# If you are taking Antidepressants and are overweight, then check this list to see if you need your prescription changed.

#### 1. Tricyclic antidepressants

Tricyclic antidepressants, also known as cyclic antidepressants or TCAs, may cause weight gain. These drugs include:

- amitriptyline (Elavil)
- amoxapine
- desipramine (Norpramin)
- doxepin (Adapin)
- imipramine (Tofranil-PM)
- nortriptyline (Pamelor)
- protriptyline (Vivactil)
- trimipramine (Surmontil)

TCAs were some of the first drugs approved to treat depression. They aren't prescribed as often anymore because newer treatments cause fewer side effects. Weight gain was a common reason people stopped treatment with these types of antidepressants, according to a 1984 <u>study</u><sup>[1]</sup>.

Still, TCAs can be effective in people who don't respond to other types of antidepressant drugs, despite the unwanted side effects.

## 2. Some monoamine oxidase inhibitors (MAOIs)

Monoamine oxidase inhibitors (MAOIs) were the first class of antidepressants to be developed. MAOIs that cause weight gain include:

- phenelzine (Nardil)
- isocarboxazid (Marplan)
- tranylcypromine (Parnate)

Doctors prescribe MAOIs most often when other antidepressants don't work due to certain side effects and safety concerns. Of the three MAOIs listed above, phenelzine (Nardil) is the most likely to result in weight gain, according to a 1988 review.

However, a newer formulation of an MAOI known as selegiline (Emsam) has been shown to result in weight loss during treatment. Emsam is a transdermal medication that is applied to the skin with a patch.

#### 3. Long-term use of certain selective serotonin reuptake inhibitors (SSRIs)

SSRIs are the most commonly prescribed class of depression drugs. Long-term use of the following SSRIs may cause weight gain:

- paroxetine (Paxil, Pexeva, Brisdelle)
- sertraline (Zoloft)
- fluoxetine (Prozac)
- citalopram (Celexa)

Although some SSRIs are associated with weight loss at first, long-term use of SSRIs is mostly linked to weight gain. Long-term use is considered treatment that lasts longer than six months.

Of the SSRIs listed above, paroxetine is most commonly associated with weight gain with both long-term and short-term use.

### 4. Some atypical antidepressants

Mirtazapine (Remeron) is a noradrenergic antagonist, which is a type of atypical antidepressant. The drug has been <u>shown repeatedly</u><sup>[2]</sup> to be more likely to cause weight gain and to increase appetite than other drugs.

Mirtazapine is less likely to make people gain weight compared with TCAs.

And it doesn't result in as many other side effects as other antidepressants. However, it can cause include:

- nausea
- vomiting
- sexual dysfunction



#### Antidepressants that don't cause weight gain

Other antidepressants have been associated with less weight gain as a side effect. These antidepressants include:

- escitalopram (Lexapro, Cipralex), an SSRI
- duloxetine (Cymbalta), an SNRI
- bupropion (Wellbutrin, Forfivo, and Aplenzin), an atypical antidepressant
- nefazodone (Serzone), a serotonin antagonist and reuptake inhibitor
- venlafaxine (Effexor) and venlafaxine ER (Effexor XR), which are both serotoninnorepinephrine reuptake inhibitors (SNRIs)
- desvenlafaxine (Pristiq), an SNRI
- levomilnacipran (Fetzima), an SNRI
- vilazodone (Viibryd), a serotonergic antidepressant
- vortioxetine (Trintellix), an atypical antidepressant
- selegiline (Emsam), a newer MAOI that you apply to your skin, which may lead to fewer side effects than MAOIs taken by mouth

Weight gain is also less likely to occur with the following SSRIs when they're used for less than six months:

- sertraline (Zoloft)
- fluoxetine (Prozac)
- citalopram (Celexa)

Some antidepressants can cause weight loss. For example, duloxetine and bupropion have been reported to lead to weight loss in some people.

#### References:

[1] https://www.sciencedirect.com/science/article/pii/0165032784900314

[2] <a href="https://annals.org/aim/fullarticle/1033198/comparative-benefits-harms-second-generation-antidepressants-treating-major-depressive-disorder">https://annals.org/aim/fullarticle/1033198/comparative-benefits-harms-second-generation-antidepressants-treating-major-depressive-disorder</a>