

Depression and Its Impact in Hepatitis C Infection

Medications for Depression

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- Most drugs for depression work by steadying levels of serotonin, a brain chemical that carries information from one nerve cell to another (a “neurotransmitter”). Low levels of serotonin have been linked to depression and other mood problems.
- There are a number of different drugs for depression. Your medical care provider will discuss these and help select one that should work well for you.
- There is no way to know absolutely which drug will work best for a patient, so doctors usually start with a commonly-used drug that has few side effects.
- Medications may relieve many of the symptoms of depression, but they are not a cure. Some people take them for about six months and are able to stop, while others need to take them for longer. It is important not to stop or to change the dose of an antidepressant without talking to your provider.
- If symptoms have not been sufficiently reduced after 6 - 8 weeks, a change in dose or a change to a different medicine may be necessary. Patients on antidepressant therapy need to speak with their providers frequently to assess their response to the drug.
- Antidepressants are not habit forming and are not “uppers”.
- Medications for depression don’t work immediately. Most people feel some improvement in 1 - 3 weeks, but for some it may take 6 weeks or longer. Some symptoms, like difficulty sleeping, may go away before others.
- The most commonly used class of medications for depression is the selective serotonin reuptake inhibitors (SSRIs), which include Prozac, Zoloft[®], Celexa[®], and Paxil[®]. SSRIs are well tolerated, but often cause mild stomach upset and headache. These symptoms usually disappear after 1 - 2 weeks. Occasionally sexual side effects can occur. You should talk to your provider about these symptoms and any other symptoms that are bothering you. Most of the time your provider will be able to help with these symptoms without stopping the medication.