## Drug Information Table

### Therapeutic Use

- Major depression
- Bipolar disorder
- Panic disorder
- Obsessive compulsive disorder (OCD)
- Premenstrual dysphoric disorder
- Bulimia nervosa

### Administration

- Give orally in tablets, capsules, solution, or sustained-release weekly capsules (fluoxetine).
- Recognize that it may take 4 to 6 weeks to reach clinical effectiveness.
- Administer with food if gastrointestinal upset occurs.
- Give in the morning to prevent sleep disruption.

### Side/Adverse Effects

- Insomnia, nervousness: Monitor for these effects; decreased dosage may relieve symptoms.
- Sexual dysfunction: Monitor for this effect. Reducing dosage or changing antidepressant drugs may relieve this effect.
- Headache: Monitor for headache and worsening intensity.
- Weight gain: Monitor weight weekly throughout therapy.
- Hyponatremia (especially in older adults and those taking diuretics): Monitor serum sodium periodically. Observe for signs of hyponatremia, such as lethargy, abdominal cramps, diarrhea, and nausea.
- Increased risk for suicidal ideation (especially children, young adults): Monitor for increased depression/suicidal ideation.
- Serotonin syndrome: Monitor for mental confusion, difficulty concentrating, fever, agitation, anxiety, hallucinations, incoordination, hyperreflexia, diaphoresis, and tremors. Discontinue the drug.

### Interventions

- Insomnia, nervousness: Report these effects. Take the drug in the morning to avoid interference with sleep.
- Sexual dysfunction: Report impotence and decreased libido.
- Headache: Report headache. Take over-the-counter analgesics as needed.
- Weight gain: Eat a healthful diet and increase exercise.
- Increased risk for suicidal ideation: Understand that this is a risk. Report any worsening of depression or thoughts of suicide.
- Serotonin syndrome: Report increased anxiety, fever, excessive sweating, tremors, and hallucinations. Stop taking the drug.

### Precautions

- Allergy to any SSRI drug
- Children younger than 7 to 8 years (fluoxetine).
- Use with MAOIs
- Liver disease
- Older adults
- Peptic ulcer disease
- Diabetes mellitus (may decrease glucose control)
- Hyponatremia
- Cardiac disease
- Suicidal tendencies

### Contraindication

- Taking an SSRI within 2 weeks of MAOIs or another SSRI increases the risk of serotonin syndrome.
- Fluoxetine increases levels of tricyclic antidepressants and lithium.
- NSAIDs increase the risk of gastrointestinal bleeding.