

Schedule 13. Antidepressant Withdrawal Table

Drugs	Dosage strengths and formulations*
Tricyclics	
amitriptyline (Tryptizol, Elavil)	tabs 10, 25, 50mg; liquid 25mg/5ml
amoxapine (Asendis)	tabs 25, 50, 100mg
clomipramine (Anafranil)	caps 10, 25, 50mg; syrup 25mg/5ml
dothiepin (Prothiaden)	tabs 25, 75mg
doxepin (Sinequan)	caps 10, 25, 50, 75mg
imipramine (Tofranil)	tabs 10, 25mg syrup 25mg/5ml
lofepramine (Gamanil)	tabs 70mg; liquid 70mg/5ml
nortriptyline (Allegron, Pamelor)	tabs 10, 25mg
protriptyline (Concordin, Vivactil)	tabs 5, 10mg
trimipramine (Surmontil)	tabs 10, 25mg
Related antidepressants	
maprotiline (Ludiomil)	tabs 10, 25, 50, 75mg
mianserin (Bolvidon, Norval)	tabs 10, 30mg
trazodone (Molipaxin, Desyrel)	caps 50, 100mg; tabs 150mg; liquid 50mg/5ml
viloxazine (Vivalan)	tabs 50mg
MAOIs (monoamine oxidase inhibitors)	
phenelzine (Nardil)	tabs 15mg
moclobemide (Mannerix)	tabs 150mg
tranylcypromine (Parnate)	tabs 10mg
SSRIs (selective serotonin reuptake inhibitors)	
citalopram (Cipramil, Celexa)	tabs 10, 20, 40mg; liquid 40mg/ml (drops)
fluoxetine (Prozac)	caps 20, 60mg; liquid 20mg/5ml
fluvoxamine (Faverin, Luvox)	tabs(s) 50, 100mg
paroxetine (Seroxat, Paxil)	tabs(s) 20, 30mg; liquid 20mg/5ml
sertraline (Lustral, Zolofl)	tabs 50, 100mg
escitalopram (Cipralext, Lexapro)	tabs 5, 10(s), 20mg(s)
Others	
mirtazapine (Zispin, Remeron)	tabs(s) 30mg
nefazodone (Dutonin, Serzone)	tabs(s) 100, 200mg
reboxetine (Edronax, Vestra)	tabs(s) 4mg
venlafaxine (Efexor, Effexor)	tabs 37.5, 75mg
* tabs: tablets, (s) scored; caps: capsules; 5ml = 1 teaspoon	

Schedule 13 Notes:

Guidelines for benzodiazepine users who are also taking an antidepressant and wish to withdraw from both drugs

1. Complete the benzodiazepine withdrawal before starting to taper the antidepressant.
 2. Allow at least 4 weeks after stopping benzodiazepines before starting on antidepressant withdrawal.
 3. Consult your doctor before starting to withdraw the antidepressant and agree on a tapering schedule.
 4. Antidepressant withdrawal must be gradual to avoid withdrawal effects.
 - a. Make each dose reduction as small as possible, e.g. by halving the tablets or using a liquid preparation.
 - b. If smaller doses are not available, reduce by taking a tablet every other day, then every third day, etc.
 - c. Allow 1-2 weeks between each dosage reduction.
 - d. If withdrawal symptoms are severe (Chapter 3, [Table 2](#) – see below) increase the dosage slightly (e.g. to the dose at your last reduction). When symptoms have settled, resume withdrawal at a slower rate.
 5. With slow tapering, as outlined above, withdrawal symptoms from antidepressants are usually absent, or if they occur, are mild and short-lived.
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TABLE 2. ANTI DEPRESSANT WITHDRAWAL SYMPTOMS

PHYSICAL SYMPTOMS

Gastrointestinal: abdominal pain, diarrhoea, nausea, vomiting

Influenza-like: fatigue, headache, muscle pain, weakness, sweating, chills, palpitations

Sleep disturbance: insomnia, vivid dreams, nightmares

Sensory disturbances: dizziness, light-headedness, vertigo,
pins and needles, electric shock sensations

Motor disorders: tremor, loss of balance, muscle stiffness, abnormal movements

PSYCHOLOGICAL SYMPTOMS

Anxiety, agitation

Crying spells

Irritability

Overactivity

Aggression

Depersonalisation

Memory Problems

Confusion