

## **CITALOPRAM:**

**Class:** Selective Serotonin Reuptake Inhibitor

**Indications:** Antidepressant

**Available dosage form in the hospital:** TAB (10MG, 20MG, 40 MG)

**Trade Names:**

**Dosage:**

**-Depression:** Adults <60 years: Oral: Initial: 20 mg once daily; increase the dose by 20 mg at an interval of  $\geq 1$  week to a maximum dose of 40 mg daily. **Note:** Doses >40 mg daily are not recommended due to the risk of QT prolongation; additional efficacy with doses >40 mg daily has not been demonstrated in clinical trials.

*-Poor metabolizers of CYP2C19 or concurrent use of moderate-to-strong CYP2C19 inhibitors (eg, cimetidine, omeprazole):* Maximum dose: 20 mg daily

### **-MAO inhibitor recommendations:**

*-Switching to or from an MAO inhibitor intended to treat psychiatric disorders:*

- Allow 14 days to elapse between discontinuing an MAO inhibitor intended to treat psychiatric disorders and initiation of citalopram.
- Allow 14 days to elapse between discontinuing citalopram and initiation of an MAO inhibitor intended to treat psychiatric disorders.

*-Use with other MAO inhibitors (linezolid or I.V. methylene blue):*

- Do not initiate citalopram in patients receiving linezolid or I.V. methylene blue; consider other interventions for psychiatric condition.
- If urgent treatment with linezolid or I.V. methylene blue is required in a patient already receiving citalopram and potential benefits outweigh potential risks, discontinue citalopram promptly and administer linezolid or I.V. methylene blue. Monitor for serotonin syndrome for 2 weeks or until 24 hours after the last dose of linezolid or I.V. methylene blue, whichever comes first. May resume citalopram 24 hours after the last dose of linezolid or I.V. methylene blue.

### **Geriatric**

**Depression:** Elderly  $\geq 60$  years: Oral: Initial: 20 mg once daily; maximum dose in adults  $\geq 60$  years: 20 mg daily due to increased exposure and the risk of QT prolongation.

Refer to adult dosing.

### **Renal Impairment:**

*-Mild-to-moderate impairment:* No dosage adjustment necessary.

*-Severe impairment:  $Cl_{cr} < 20$  mL/minute:* No dosage adjustment provided in manufacturer's labeling (has not been studied); use caution.

### **Hepatic Impairment:**

Initial: 20 mg once daily; maximum recommended dose: 20 mg daily due to decreased clearance and the risk of QT prolongation

### **Common side effect:**

Central nervous system: Somnolence (18%; dose related), insomnia (15%; dose related)

Gastrointestinal: Nausea (21%), xerostomia (20%)

Miscellaneous: Diaphoresis (11%; dose related)

**Pregnancy Risk Factor:** C