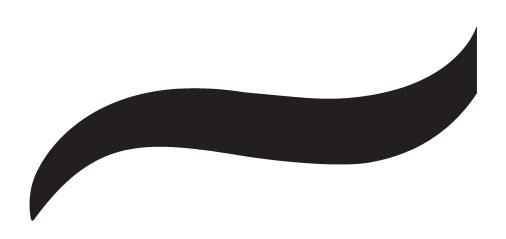




Tricyclics – Amitriptyline and Imipramine

Information for patients
Prescribing Management Team
Kirklands Hospital



AMITRIPTYLINE AND IMIPRAMINE

Amitriptyline and imipramine belong to the group of medications called tricyclic anti-depressants (TCAs). They are also known as analgesics (pain relief) or adjuvants (helpers).

You have not been given this medication to treat depression. If you or your doctor, pharmacist or pain specialist think you have depression this should be discussed separately.

These medicines are useful for neuropathic (nerve pain) and can be added to standard pain relief. They can dampen down over-sensitive nerves, helping abnormal burning pain. They may improve the way other pain relief work. They can help with a normal sleep pattern.

HOW TO TAKE AMITRIPTYLINE OR IMIPRAMINE

A usual starting dose is 10mg at night. The dose can then be increased slowly in order to find the right dose that gives you benefit but does not cause side effects. The tablets come in strengths of 10mg and 25mg.

It is usually best to take the tablets about 10-12 hours before your usual wakening time in the morning; so, if you wake at 7am, take the medicine between 7pm and 9pm

- Week 1: one 10mg tablet each night
- ❖ Week 2: two 10mg tablets each night
- ❖ Week 3: three 10mg tablets each night

You may need to increase the dose weekly until you are taking a dose that helps your pain or sleep. The usual maximum dose advised for pain is 75mg at night. It can often take four weeks to gain the best effect from this type of medication.

SIDE EFFECTS

All medications can cause side effects. A full list is in the patient information sheet with your prescription.

The most common side-effect with amitriptyline and imipramine is drowsiness. This can be helpful to get a good night's sleep but can last until the next day.

If amitriptyline or imipramine makes you feel drowsy you should avoid driving or operating machinery. It is a criminal offence to drive a vehicle whilst unsafe due to medication use. Alcohol may make the sleepiness worse and should be avoided where possible.

Other side effects can be dry mouth, light headedness, nausea, blurred vision, constipation, weight gain and difficulty in passing urine.

Some side effects can be reduced by slowly building up the dose. Others may pass after the first few doses. If side effects go on and become a problem, or you have others not expected then speak to your doctor, pharmacist or pain specialist.

HOW LONG WILL I HAVE TO TAKE AMITRIPTYLINE OR IMIPRAMINE FOR?

Generally, for as long as it is effective at helping you manage your neuropathic pain.

Sometimes if someone has been taking amitriptyline or imipramine for a long time, it may stop working as well. If you, your doctor, pharmacist or pain specialist think this is happening you may need to reduce the dose slowly to see if you still need it.

Do not stop amitriptyline or imipramine suddenly if you have been taking it for a long time as this may cause withdrawal symptoms. Reducing the dose slowly will help stop this happening.

MEDICATION IN CHRONIC PAIN

The benefit from taking medication should always be more than any side–effects you may have. Only you

- know how bad your pain is
- are able to say if your medication is helping
- know what side effects you are having

Getting the best effect from your medication may be a matter of trial and error. It may help to keep a diary of your pain and other symptoms.

Side effects often become less once you have been on a medicine for a few days. It may be several days or weeks before you notice that a new medicine is making a difference.

Please read the patient information sheet given with each medication. It will give you more information about the medicine and any side effects.

Your doctor, pharmacist or pain specialist can advise you on:

- which pain medicines may help
- the best way to take your medicines *
- putting your dose up safely if your pain is worse
- taking less medication safely when your pain is less

If your medicine is not helping you may not need to take it. Please talk to your doctor or pharmacist first. Some pain medicines should not be stopped suddenly.

Do not share or take other peoples medication. Always advise your doctor, pharmacist or pain specialist about any other medication or products you are taking including things bought from the pharmacy, herbal supplements or non-prescribed medicines.

Understanding how your medications work may help you to get the best pain relief from it with the least sideeffects.

We hope you found this information leaflet helpful. This information is not intended to replace your Doctor's advice. If you have any comments about the content, please let us know. This can be done by filling in the comment section, and sending it to the Prescribing Management Team at the address listed below, or by email.

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Pub. date: August 2018
Review date: August 2020
Issue No: 01
Department: Prescribing



www.careopinion.org.uk