

# Antidepressants

This factsheet gives information about antidepressants. They can help with different mental health problems, including low mood, depression, and anxiety. This information is for adults affected by mental illness in England. It's also for their loved ones and carers and anyone interested in this subject.

## Key Points.

- Antidepressant medications are used to treat depression, anxiety and other mood disorders.
- There are different types of antidepressants. Your doctor will work with you to find the one that works for you.
- You may get side effects from antidepressants. Talk to your doctor if you get any that cause you problems.
- You may get withdrawal symptoms when you stop taking antidepressant medication. Talk to your doctor before you stop taking them, even if you feel better. They'll advise you on the best way to stop the medication.
- Antidepressants can affect other medications, so tell your doctor about anything else you're taking.
- Alcohol can have an effect on your antidepressants, depending on which type you are taking.
- It is a good idea to speak to your doctor about driving and operating heavy machinery if your antidepressants make you feel drowsy.
- Antidepressants can have an effect on other aspects of life, e.g., sex, pregnancy and breastfeeding.

### This factsheet covers:

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3. [Are there any side effects?](#)
4. [What if I want to stop taking antidepressants?](#)
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## 1. What are antidepressants?

Antidepressants are a group of medications used to treat low mood and depression. There are different types of antidepressants. They can also help if you have other mental health problems, including:<sup>1,2</sup>

- Anxiety,
- Phobias,
- Obsessive compulsive disorder (OCD),
- Post-traumatic stress disorder (PTSD),
- Panic Disorder, and
- Other health conditions, such as chronic pain.

Scientists think that antidepressants work by increasing levels of certain chemicals in your brain that are linked to mood and emotion.<sup>3,4</sup>

Antidepressants can be taken in different ways. They are usually taken as tablets. But can also come in different forms. Such as liquid, capsules, or dispersible tablets. Talk to your doctor if you struggle to swallow tablets.

Antidepressants should start to work within 2-3 weeks.<sup>5</sup>

There is no set time for how long you should take antidepressants. Your doctor may ask you to take your antidepressants for 6 months after your symptoms are gone.<sup>6</sup> Or 12 months if you are taking antidepressants for Generalised Anxiety Disorder<sup>7</sup>. This can help stop your symptoms coming back. Your doctor will work out how much you should take, and for how long.

## Are there treatments for depression other than antidepressants?

Antidepressants aren't the only option available to treat depression. Other treatments you might be offered include:<sup>8</sup>

- physical activity programmes,
- one to one talking therapy or in a group,
- light therapy,
- guided self-help,
- behavioural activation,
- mindfulness and meditation, and
- individual problem-solving.

Some people choose to:

- just take antidepressants,
- take antidepressants together with other forms of treatment or therapy, or
- just use other forms of treatment or therapy.

You can find out more about these treatments, and what you should be offered, in our information about '**Depression**' at [www.rethink.org](http://www.rethink.org). Or call

our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 2. Are there different types of antidepressants?

All antidepressants work in different ways. One type of antidepressant may suit you more than another. Here, we give an overview of the different types.

### Selective serotonin reuptake inhibitors (SSRIs)

The NHS say most people will only experience a few mild side effects when taking SSRIs.<sup>9</sup>

There are currently 8 SSRIs prescribed in the UK:<sup>10</sup>

Medication name	Brand name
Citalopram	Cipramil
Escitalopram	Cipralex
Fluoxetine	Prozac or Oxactin
Fluvoxamine	Faverin
Paroxetine	Seroxat
Sertraline	Lustral
Dapoxetine	Priligy
Vortioxetine	Brintellix

### Serotonin-norepinephrine reuptake inhibitors (SNRIs)

SNRIs are similar to SSRIs.<sup>11</sup>

Examples of SNRIs include:<sup>12</sup>

Medication name	Brand name
Duloxetine	Cymbalta, Yentreve
Venlafaxine	Efexor

### Tricyclic antidepressants (TCAs)

TCAs are an older type of antidepressant, and generally have more side effects than other ones. For this reason, doctors will try a different type of antidepressant before this one.<sup>13</sup>

Below is a list of TCAs:<sup>14</sup>

Medication name	Brand name
Amitriptyline	
Clomipramine	
Doxepin	Xepin <sup>15</sup>
Imipramine	
Lofepramine	
Dosulepin	Prothiaden or Dothiepin <sup>16</sup>
Nortriptyline	
Trimipramine	

### Monoamine oxidase inhibitors (MAOIs)

MAOIs are an older type of antidepressant and the NHS say:<sup>17</sup>

- they're rarely prescribed nowadays, and
- they can cause potentially serious side effects so should only be prescribed by a specialist doctor.

If your doctor prescribes you this medication: <sup>18</sup>

- they should monitor you to see how they affect you,
- you can't eat certain foods, and
- they should give you information about the side effects, risks and what you can't eat.

If you take an MAOI your doctor may advise you to avoid tyramine. This is present in some foods and can cause potentially serious side effects when taken with MAOIs. Such as elevated blood pressure and a fast heart rate<sup>19</sup>. You can download an NHS patient guide to food and MAOIs [here](#).

MAOIs include: <sup>20</sup>

Medication name	Brand name
Isocarboxazid	
Phenelzine	Nardil
Tranylcypromine	
Moclobemide	Manerix

### Other medication

Below is a list of other antidepressant medications used to treat mental health conditions.

Medication name	Brand name
Mirtazapine <sup>21</sup>	Zispin
Trazodone <sup>22</sup>	Molipaxin
Reboxetine. <sup>23</sup>	Edronax
Mianserin hydrochloride. <sup>24</sup>	

### 3. Are there any side effects?

Different antidepressants will have different side effects. The newer types of antidepressants should have fewer side effects than the older ones. People can have different reactions to medication.

You should get a patient information leaflet with your medication. This leaflet will tell you all the possible side effects you might get. You can get patient information leaflets by searching for the medication on this website:

[www.medicines.org.uk/emc](http://www.medicines.org.uk/emc)

The table below tells you about some of the common or widely known side effects of different types of antidepressants.

Common or widely known side effects	
SSRIs <sup>25</sup>	<ul style="list-style-type: none"><li>• Feeling or being sick</li><li>• Problems sleeping</li><li>• Feeling anxious</li><li>• Headaches</li><li>• Diarrhoea</li><li>• Dizziness</li><li>• Loss of sex drive</li><li>• Difficulty reaching an orgasm</li><li>• Difficulty obtaining or maintaining an erection</li></ul>
SNRIs	<ul style="list-style-type: none"><li>• Same as SSRIs<sup>26</sup></li><li>• Increased blood pressure<sup>27</sup></li></ul>
Tricyclic Antidepressants <sup>28</sup>	<ul style="list-style-type: none"><li>• Dry mouth</li><li>• Blurred vision</li><li>• Drowsiness</li><li>• Weight gain</li><li>• Constipation</li></ul>
MAOIs <sup>29</sup>	<ul style="list-style-type: none"><li>• Dizziness</li><li>• Drowsiness</li><li>• Dry mouth</li><li>• Constipation</li><li>• Hallucinations</li><li>• Headaches</li><li>• Insomnia</li></ul>

If you get these symptoms, you can talk to your doctor. They may be able to change your dosage or medication.

Sometimes, very rarely, antidepressants can cause dangerous side effects. Your doctor will tell you about these risks, and what to look out for. Here is an overview of the most serious side effects people can rarely experience.

### **Serotonin Syndrome**

Serotonin is a chemical produced in your body. Research shows there is a link between low levels of serotonin and low mood<sup>30</sup>. Serotonin syndrome is a serious condition that happens when the serotonin chemical in your brain is too high<sup>31</sup>. It can happen if you take an SSRI or SNRI with something else that raises serotonin levels. Such as St John's Wort. Symptoms of serotonin syndrome can include<sup>32</sup>:

- Confusion
- Muscle twitching
- Sweating
- Shivering
- Diarrhoea
- Seizures
- A heartbeat that is too fast
- Unconsciousness

If you think you may be experiencing serotonin syndrome you should call 999 straightaway.

### **Hyponatraemia**

Hyponatraemia happens when the salt levels in your body are dangerously low. This can happen to people who take SSRIs<sup>33</sup>. This is because SSRIs can sometimes stop your body from regulating your salt and fluid levels. This is more likely to happen to elderly people<sup>34</sup>.

Mild hyponatraemia is not usually dangerous. But, if you think you are experiencing this, you should contact your GP. You may need to stop taking your SSRI. Mild symptoms of hyponatraemia include<sup>35</sup>:

- Nausea and tummy upsets
- Headaches
- Muscle pain
- Lack of appetite
- Confusion

If you do not treat mild hyponatraemia it can become more serious. Symptoms of serious hyponatraemia include<sup>36</sup>:

- Feeling very tired
- Confusion
- Seizures
- Feeling agitated or restless
- Psychosis

If you think you may be experiencing severe hyponatraemia, you should call 999 straightaway.

### Suicidal thoughts

Sometimes people experience an increase in suicidal thoughts when they start taking antidepressants. This is more common amongst young people under 25.<sup>37</sup> These thoughts usually go away once the body gets used to the medication. But it may be helpful to talk to your friends, family, or health care team about how to cope with these thoughts.

You can find out more information about '**Suicidal thoughts – how to cope**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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### 4. What if I want to stop taking antidepressants?

It's important you don't stop taking antidepressants suddenly. That's because you can get withdrawal symptoms.<sup>38</sup>

You should talk to your doctor before stopping your medication. They can help you to reduce the dose slowly. This can help lessen any withdrawal symptoms.

The longer you've been taking antidepressants, the longer it might take to reduce the dose to withdraw.

People can respond to coming off antidepressants differently. Some people will have no withdrawal symptoms, but others will. Some common and occasional withdrawal symptoms are shown in the table below.

### Common and occasional antidepressant withdrawal symptoms

Antidepressant	Common	Occasional
SSRIs <sup>39</sup>	<ul style="list-style-type: none"><li>• Stomach trouble</li><li>• Anxiety</li><li>• Numbness</li><li>• Ringing in your ears</li><li>• Fatigue</li><li>• Dizziness</li><li>• Problems sleeping</li><li>• 'Shock-like' feelings</li><li>• 'Flu-like' symptoms like nausea, headaches, chills and sweating</li></ul>	<ul style="list-style-type: none"><li>• Heart racing</li><li>• Visual disturbances</li></ul>
SNRIs <sup>40</sup>	<ul style="list-style-type: none"><li>• Stomach trouble</li><li>• Headaches</li><li>• Anxiety</li><li>• Dizziness</li></ul>	

	<ul style="list-style-type: none"> <li>• Numbness</li> <li>• Tremors</li> <li>• Sweating</li> <li>• Disrupted sleep</li> </ul>	
Tricyclic Antidepressants <sup>41</sup>	<ul style="list-style-type: none"> <li>• Feeling dizzy</li> <li>• Sick</li> <li>• Numbness or tingling in the hands or feet</li> <li>• Trouble sleeping</li> <li>• Feeling agitated or anxious</li> <li>• Headaches</li> <li>• Shaking</li> </ul>	
MAOIs <sup>42</sup>	<ul style="list-style-type: none"> <li>• Feeling irritable or agitated</li> <li>• Drowsiness</li> <li>• Problems sleeping</li> <li>• Vivid dreams</li> <li>• Slowed speech and a lack of muscle co-ordination.</li> </ul>	<ul style="list-style-type: none"> <li>• Hallucinations</li> <li>• Delusions</li> </ul>

If you get withdrawal symptoms it doesn't mean you can't stop the medication. You might need to withdraw slowly over a longer period.<sup>43</sup>

Antidepressants that are usually prescribed by the NHS aren't addictive,<sup>44</sup> but your body can become used to them.

You can find more information on stopping antidepressants from the Royal College of Psychiatrists here: [www.rcpsych.ac.uk/mental-health/treatments-and-wellbeing/stopping-antidepressants](http://www.rcpsych.ac.uk/mental-health/treatments-and-wellbeing/stopping-antidepressants)

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## 5. Can other medication, illegal drugs, and food affect antidepressants?

You should tell your doctor or pharmacist about any medicines you take before you start or stop other medications. This is because different medications taken together can affect each other.

You should tell them about:

- other medication that has been prescribed to you for your physical or mental health issues,
- any herbal or complementary medicines you take, including St John's Wort, and
- any over-the-counter medication you take, especially ibuprofen.<sup>45</sup>

You can read through the patient information leaflet provided with your medicine before you start taking it. The leaflet is normally in the box that

the medication comes in. You can also find medicine leaflets online, on the electronic Medicines Compendium at [www.medicines.org.uk](http://www.medicines.org.uk).

### **Can illegal drugs affect me if I take antidepressants? <sup>46</sup>**

The NHS say the use of illegal drugs isn't recommended if you're taking antidepressants. Especially if you're taking a tricyclic antidepressant (TCA). This is because they can cause bad effects.

The NHS say you should especially avoid taking:

- cannabis, especially if you take TCA, as it can make you feel very ill
- amphetamines, also known as speed
- cocaine
- heroin
- ketamine

Illegal drugs can make symptoms of depression or other mental health conditions worse.

It is best to talk to your doctor about any illegal drugs you are taking.

You may be worried about talking to your doctor about your drug use. But doctors are used to talking to people about drug use. And they should keep the information confidential.

They can tell you about the risks of taking the drug while on antidepressants. If you want to stop taking the drug or take less of it, they should be able to advise you on support.

### **Do any foods affect antidepressants?**

Some foods may affect the antidepressants being absorbed. This can alter the effect of your medication. The patient information leaflet provided with your medication will give you a list of these foods. If you're unsure or you want advice you can speak to your doctor.

If you take Monoamine oxidase inhibitors (MAOIs) you have to be especially careful about the foods you eat.<sup>47</sup> So, if you are taking this medication, ask your doctor about any foods that you should not eat.

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## **6. Can alcohol affect me if I take antidepressants?**

You should be careful about drinking alcohol if you're taking antidepressants. This is because alcohol is itself a depressant, so it can make your symptoms worse. It can also increase the side effects of some antidepressants, like drowsiness, dizziness, and co-ordination problems.<sup>48</sup>

Alcohol is less likely to cause unpleasant effects if you're taking the following types of antidepressants:

- selective serotonin reuptake inhibitors (SSRI), or
- serotonin-noradrenaline reuptake inhibitors (SNRI.)

But the NHS say avoiding alcohol is often still recommended.<sup>49</sup>

You may become drowsy and dizzy if you drink alcohol while taking the following types of antidepressants: <sup>50</sup>

- tricyclic antidepressants (TCAs), or
- monoamine oxidase inhibitors (MAOIs).

You shouldn't drink certain wines or beers if you are taking MAOIs.<sup>51</sup> For more information you can ask your pharmacist or doctor.

You can access NHS advice on keeping health risks from alcohol to a low level here: [www.nhs.uk/Live-well/alcohol-advice/calculating-alcohol-units](http://www.nhs.uk/Live-well/alcohol-advice/calculating-alcohol-units)

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## 7. Can antidepressants affect driving or operating machinery?

Most people who take antidepressants can drive safely. But they can make you feel drowsy, which can affect your reaction time if you're driving.<sup>52</sup> If you feel this way, you shouldn't drive.

For more information you can:

- check with your doctor, and
- read the patient information leaflet that comes with the medication.

You should tell the DVLA if:

- you're taking medication that may affect your driving, or
- you have a medical condition that could affect your driving.

If your antidepressants make you sleepy or slow down your reactions, you shouldn't operate machinery.

You can find out more information about '**Driving and mental illness**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 8. What else should I consider before taking antidepressants?

### Can antidepressants affect my sex life?

Taking antidepressants may affect your sex life. They can make you feel tired and can affect your hormones.

Side effects can include:<sup>53</sup>

- lower sex drive,
- problems with getting an erection, and
- difficulty having an orgasm.

If you are having these problems, talk to your doctor. You might be able to change medication, or the amount you take. There is some research that suggests certain antidepressants such as Mirtazapine have fewer sexual side effects. <sup>54</sup>

### **Can I take antidepressants if I'm pregnant?**

You can take some antidepressants if you're pregnant, but you should talk to your doctor first. You may want to stay on antidepressants during your pregnancy if you think your symptoms will come back.

Some antidepressants may be better for you during pregnancy than others.

If you're pregnant, some antidepressants can affect the baby.<sup>55</sup> Some possible effects can be:<sup>56</sup>

- low birth weight,
- heart disease, and
- pulmonary hypertension. This is high blood pressure in the blood vessels between your lungs and heart.

Talk to your doctor if you're pregnant, or plan on getting pregnant. If you have a mental health condition, you may be seen by your local perinatal mental health service. This is if this team exists in your area. If you don't have this team in your local area, your usual doctor can support you.

### **Can antidepressants affect breast feeding?**

Small amounts of antidepressants can pass into your breast milk. You can talk to your doctor or midwife about the risks and benefits of breastfeeding.

Some antidepressants are better than others if you are breastfeeding. Your doctor can tell you about this.

### Bristol Tranquilliser Project

They provide help to people who are having problems with psychotropic medication, such as benzodiazepines, sleeping tablets, and antidepressants. Their helpline is available to those living in England, Wales, Scotland, and Northern Ireland.

**Phone:** 0117 950 0020

**Address:** Suite 5A, Westbury Court, Church Road, Westbury-on-Trym, Bristol BS9 3EF

**Website:** [www.btpinfo.org.uk](http://www.btpinfo.org.uk)

### Tommy's

They are a charity working to make pregnancy safe for everyone. They provided advice, information, and support to anyone struggling with their mental or physical health during and after pregnancy.

**Phone:** 0800 0147 800

**Email:** [midwife@tommys.org](mailto:midwife@tommys.org)

**Website:** [www.tommys.org/](http://www.tommys.org/)

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<sup>1</sup> British National Formulary. *Antidepressant drugs*. [www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html](http://www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html) (accessed 6th December 2022).

<sup>2</sup> NHS. *Antidepressants - Overview*. <https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/antidepressants/overview/> (accessed 6<sup>th</sup> December 2022).

<sup>3</sup> Royal College of Psychiatrists. *Position statement on antidepressants and depression* 2019. See 'How do antidepressants work?', P5 [www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/position-statements/ps04\\_19---antidepressants-and-depression.pdf?sfvrsn=ddea9473\\_5](http://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/position-statements/ps04_19---antidepressants-and-depression.pdf?sfvrsn=ddea9473_5) (accessed 5<sup>th</sup> August 2022). Pages 6-7.

<sup>4</sup> NHS. *Antidepressants*. [www.nhs.uk/conditions/antidepressants](http://www.nhs.uk/conditions/antidepressants) (accessed 5<sup>th</sup> August 2022).

<sup>5</sup> NHS. *Antidepressants*. [www.nhs.uk/conditions/antidepressants](http://www.nhs.uk/conditions/antidepressants) (accessed 5<sup>th</sup> August 2022).

<sup>6</sup> National Institute for Health and Care Excellence. *Depression in adults: treatment and management*. <https://bnf.nice.org.uk/treatment-summaries/antidepressant-drugs/> (accessed 5<sup>th</sup> August 2022).

<sup>7</sup> British National Formulary. *Antidepressant drugs*. <https://bnf.nice.org.uk/treatment-summaries/antidepressant-drugs/> (accessed 19<sup>th</sup> April 2024).

<sup>8</sup> National Institute for Health and Care Excellence. *Depression in adults: treatment and management*. London: National Institute for Health and Care Excellence; 2022

<sup>9</sup> NHS. *Side effects – Selective serotonin reuptake inhibitors (SSRIs)*. [www.nhs.uk/conditions/ssri-antidepressants/side-effects/](http://www.nhs.uk/conditions/ssri-antidepressants/side-effects/) (accessed 5<sup>th</sup> August 2022).

<sup>10</sup> NHS. *Overview – Selective serotonin reuptake inhibitors (SSRIs)*. <https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/ssri-antidepressants/overview/> (accessed 5<sup>th</sup> August 2022).

<sup>11</sup> NHS. *Antidepressants - Overview*. <https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/antidepressants/overview/> (accessed 5<sup>th</sup> August 2022).

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<sup>12</sup> NHS. *Antidepressants - Overview*. <https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/antidepressants/overview/> (accessed 5<sup>th</sup> August 2022).

<sup>13</sup> NHS. *Antidepressants*. [www.nhs.uk/conditions/antidepressants/](http://www.nhs.uk/conditions/antidepressants/) (accessed 9<sup>th</sup> August 2022).

<sup>14</sup> British National Formulary. *Antidepressant drugs*. [www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html](http://www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html) (accessed 9<sup>th</sup> August 2022).

<sup>15</sup> British National Formulary. *Doxepin – Medicinal forms*.  
<https://bnf.nice.org.uk/drugs/doxepin/medicinal-forms/> (Accessed 6<sup>th</sup> December 2022)

<sup>16</sup> NHS. *Dosulepin*. [https://www.nhs.uk/medicines/dosulepin/](http://www.nhs.uk/medicines/dosulepin/) (Accessed 6<sup>th</sup> December 2022)

<sup>17</sup> NHS. *Antidepressants*. [www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/antidepressants/overview](http://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/antidepressants/overview) (accessed 27 October 2022)

<sup>18</sup> British National Formulary. *Antidepressant drugs*. [www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html](http://www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html) (accessed 9<sup>th</sup> August 2022).

<sup>19</sup> Van den Eynde V, Gillman PK, Blackwell BB. The Prescriber's Guide to the MAOI Diet -Thinking Through Tyramine Troubles. *Psychopharmacology Bulletin*. [www.ncbi.nlm.nih.gov/pmc/articles/PMC9172554](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC9172554) (accessed 19th April 2024).

<sup>20</sup> British National Formulary. *Antidepressant drugs*. [www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html](http://www.bnf.nice.org.uk/treatment-summary/antidepressant-drugs.html) (accessed 9<sup>th</sup> August 2022).

<sup>21</sup> British National Formulary. *Mirtazapine*.  
[www.bnf.nice.org.uk/drug/mirtazapine.html#indicationsAndDoses](http://www.bnf.nice.org.uk/drug/mirtazapine.html#indicationsAndDoses) (accessed 9<sup>th</sup> August 2022).

<sup>22</sup> British National Formulary. *Trazodone Hydrochloride*.  
[www.bnf.nice.org.uk/drug/trazodone-hydrochloride.html](http://www.bnf.nice.org.uk/drug/trazodone-hydrochloride.html) (accessed 9<sup>th</sup> August 2022).

<sup>23</sup> British National Formulary. *Reboxetine*. <https://bnf.nice.org.uk/drugs/reboxetine> (accessed 27 October 2022)

<sup>24</sup> British National Formulary. *Mianserin hydrochloride*.  
[https://www.bnf.nice.org.uk/drugs/reboxetine](http://www.bnf.nice.org.uk/drugs/reboxetine) (accessed 27 October 2022)

<sup>25</sup> NHS. *Side effects – Selective serotonin reuptake inhibitors (SSRIs)*.  
[www.nhs.uk/conditions/ssri-antidepressants/side-effects/](http://www.nhs.uk/conditions/ssri-antidepressants/side-effects/) (accessed 9<sup>th</sup> August 2022)

<sup>26</sup> NHS. *Antidepressants – Side-effects*. [www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/antidepressants/side-effects](http://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/medicines-and-psychiatry/antidepressants/side-effects) (accessed 27 October 2022)

<sup>27</sup> Zhong, Z., Wang, L., Wen, X., Liu, Y., Fan, Y., & Liu, Z. (2017). A meta-analysis of effects of selective serotonin reuptake inhibitors on blood pressure in depression treatment: outcomes from placebo and serotonin and noradrenaline reuptake inhibitor controlled trials. *Neuropsychiatric disease and treatment*, 13, 2781–2796.  
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<sup>28</sup> NHS. *Side effects – Antidepressants*. [www.nhs.uk/conditions/antidepressants/side-effects/](http://www.nhs.uk/conditions/antidepressants/side-effects/) (accessed 9<sup>th</sup> August 2022).

<sup>29</sup> National Institute for Health and Care Excellence. *Phenelzine*.  
[https://www.bnf.nice.org.uk/drugs/phenelzine/](http://www.bnf.nice.org.uk/drugs/phenelzine/) (accessed 9<sup>th</sup> August 2022)

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