

Comparison of Commonly Used Antidepressants
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-Based on U.S. Prescribing Information and Other Related Sources-

Generic Name/ Brand Name	FDA-Approved	Daily Dose, ² mg ^b	Adverse Effects ^{3,b,c,d}					CYP Inhibition ^{2,e}	Additional Information
	Indications ^a (Unapproved but common uses) ¹							Concurrent administration of an antidepressant with a monoamine-oxidase inhibitor is contraindicated.	
Anticholinergic Arrhythmias Sedation Weight Gain									
Dopamine Reuptake Blocking Agents									
Bupropion/ <i>Wellbutrin</i> <i>Wellbutrin XL</i> <i>Wellbutrin SR</i> <i>Zyban</i> ⁴	Depression Nicotine dependence Smoking cessation (ADHD Bipolar Disorder)	200 to 450	--	+	--	--	Moderate inhibitor of CYP 2D6	-Contraindicated in patients with or at an increased risk of seizures	
Noradrenergic Antagonist									
Mirtazapine/ <i>Remeron</i> ⁵	Depression	30 to 60	+	--	+++	+++	No significant CYP inhibition	-Administer dose at bedtime	
Selective Serotonin Reuptake Inhibitors ^f									
Citalopram/ <i>Celexa</i> ⁶	Depression (<i>Obsessive-compulsive disorder</i> <i>Panic disorder</i>)	20 to 60	--	--	--	+	Moderate inhibitor of CYP 2D6 at higher doses	-Administer a reduced dose (20 mg daily) to the elderly and those with hepatic impairment	
Escitalopram/ <i>Lexapro</i> ⁷	Depression Generalized anxiety disorder	10 to 20	--	--	--	+	Moderate inhibitor of CYP 2D6 at higher doses		
Fluoxetine/ <i>Prozac</i> <i>Sarafem</i> ^{8,9}	Adults Depression Obsessive-compulsive disorder Bulimia Panic disorder Premenstrual dysphoric disorder (<i>Anorexia nervosa</i> <i>Bipolar disorder</i> <i>Premenstrual syndrome</i>) <i>Pediatrics</i> Depression Obsessive-compulsive disorder	Adults 20 to 80 Pediatrics 10 to 60	--	--	--	+	Potent inhibitor of CYP 2D6 and 3A4	-Use with thioridazine (<i>Mellaril</i>) is contraindicated - Discontinue fluoxetine 7 days prior to starting weekly fluoxetine. Administer a reduced dose to the elderly and those with hepatic impairment	
Fluvoxamine/ <i>Luvox</i> ¹⁰	Adults Obsessive-compulsive disorder (<i>Depression</i>)	Adults 100 to 300	--	--	--	+	Potent inhibitor of CYP 1A2, 2C19, 3A4	-Use with thioridazine and pimozide (<i>Orap</i>) is contraindicated	

Fluvoxamine/ <i>Luvox</i> ¹⁰	Adults Obsessive- compulsive disorder (<i>Depression</i>)	Adults 100 to 300	--	--	--	+	Potent inhibitor of CYP 1A2, 2C19, 3A4	-Use with thioridazine and pimozide (<i>Orap</i>) is contraindicated
	<i>Pediatrics</i> Obsessive- compulsive disorder	Pediatrics 50 to 300						
Paroxetine/ <i>Paxil</i> ¹¹ <i>Paxil</i> <i>CR</i> ¹²	Depression Obsessive- compulsive disorder Panic disorder Social anxiety disorder Generalized anxiety disorder Post- traumatic stress disorder Premenstrual dysphoric disorder	20 to 50 25 to 62.5	+	--	+	++	Potent inhibitor of CYP 2D6	-Use with thioridazine (<i>Mellaril</i>) is contraindicated - Administer a reduced dose (20 mg daily) to the elderly and those with hepatic or severe renal impairment
Sertraline/ <i>Zoloft</i> ¹³	Adults Depression Obsessive- compulsive disorder Panic disorder Post- traumatic stress disorder Premenstrual dysphoric disorder Social anxiety disorder	Adults 100 to 200	--	--	--	+	Moderate inhibitor of CYP 2D6 at higher doses	-Use with thioridazine (<i>Mellaril</i>) and pimozide (<i>Orap</i>) is contraindicated -Administer a reduced dose to the elderly and those with hepatic impairment
	<i>Pediatrics</i> Obsessive- compulsive disorder	Pediatrics 25 to 200						
Serotonin Norepinephrine Reuptake Inhibitors								
Duloxetine/ <i>Cymbalta</i> ¹⁴	Depression Pain associated with diabetic peripheral neuropathy	40 to 60	--	--	+	--	Inhibits CYP 2D6	-Contraindicated in patients with uncontrolled narrow-angle glaucoma
Venlafaxine/ <i>Effexor</i> ¹⁵ <i>Effexor XR</i> ¹⁶	Depression Generalized anxiety disorder Social anxiety disorder	150 to 375 75 to 225	+	+	+	--	No significant CYP inhibition	-Blood pressure can increase - Reduce starting dose by 50% in moderate hepatic impairment - Reduce daily dose by 25% to 50% in hemodialysis patients
Tricyclic Antidepressants								
Amitriptyline/ <i>Elavil</i> ^{17,18}	Depression (<i>Bulimia nervosa Neuralgia</i>)	100 to 300	++++	+++	++++	++++	No significant CYP inhibition	-Can cause arrhythmias in patients with cardiovascular disorders
Desipramine/ <i>Norpramine</i> ¹⁹	Depression (<i>Anxiety Bulimia nervosa Panic disorder Premenstrual syndrome</i>)	100 to 300	+	++	++	+	May inhibit CYP 2D6	-Contraindicated in the acute recovery period following myocardial infarction -Reduce the dose in adolescents and the elderly -Prolongation of the QRS or QT interval can occur at higher doses
Doxepin/ <i>Sinequan</i> ²⁰	Depression	100 to 300	+++	++	++++	++++	No significant CYP inhibition	-Drowsiness is common; patients should be warned

	disorder Premenstrual syndrome)								causality. A prolongation of the QRS or QT interval can occur at higher doses
Doxepin/ Adapin ^{17,20} Sinequan	Depression and/or anxiety Depression and/or anxiety associated with alcoholism or organic disease (Anxiety, Neuralgia)	100 to 300	+++	++	++++	++++	No significant CYP inhibition	-Drowsiness is common; patients should be warned	
Imipramine/ Tofranil ^{17,22} Tofranil PM ^{21,22}	Adults Depression (Anxiety Bulimia nervosa Panic disorder) Pediatrics Childhood enuresis	100 to 300 25 to 75	+++	+++	+++	++++	No significant CYP inhibition	-Optimal plasma levels are 200 to 300 ng/mL -Administration following a myocardial infarction is contraindicated - Reduced doses (30-100 mg daily) are recommended for adolescents and the elderly	
Nortriptyline/ Aventyl ^{17,23} Pamelor	Depression (Smoking cessation)	50 to 150	++	++	++	+	No significant CYP inhibition	-Use with thioridazine (Mellaril) is contraindicated - Optimal plasma levels are 50 to 150 ng/mL -Recommended dose for elderly and adolescent patients is 30 to 50 mg/day	
Serotonin-2 Receptor Antagonists									
Nefazodone/ Serzone ²⁴	Depression (Panic disorder)	300 to 600	+	--	+	--	Potent inhibitor of CYP 3A4	-Concomitant use with pimozide (Orap) and carbamazepine (Tegretol) is contraindicated-Concomitant use with triazolam (Halcion) is not recommended; decrease triazolam dose by 75% if given with nefazodone -Life- threatening hepatic failure has occurred with nefazodone administration	

^aIndications are for adults unless otherwise stated. ^bDiscontinuation symptoms can occur when antidepressant medications are abruptly stopped. This may be more problematic for drugs with short half-lives such as paroxetine and venlafaxine. However, symptoms can occur when drugs with longer half-lives are stopped such as fluoxetine. Current recommendations are to taper antidepressant doses over several weeks to two to three months. ^{8c} -- to +, absent or rare to relatively common. ^dSexual dysfunction can occur with antidepressant therapy. Bupropion, nefazodone, mirtazapine, and amitriptyline are reported to cause the least amount of sexual dysfunction. ^{2,25 e} Cytochrome P450 (CYP): CYP 2D6 substrates include nortriptyline, amitriptyline, imipramine, propafenone (Rythmol), and flecainide (Tambocor); CYP 1A2 substrates include warfarin (Coumadin), theophylline (TheoDur), and propranolol (Inderal); CYP 3A4 substrates include amlodipine (Norvasc), atorvastatin (Lipitor), azole antifungals, carbamazepine (Tegretol), cisapride (Propulsid), cyclosporine, erythromycin, estrogens, oral contraceptives, felodipine (Plendil), HIV protease inhibitors, lovastatin (Mevacor), nefazodone (Serzone), nifedipine, quinidine, sertraline (Zoloft), sildenafil (Viagra), tamoxifen (Nolvadex), verapamil, warfarin (Coumadin), and others. Note: Many of these agents are also CYP substrates and interact with other substrates and inhibitors. See our [Detail-Document #150400](#) for more information. ^fThe selective serotonin reuptake inhibitors (SSRI) can cause the serotonin syndrome. Recommendations are to discontinue SSRI therapy and provide supportive therapy. ²