

SSRI Medications for Depression and Anxiety

(Selective Serotonin Re-Uptake Inhibitors)

My Experience

I am often asked about medication for those experiencing depression and anxiety. Although I am not a physician (I am a psychologist) and I do not prescribe medication, I am quite informed as a fair number of my clients take SSRIs to their great relief. If you are considering this route for your wellbeing, you will need to become something of an expert and this brief introduction is to help you get started. Please remember to inform your physician of your emotional needs so that (s)he can assist you effectively.

By the way, most of this information is from some the best websites on the topic. Much of the information is complicated and I have attempted to make it more sensible and readable.

Introduction to SSRIs

SSRI antidepressants, often known simply as SSRIs, are a class of commonly prescribed antidepressants. They are designed to raise levels of a brain chemical called serotonin, which can have a positive effect on mood over time. They are usually considered to be safer and have fewer side effects than older antidepressants. Some of the more common SSRI antidepressants are marketed as Prozac®, Zoloft®, and Celexa®.

The primary effect of SSRIs is to increase the amount of available serotonin in the brain. This is accomplished by partially preventing brain cells from reabsorbing serotonin thus decreasing the flow of the natural chemical in your brain. The increased amount of serotonin is thought to be partially responsible for the better mood that often results. This action is reflected in the drugs' full name, selective serotonin re-uptake inhibitors.

SSRI antidepressants begin to affect serotonin levels in the brain within a few hours of ingesting. They don't, however, have an immediate effect on mood. It usually takes between four and eight weeks for SSRIs to have an effect on your mood. It's not exactly known why this is this case, but it can have a discouraging effect for some people taking SSRI antidepressants. It's recommended that they allow one to two months to see an improvement in mood before trying a different medication.

However, some can have uncomfortable side effects while taking their medication. It is important, if this occurs, to contact your medical doctor as soon as possible. You may also wish to contact me (email is best – paddy@theducklows.ca) so that I can consult with you on your experience.

Although all SSRIs are chemically similar drugs, they have different effects. If one SSRI doesn't have a mood-enhancing effect for an individual, another still could. Some SSRIs are also approved to treat anxiety disorders that occur alone or along with depression. In fact, many therapists recommend SSRIs regularly for the treatment of anxiety and concomitant frustration, anger and isolation, among other symptoms.

Side Effects

SSRIs are usually well tolerated by the body, but can cause some unpleasant side effects. Some more common side effects include dizziness or faintness, drowsiness, and changes in weight (some patients

have a significant reduction in weight). Some of the SSRIs have an effect in decreasing libido and general sexual responsiveness and this can cause some challenge in couple relationships.

It is important to note that SSRIs have been linked to worsening depression and suicidal thoughts (note: not behaviours) in teenagers and also young adults less than the age of 25. In the United States, they have been required to carry a warning explaining this risk.

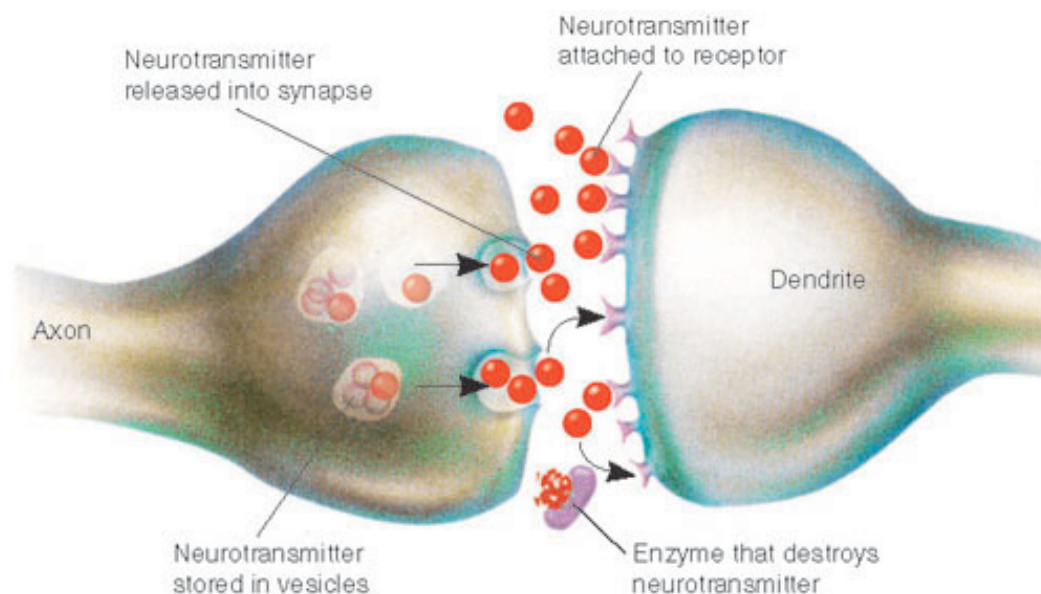
People who are taking SSRI antidepressants shouldn't stop taking them without their doctor's knowledge or advice. Suddenly stopping SSRI use can cause antidepressant withdrawal. This condition can cause headaches and nausea, anxiety, and worsening symptoms of depression. Gradually reducing SSRIs use with a doctor's supervision makes withdrawal less likely.

A bit of a personal comment here: I have seen wonderful effects with my clients who are taking SSRIs for depression and/or anxiety. I have also seen where the use of these medications has caused emotional calamities for them and this is often induced by quick termination of the medication. It seems paradoxical to eliminate the medication slowly when one wants to stop in all together. Make sure that you are speaking to your physician and (again) please contact me to consult with you.

Serotonin

The human nervous system is made up of the brain, spinal cord and nerves, all of which are made of nerve cells. The nervous system controls all life functions – thinking, feeling, moving, breathing, heart beating, digestion -- every bodily or mental activity is controlled by the nervous system.

The nerve cells manage all of this activity through the actions of neurochemicals within the cells and in the space between cells. I think of this as “brain goop.” Scientists probably haven't identified all of the neurochemicals, but several that are important in mood and anxiety are serotonin, norepinephrine, dopamine, histamine and acetylcholine. Serotonin seems to have the most effect on mood, although norepinephrine and dopamine also have a role. You may wish to Google these names but make sure you are looking at a qualified web site (e.g. the Mayo Clinic).



In the body, serotonin regulates the gastrointestinal tract and blood vessels. In the brain and spinal cord it controls movement, pain perception and appetite and controls body functions.

Serotonin is released into the "synaptic cleft" (space) between two nerve cells. It binds to specific receptors on the receiving (post-synaptic) cell much like a key fits into a lock. About 10% of the serotonin that is released reaches the post-synaptic receptor sites; the other 90% is reabsorbed by the sending (pre-synaptic) cell using monamine transporters (substances that carry the serotonin back into the cell).

SSRI medications prevent serotonin from being carried back into the originating cell; this allows the serotonin to accumulate in the synaptic cleft so that more of it reaches the postsynaptic cell. (This is a simplified explanation and many other processes are involved.)

Depression and anxiety are thought to be caused by an inadequate amount of serotonin in the synaptic cleft; SSRI's help by increasing it. SSRI's are selective for serotonin; that is, they work on serotonin and have little effect on other neurotransmitters. Most of the side effects of SSRI's are, however, related to their effect on acetylcholine and histamine.

Uses for SSRI's

SSRI antidepressants are effective in treating depression and anxiety. They are also useful in treating other problems:

- Panic disorders
- Obsessive compulsive disorder
- Chronic pain
- Eating disorders
- Premature ejaculation
- Irritable bowel syndrome
- Some personality disorders

Common Side Effects

Almost everyone who takes an SSRI has some side effects. These most frequently occur in the first few weeks you take the medication, and they often go away in a short while. Most side effects are mild to moderate in severity. Severe and serious side effects can occur, however, and you should let your doctor know about any problems you have. The side effects that most often occur with SSRI's are:

- Dry mouth, constipation
- Nausea, vomiting, upset stomach, abdominal cramps, diarrhea
- Headache
- Grinding your teeth, especially at night
- Nightmares
- Dizziness
- Dizziness / fainting when you standing
- Changes in appetite and weight
- Injuries and bone fractures
- Decrease in sexual desire
- Difficulty in achieving an orgasm, delayed ejaculation, impotence
- Nervousness, restlessness, anxiety
- Sweating
- Tremors, twitches or seizures
- Suicidal thoughts
- Depersonalization

Drug Interactions

SSRI antidepressants can interact with many different drugs, and the list may be slightly different for different drugs. In general, medications that may interact with SSRIs include:

- Any and all other antidepressants
- Certain pain medications
- Seizure medications
- Antipsychotic medications
- Some heart medications
- Some illicit drugs, specifically amphetamines, methamphetamines, MDMA (ecstasy), LSD, cocaine

Again, a warning: it makes no sense in taking SSRIs without thoroughly talking to your medical doctor about the possible interactions between your current medications and the SSRI you are considering. If a friend suggests an antidepressant that he or she uses, it might have a positive effect for you. However, your friend or relative may not be taking other medications that you are currently ingesting. Not one medication is the right medication for all people. All peoples' brain goop is different.

Alternative or Additional Treatments

Mild and moderate depression can often be treated without medication, with some lifestyle changes and persistence. If depression seems to worsen or does not seem to be improving, it is important to visit a medical doctor or psychiatrist, who may then be able to prescribe antidepressants or offer other treatment methods such as psychological therapy. Treating depression without medication, though, is often possible with a focused exercise and eating plan designed to stabilize the mood and release endorphins into the brain on a regular basis.

The “gold standard” for treating depression and anxiety includes psychotherapy or personal counselling. Supportive therapy and cognitive-behavioural therapy have been equally demonstrated to be effective in treating anxiety, depression, fears, phobias, self-esteem and other emotional disorders.

Aerobic exercise is one of the most effective ways of treating depression without medication or as a helpful supplement to antidepressants. It can be difficult for people who are depressed to get the motivation to go outside and exercise, but even a 30 minute walk every day can make a huge difference. Any activity that gets the heart rate up can also help to release mood-boosting endorphins in the brain, which can help to relieve depression symptoms.

Sunlight and vitamin D can also help to treat depression without medication. In the winter, taking a vitamin D supplement can be beneficial; other times of year, just spending ten minutes in the sun per day can help to improve depression as well. Exercise and sunlight can also help you to get enough sleep at night. Being sure to get enough sleep every night is another one of the more effective ways to treat depression without medication; it is best to get at least eight hours, and to try to get up at the same time every day.

The foods you eat can also be a way to treat depression without medication. Some people find that refined sugars and caffeine, for instance, contribute greatly to feelings of stress, anxiety, and depression. Alcohol (wine included) can work against the medication and increase depression. Many also give up wheat products and claim a relief in depression symptoms. Switch instead to whole foods such as vegetables and fruits and nuts, and be sure to get a smaller amount of protein and non-wheat grains in the diet every day. A multivitamin can also help to fill in any nutritional gaps in the diet.

Many relaxation techniques such as meditation, yoga, prayer or journaling can often help to treat depression. Spending time with friends and family may also help with depression (though sometimes this works to increase depression depending on the people!).

Be patient while treating depression, but again, if the depression does not improve, seek professional help. There is no shame in visiting a doctor, psychologist, or psychiatrist for treatment. Often, depression can have an underlying medical cause such as a thyroid condition, and no amount of healthy eating and willpower would have made it go away on its own.

It can be helpful to do some online research about depression and attempt to figure out how your emotions affect your life. Also, please go onto my web site to view inventories and other resources for factors in your emotional life.

Reading recommendations:

- Feeling Good: The New Mood Therapy by David Burns
- Mind Over Mood: Change the Way You Feel by Changing the Way You Think by Dennis Greenberger and Christine Padesky

A resource that you might wish to view is: <http://hyperboleandahalf.blogspot.ca/2013/05/depression-part-two.html>.

You can find the books at Amazon.ca or at Chapters / Indigo. It is better to purchase the Mind Over Mood in a book format (rather than an e-book) as it is a manual for your thinking and writing. Feeling Good can be had as an e-book and perhaps freely borrowed from your library in a Kindle / Kobo format.

If you wish other recommendations, please contact me. Or if you have recommendations for me, please let me know.

Finally...

Enduring depression is both great courage and great foolishness. If you have been depressed “all your life,” maybe you should do something about it. If you are married or have children, they will be grateful. Many of us don’t like taking medication for anything and some of us feel that we are moral failures if we need glasses to read the newspaper. And treatment is never perfect or without complications. But doing nothing and justifying this with foolish excuses is foolishness. Time to change. (Enough from me.)