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PSYCHIATRY

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PATIENT EDUCATION

Sertraline

Zoloft / Generic tablets and oral formulations

A guide for adults taking sertraline.
Follow the directions on your prescription and your provider's recommendations.

USUALLY ONCE DAILY | TABLETS, ORAL CONCENTRATE, AND HIGHER-DOSE CAPSULES

Formulations: Tablets, capsules, and oral liquids can have different handling or food instructions. Some concentrated liquids must be diluted; others are supplied ready to use.

What it is used for

Sertraline treats depression, OCD, panic disorder, PTSD, social anxiety disorder, and PMDD. Generalized anxiety treatment is a common off-label use. The schedule can differ for PMDD.

How it works

It slows serotonin reuptake, changing serotonin signaling involved in mood and anxiety. Improvement usually develops gradually after treatment begins.

What to expect over time

Sleep, energy, or appetite may change before mood improves. Benefit usually builds over several weeks; some conditions need a longer trial at a useful dose.

Track the symptoms you are treating and how you manage daily activities. Keep follow-up appointments. Schedule an earlier appointment if your mood gets worse.

Taking your medication

- Take at the prescribed time and follow your formulation’s food instructions. Food can help nausea.
- If using concentrate, dilute exactly as labeled immediately before taking; do not swallow undiluted concentrate.
- If you miss a dose, take it when you remember unless it is almost time for the next dose. Then skip it. Do not double a dose.
- Consult with your provider before reducing or stopping.

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Side effects and safety

Possible side effects

- Nausea or diarrhea
- Headache, sweating, or tremor
- Insomnia, drowsiness, or early restlessness
- Sexual side effects

Keeping track of treatment

Some side effects resolve with time; others may require a change of medication. Discuss persistent or bothersome side effects with your provider.

Antidepressants can increase suicidal thoughts in people under 25. Watch for changes in mood or behavior at any age, especially when starting treatment or changing a dose.

Tell your provider about emotional numbness, unusual agitation, or a reduced need for sleep with increased energy. These changes may call for a treatment adjustment.

Report unusual bruising or bleeding, severe headache, confusion, or marked weakness. SSRIs can increase bleeding risk and sometimes lower blood sodium.

If you take too much

For a suspected overdose, call Poison Control at **1-800-222-1222** immediately, even if you feel well. Call 911 for a seizure, collapse, trouble breathing, or inability to wake.

Before you start

Discuss any history of mania or bipolar disorder, seizures, heart disease, glaucoma, and kidney or liver problems.

Discuss pregnancy, pregnancy plans, and breastfeeding with your provider. Treatment decisions should consider both the medication and the condition being treated.

Medicines and interactions

Review all your medications with your provider, including over-the-counter medicines and supplements. Have new medications checked before taking them.

Do not combine with an MAOI; the waiting period depends on the medication being stopped. Linezolid and IV methylene blue also require special precautions.

Other antidepressants, tramadol, dextromethorphan cough medicines, triptans, lithium, and St. John's wort may increase serotonin-syndrome risk.

Aspirin, NSAIDs such as ibuprofen, and anticoagulants can add bleeding risk. Review alcohol and other medicines that impair alertness.

Do not combine with pimozide. Alcohol-containing sertraline concentrate must not be used with disulfiram.

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SERTRALINE / 03

Living with your treatment

When to get help

Emergency symptoms. Get emergency care for a seizure, severe allergic reaction, or sudden eye pain with vision changes. Fever with agitation, diarrhea, and stiff or twitching muscles may be serotonin syndrome and needs urgent assessment.

Prompt medical advice. Contact your provider right away for marked agitation, new hallucinations, or unusually high energy with very little need for sleep.

If you feel unsafe or have thoughts of self-harm, call 911 or go to an emergency department.

Your questions answered

Can I stop when I feel better?
Consult with your provider. Continuing treatment after improvement can reduce the chance that symptoms return. Most antidepressants should be reduced gradually to limit withdrawal symptoms.

What if I have sexual side effects?
Changes in desire, arousal, or orgasm are worth discussing. Your provider can review the dose or treatment options; do not stop or skip doses on your own.

Everyday tips

A regular dose time and refill reminder can help prevent missed doses.

Bring a few specific observations to appointments: sleep, motivation, anxiety, and activities that have become easier or harder.

Storage and safety

Keep medication in its labeled container, away from excess heat and moisture and out of reach of children and pets. Do not share it. Ask a pharmacy about disposal of unused medication.

Sources

Official prescribing information: sertraline
Official prescribing information: sertraline

Educational handout; does not replace your prescription or provider's recommendations.