Sertraline (Zoloft®)

What is it and why is it prescribed?

- Sertraline belongs to the family of medicines called selective serotonin reuptake inhibitors (SSRIs) and works by increasing the amount of serotonin in the brain. Serotonin is a chemical messenger involved in controlling many important bodily functions: sleep; aggression; eating; sexual behaviour; and mood.
- Sertraline is used to treat a wide range of mental health conditions, including but not limited to: unipolar depression (low mood); generalized anxiety disorder; social anxiety disorder; panic disorder; obsessive-compulsive disorder; post-traumatic stress disorder; and eating disorders.
- The overall goal of sertraline is to help individuals improve their ability to function and manage their mental health on a daily basis.
 - When treating depression, the goal of sertraline is to improve the control of low mood, sleep, appetite, energy level as well as interest in daily living activities.
 - When treating anxiety conditions, the goal of sertraline is to reduce anxiety, fear, unwanted thoughts, and panic attacks (both in terms of frequency and severity).
 - Sertraline may also reduce the urge to perform tasks repeatedly, such as compulsive hand-washing or counting or checking, that interfere with day-to-day living.

How should this medication be used?

- Sertraline is available as 25 mg, 50 mg, and 100 mg capsules.
- Sertraline should be taken with food. Typically, the dose is started as 25 mg or 50 mg once a
 day (either in the morning or evening) and increased gradually based on response and
 tolerability in 25 mg or 50 mg increments up to a dose of 200 mg/day. Doses above 200
 mg/day may be prescribed according to your mental status and your doctor's clinical
 judgement.
- When the dose is above 100 mg/day, we typically break dosing into twice a day administration. For example, when prescribed 200 mg/day the dose is usually given as 100 mg in the morning and 100 mg at night.

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When does sertraline start to work and how long should it be taken?

- Sertraline does <u>not</u> start working immediately; it has a delayed onset of response and may take 4 8 weeks, or sometimes longer, to achieve the desired response.
- The minimum duration of sertraline treatment for the first episode of depression is one year.
 For individuals with risk of depression recurrence such as chronic pain patients, the minimum duration of treatment is two years. For patients with multiple recurrent episodes of depression, treatment may be ongoing for more than two years.
- For long-term sertraline use for any indication, the dose should be maintained at the lowest effective dose and patients should be periodically assessed to determine the need for continued treatment.

What special precautions should I follow?

- Before using sertraline, talk to your doctor or pharmacist if you have thoughts of suicide or harming yourself. When sertraline is used to treat depression, some of the symptoms of depression can improve faster than others. If you are having thoughts of suicide and starting sertraline improves your energy level, but those thoughts haven't yet improved/disappeared, you may be at risk of carrying out those thoughts. It is important to talk with your health care providers about these situations so we can put a plan in place and support you to ensure your safety.
- Tell your doctor and pharmacist about all of the medications you take (prescription, non-prescription, herbals, over-the-counter products, etc.) so drug interactions can be minimized.
 This is especially important with sertraline because we want to avoid the use of too many medications that all work on serotonin.
- Do not take sertraline with a monoamine oxidase inhibitor (MAOI) or within 14 days of stopping a MAOI. This includes: antidepressants phenelzine, tranylcypromine, or moclobemide; Parkinson's disease medications selegiline or rasagiline.
- Never stop sertraline abruptly because doing so will make you feel like you have flu-like symptoms. If you don't want to continue with sertraline, it is best to slowly wean off the medication in a manner similar to how it was gradually started. Please talk to your prescriber for guidance.

What should I do if I forget a dose?

Take the missed dose as soon as you remember unless it is almost time for the next dose. In this case, skip the missed dose and continue your regular dosing schedule. Do **NOT** take a double dose to make up for a missed dose.

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What side effects can this medication cause?

Common side effects that often improve after a couple weeks of use:

- Headache, nausea, diarrhea, dry mouth, increased sweating
- Feeling nervous, restless, fatigued, sleepy or having trouble sleeping (insomnia)

Side effects that usually don't decrease over time and should be discussed with the prescriber:

 Sexual side effects (such as problems with low sex drive, orgasm, ejaculation, or erectile dysfunction) can happen with a variety of antidepressant medications, including sertraline.

Less common, but serious side effects:

 Low sodium levels in the blood (hyponatremia), which may present with the following symptoms: headache; weakness; and difficulty concentrating and remembering. This condition is more likely to happen in older patients and those taking other medications that can lower the sodium levels (such as diuretics or "water pills").

Inform your doctor immediately if you notice:

Symptoms of serotonin syndrome, a condition where there is too much serotonin –
typically due to a drug interaction. Symptoms include: shivering; overactive reflexes
(twitching/muscle jerks); increased body temperature; changes in blood pressure/heart
rate/breathing; agitation/restlessness; and sweating.

Your doctor prescribed this therapy because he/she has judged the benefit to you is greater than the risk of side effects. Many people using this therapy do not have serious side effects.

What storage conditions are needed for this medication?

Keep this medication in the container it came in, tightly closed, and out of reach of children. Store at room temperature, away from excess heat/moisture (not in the kitchen or bathroom).

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