

Did you know?..... **Rx Information from Jenny**

TAPERING MEDICINES

Patients often don't know which drugs need to be tapered to avoid withdrawal or rebound symptoms. There's no one-size-fits-all approach...but there are some general principles to keep in mind.

For example, abruptly stopping beta-blockers (metoprolol, etc) or clonidine can cause rebound hypertension. Most beta-blockers should be tapered over 1 to 2 weeks...and clonidine over at least 2 to 4 days.

SSRIs (Paxil, Zoloft, etc) and SNRIs (Effexor) can cause flu-like symptoms, anxiety, tremor, and other symptoms after stopping them suddenly.

Antidepressants should be tapered over 4 weeks...and even slower if needed for Paxil and Effexor.

Benzodiazepines (alprazolam, diazepam, etc) can cause withdrawal and rebound symptoms such as sweating, increased heart rate, tremor, insomnia, anxiety, agitation, nausea, vomiting and hallucinations....especially with chronic use.

In general, benzodiazepine doses should be decreased by 25% per week for 2 weeks then about 10% every week...or slower after prolonged use.

Alprazolam dosing should be decreased no faster than 0.5 mg every 3 days... and much slower for patients taking at least 4 mg/day for 3 months.

Lots of other drugs sometimes need to be tapered such as oral corticosteroids. Steroid withdrawal symptoms include flu-like symptoms, hypotension, weight loss and disease flare (e.g., contact dermatitis, lupus, rheumatoid arthritis).

Other meds include antiepileptics (Dilantin, Neurontin, etc), opioids (morphine) (withdrawal symptoms include runny nose, tearing, chills, muscle pain, vomiting, diarrhea, cramps, anxiety, agitation, hostility, insomnia), tramadol, baclofen, tricyclics, (amitriptyline, imipramine) and antipsychotics (Risperdal, Seroquel, etc).

Call if you have any questions!

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