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Antidepressant medication for children and young people

Information for parents and carers

Helping people to be
the best they can be

Introduction

This leaflet gives information about the use of antidepressants for children and young people.

It should be read with the Choice and Medication leaflet for the specific antidepressant that your child is taking which will give more detailed information about effects and side effects.

What are antidepressants?

Antidepressants are drugs used to relieve the symptoms of depression. There are several types available and currently the most commonly used for treating adolescents are Fluoxetine, Sertraline and Citalopram which are all types of SSRI (selective serotonin reuptake inhibitor) antidepressant. SSRIs work by altering a certain brain chemical called serotonin and this can help improve symptoms of depression including low mood, suicidal thoughts, poor concentration, loss of interest, lethargy, poor sleep and poor appetite. SSRIs can also be helpful in improving symptoms of obsessive compulsive disorder and anxiety.

It usually takes between two and six weeks for improvements to begin.

Guidelines for taking antidepressants

- If your child is under 16 years of age the medication should usually be supervised by a responsible adult.
- Medication must be taken regularly and as prescribed for it to have a proper effect. It will probably need to be taken for some months after recovery. If this is difficult you will need to be honest when discussing this with your doctor.
- Some SSRIs are available as syrup or liquid if swallowing is a problem.
- You must inform the doctor if your child is, or might be pregnant when taking SSRIs.

- If excessive tablets are taken you must seek medical advice and contact your local A&E department or your GP.
- The decision to prescribe SSRIs will involve the doctor assessing the severity of your child's symptoms and considering all treatment options. Medication is usually reserved for more severe conditions which have not responded to other treatments.
- It is usual to start on a low dose and to gradually increase the dose until a therapeutic dose is reached.
- Your child will need to be monitored by a specialist doctor or their GP. You will need to discuss arrangements for obtaining prescriptions from the doctor or GP. If your child hasn't seen a doctor for several months it may be advisable for them and you to see their GP to discuss medication.

Risks of using antidepressants

Fluoxetine is the most effective antidepressant in children and it has the least risk associated with it. The use of antidepressants has been linked with suicidal thoughts and behaviour. Children, young adults and patients with a history of suicidal behaviour are particularly at risk. Your child needs to be monitored for suicidal behaviour, self-harm and hostility, particularly at the beginning of treatment or if the dose is changed. When the decision is made to end the treatment the antidepressant is usually stopped over a period of several weeks. This is because of withdrawal effects which can occur in up to a third of people. They can involve flu-like symptoms, anxiety, dizziness, stomach upsets and funny sensations.

Are there any side effects?

The most common side effects of SSRIs are feeling sick, diarrhoea, headaches, anxiety or having indigestion for the first couple of weeks. Most people only experience mild side effects and some have none.

If you have any concerns about side effects or interactions with any other medication, you should speak to the doctor. The full list of side effects can be found on the manufacturer's information leaflet which comes with the medicine.

If your child becomes particularly unwell or has a fever or rash your child may be allergic to the medication and you need to seek medical advice.

Alternatives to antidepressants

Medication is not the only way that depression, anxiety or obsessive compulsive disorder can be treated – talking therapy can be used. This is often suggested before medication. If this has not already been tried the doctor will be able to advise you on whether they think this would be beneficial for your child and what type of talking therapy would be most useful. Please speak to the doctor if you would like more information.

Licensing

Currently in Britain, Fluoxetine is licensed for major depression in children and Sertraline and Fluvoxamine are licensed for OCD in children. This is largely related to marketing issues and does not mean that the drugs are more harmful or safe in children. Your doctor may suggest prescribing an SSRI which is not licensed for specific use in children if they think this would be the best medication for your child, for example because of other medical conditions your child has. A doctor can prescribe off-licence or 'off-label' drugs. Please ask your doctor or pharmacist for further information.