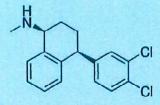
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Sertraline (pronounced cert-ral-een)



What is sertraline?

Sertraline (also known as Lustral®) is usually used to help treat the symptoms of depression, anxiety, and OCD (Obsessive Compulsive Disorder). 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 only made as tablets.

What does sertraline help?

Sertraline can help many symptoms. These can include feeling low, nervous, anxious, very shy, panicky, or having to do things exactly the right way and checking all the time.





How and when should I take sertraline?

Swallow the tablets 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. Taking it at mealtimes may make it easier for you to remember as it is best taken with or after food. If the label says to take it once a day this is usually best in the morning.

How long will I have to wait before it works?

This will depend on what you are taking it for but the effect usually starts in a week or two, and builds over the next couple of weeks.





How long will I need to keep taking sertraline for?

This will depend on what you are taking it for. It may be for several months or years.

Can I stop taking sertraline suddenly?

It is better not to do this without talking it over first with other people e.g. relatives or your doctor, nurse or pharmacist. Things normally work out much better if you stop medication in a planned way. Your symptoms can return if treatment is stopped too early. This may occur some weeks or even months after sertraline has been stopped. When the time comes, you should withdraw sertraline by a gradual reduction in the dose over several weeks.





What should I do if I forget to take a dose of sertraline?

Start again as soon as you remember if within about 12 hours of your next dose. 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 sertraline?

You may feel a bit light-headed at first when taking sertraline. Until this wears off, or you know how sertraline affects you, be careful cycling and, if you are old enough, do not drive or operate machinery.



What sort of side-effects might I get with sertraline?

The table below will show you some of the main side effects you might get from sertraline, and what you can do about them. The more common ones are near the top of the list.



Nausea and vomiting.

Feeling sick and being sick. Take your sertraline with or after food. If you are sick for more than a day, contact your doctor. This tends to wear off after a few days or a week or



Sleepiness

Feeling sleepy or sluggish. This can last for a few hours or longer after taking a dose. Don't drive, cycle or use machinery. It should wear off after a while. If not, ask your doctor or nurse about this.



Not feeling hungry.

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



Restlessness or anxiety.

Feeling more on edge. You may sweat a lot more. Try and relax by taking deep breaths. Wear loose fitting clothes. A lower starting dose may help sometimes.



Not being able to get to sleep at night.

This can be a problem. Let your doctor know. He or she may be able to change your dose. Make sure you take the dose early in the day.



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 doctor.



Skin rashes

This can include red rashes on the skin, urticaria or pruritis (itching). If this happens, discuss with your doctor next time you meet.

Do not be worried by this list of side effects. Some people get no side effects at all and others may get some effects that are not listed in this table. If you think you might have a side effect to your medicine, you should ask your doctor, nurse or pharmacist. If you want to know more, go to our website for links to other websites with more information.

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

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