant
- If that doesn't work or because it has too many side effects, then switching to a second antidepressant helps about half of those people (total of about 75%, or 3 in 4 people). There are more options after that e.g. other medicines and therapies.





#### How and when should I take fluoxetine?

- Swallow the capsules with at least half a glass of water whilst sitting or standing. This is to make sure that they reach the stomach and do not stick in your throat
- For the liquid, use a medicine spoon, dropper or oral syringe
- Swallow a dispersible tablet with half a glass of water or disperse in half a glass of water
- It is best taken with or after food, in the morning.

## How long will I have to wait before it works?

- This will depend on what you are taking it for but for depression the effect usually starts in a week or two, and builds over the next couple of weeks
- For some other conditions it may take up to 3 months to work fully.





#### How long will I need to keep taking fluoxetine for?

This will depend on what you are taking it for.

For depression, if an antidepressant has got you better:

- First episode: Taking it for 6 months cuts the risk of getting depressed again
- Second episode: Taking it for 1-2yrs cuts the risk of getting depressed again.

Been depressed before but antidepressants don't help much? Ever been irritable, disinhibited, overactive, not sleeping, overspent, disinhibited? Bipolar in the family? If so, it's worth asking: "Could it be bipolar?"

### Can I stop taking fluoxetine suddenly?

- It is best not to do this. Talk it over first with other people e.g. relatives and your prescriber or other healthcare professional
- It normally works out better if you stop medication in a planned way at a time when your stress levels are low, rather than e.g. around exam times, mid-winter and life events
- Your symptoms can return if treatment is stopped too early. This may occur some weeks or even months after fluoxetine has been stopped
- You should come off fluoxetine by a gradual drop in dose over several weeks
- You might also get some discontinuation symptoms such as 'flu-like symptoms, and sleep disturbance (e.g. more vivid dreams). They can start 1-2 weeks after stopping, usually only last a few weeks (but can be a bit longer) and will go if fluoxetine is started again.





#### What should I do if I forget to take a dose of fluoxetine at the right time?

- Start again as soon as you remember but not within 5-6 hours of going to bed
- After this, just take the next dose as normal
- Do not try to catch up by taking two doses at once as you may get more side-effects.





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## Can I cycle or drive while I am taking fluoxetine?

- You may feel a bit light-headed at first when taking fluoxetine
- Until this wears off, or you know how fluoxetine affects you, be careful cycling and do not drive or operate machines.



## What sort of side-effects might I get with fluoxetine?

## Very common (more than about 1 in 10 people might get these)



# Feeling sick or being sick, or stomach pain

- Taking it after food may help
- It usually wears off in a few weeks
- If not, tell your prescriber.



## Not being able to get to sleep at night

- Make sure you take the dose early in the day
- Let your prescriber know as a change in dose may help.



#### Sex

- Finding it hard to have an orgasm
- No desire for sex
- Discuss this with your doctor.

## Common (fewer than about 1 in 10 people might get these)



## Headache

 If your head is painful, paracetamol usually helps.



#### Diarrhoea

- Going to the toilet more than usual and "having the runs"
- Drink plenty of water
- Get advice from your pharmacist
- If it lasts for more than a day or so, contact your prescriber.



## Not feeling hungry

- You will usually get your appetite back in a few weeks
- If not, let your prescriber know next time you meet.



## Feeling more anxious or nervous

- This usually only lasts for a few weeks while you get used to your fluoxetine
- If not, tell your prescriber next time you meet.

## See your prescriber if you get any of these rare side effects:



#### Thoughts of harming yourself

- Feeling anxious, restless, poor sleep and feeling you might want to harm yourself
- See your doctor in the next day, especially if you are under about 20 years old, started the medicine in the last few weeks, have had a dose change or may have bipolar depression.



### Serotonin Syndrome

- You may feel confused, agitated, restless, sweaty, feverish, fast heart beat, twitching, shivering and shaky
- It may happen if you have just started, had a dose increase, overdose, or start to take any other medicines
- See your doctor in the next few hours if this happens



#### Rash

- This can be a rash or itching seen anywhere on the skin
- If this happens, stop taking your SSRI and contact your prescriber in the next day.



## Hyponatremia or "SIADH"

- You do not pass much urine, are tired, confused, muscle cramps and you can get a headache
- This can be dangerous so contact your prescriber now.

This table shows some of the most common side effects and any you might need to take action on. You must also see the maker's Patient Information Leaflet for the full list of possible side effects but do not be worried by this. Some side effects are the brain getting used to a medicine and these usually wear off in a few days or weeks. Starting at a lower dose may help. If you think you might have a side effect, you should ask your prescriber, pharmacist or other healthcare professional.

The small print: This leaflet is to help you understand more about fluoxetine. You must also read the manufacturer's Patient Information Leaflet (PIL). You may find more on the internet but beware as internet-based information is not always accurate. Do not share medicines with anyone else. The 'Handy charts' will help you compare the main medicines for each condition, how they work and their side effects. Go to our website for fuller answers to these and many other questions.

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