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Bupropion (Wellbutrin®)

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Summary: Bupropion (Wellbutrin®) is an antidepressant, but is also used to treat other conditions including attention deficit/hyperactivity disorder (ADHD) and helping people quit smoking.

Overview

Bupropion (Wellbutrin®) belongs to a group of medications called antidepressants. Bupropion can be used to treat several other conditions.

What is bupropion used for?

When the potential benefits (e.g., reducing your symptoms) of using bupropion outweigh the potential risks (e.g., the side effects), many doctors may prescribe it to treat:

- Depression
- Depression associated with bipolar disorder
- Attention deficit/hyperactivity disorder
- Cravings associated with quitting smoking (sometimes prescribed as 'Zyban®')

Your doctor may be using this medication for another reason. If you are unclear why this medication is being prescribed, please ask your doctor.

How does bupropion work?

Bupropion is a "Dopamine and Norepinephrine Reuptake Inhibitor (DNRI)". This means it increases the amount of certain chemicals in the brain called dopamine and norepinephrine. It is believed that some brain chemicals, such as dopamine and norepinephrine, are not working well in people who are depressed. The exact way that bupropion improves the symptoms of depression is still not fully known.

Bupropion in children and adolescents

Like many medications used to treat childhood disorders, bupropion has not been officially approved by Health Canada for use in children and adolescents.

Testing of bupropion in research studies of children and adolescents has been limited. In some studies of children

and adolescents with depression, medications like bupropion have been found to help about 5-6 people out of every 10 who are treated. Some of these studies also found that antidepressants were not better at treating the symptoms of depression than a placebo (an inactive pill that looks like the medication). In general, depressed youth who take bupropion for 2-3 months should notice an improvement in their depressive symptoms (such as improved mood, better sleep, more energy, and improved concentration). Whenever possible, the addition of behavioural therapy such as Interpersonal Therapy (IPT) for depression or Cognitive Behaviour Therapy (CBT) to this medication may help to increase the potential for benefits.

How should bupropion be taken?

Depending on the dosage and tablet form, bupropion is taken once or twice a day with or without food. You should take this medication at the same time(s) each day as directed by your doctor. Try to connect it with something you do each day (like eating breakfast or brushing your teeth) so that you don’t forget.

Usually, your doctor will start with a low dose of bupropion. This dose will be slowly increased based on how you respond to it. You and your doctor can then discuss the best dosage to stay on based on how you tolerate this medication (how well the medication is working and how you are doing with the side effects of the medication) and how well it helps to decrease your symptoms.

When will bupropion start working?

Bupropion must be taken for 3 to 6 weeks before you begin to feel better. Different symptoms may start to improve at different times. For example, improvements in sleep, appetite and energy may be seen within the first 2 weeks. Sometimes, others will notice improvements in you before you do. Full beneficial effects may take 4 to 8 weeks (or longer). Since this medication takes time to work, do not increase, decrease or stop it without discussing it with your doctor first.

If you are taking bupropion to help you quit smoking, you may notice reduced cravings for cigarettes within 1 week. It is recommended to attempt to stop smoking only after you have taken bupropion for at least 1 week.

If you are not feeling better within 6 to 8 weeks, your doctor may recommend you take a different medication. There is a small chance that your depressive symptoms may worsen or that you may experience increased thoughts of self harm during the first couple of months of taking this medication (see section on side effects). If this happens, tell your doctor IMMEDIATELY.

How long do I have to take bupropion?

This depends on the symptoms you have, how frequently they occur and how long you have had them. Most people need to take this medication for at least 6 months. This allows time for your symptoms to stabilize and for you to regain functioning. After this time, you and your doctor should discuss the benefits and risks of continuing treatment.

If you have had several episodes of severe depression and you tolerate this medication well, you may be asked to take this medication for an indefinite amount of time. By continuing to take this medication, you significantly decrease the chance that you may have another episode of depression. Do NOT stop taking this medication (even if you are feeling better) without discussing it with your doctor first. If you stop taking this medication suddenly, it is possible that your symptoms may return.

Once you have started taking this medication, your doctor and you will need to monitor for both the beneficial and unwanted effects. Your doctor will likely check your progress and discuss changes in symptoms during the next 3 months to confirm that the medication is working properly and that possible side effects are avoided.

If you are taking bupropion to help you quit smoking, you may need to take it for 7 to 12 weeks or longer to prevent you from returning to your previous smoking habits.

Is bupropion addictive?

No, bupropion is not addictive. You will not have “cravings” for it like some people do with nicotine or street drugs.

If you and your doctor decide it is time for you to stop taking bupropion, you can simply stop taking it.

What are the side effects of bupropion and what should I do if I get them?

As with most medications, side effects may occur when taking bupropion. Most side effects are mild and temporary.

Sometimes, side effects of this medication may occur before any of the beneficial effects. It is possible for some individuals to experience side effects that they feel are serious or long lasting. If you feel this has happened, speak with your doctor right away. On the next page are some of the more common side effects of taking this medication. In brackets are suggested ways to lessen these effects.

Common side effects

Side effects may be more common when starting a medication or after a dose increase. If any of these side effects is too troublesome for you, please discuss them with your doctor, nurse or pharmacist.

- Constipation (increase exercise, fluids, vegetables, fruits and fiber intake)
- Decreased appetite (try eating smaller, more frequent meals)
- Difficulty sleeping (try taking the medication earlier in the day)
- Dizziness (try getting up slowly from a sitting or lying down position)
- Drowsiness (try taking the dose at bedtime)
- Energized/agitated feelings (avoid caffeine from energy drinks, colas and coffee)
- Excessive sweating (strong antiperspirants can help; talk with your doctor or pharmacist)
- Headache (try using a pain reliever like acetaminophen (plain Tylenol®))
- Dry mouth (try chewing sugarless gum, sour candies, ice chips, or popsicles)
- Skin rash or itchy skin (use a skin moisturizer)
- Stomach aches or nausea (try taking the bupropion dose with food)

Uncommon side effects (e.g., those that occur in less than 5% of patients)

Contact your doctor IMMEDIATELY if you have any of these side effects:

- Change in mood to an unusual state of excitement, irritability or happiness
- Muscle twitches or stiffness
- Seizures (also called fits or convulsions)
- Thoughts of self harm, hostility or suicide
- Uncomfortable sense of inner restlessness or agitation

What precautions should my doctor and I be aware of when taking bupropion?

Tell your doctor or pharmacist if you:

- begin taking any other new medication (prescription or non-prescription), since several other medications can interact with bupropion
- feel drowsy, dizzy or slowed down. Bupropion can make some individuals experience these temporary side effects. Bupropion may increase the effects of alcohol, resulting in more sedation or dizziness. If you feel this way, it is important to avoid operating heavy machinery or driving a car.
- have a history of alcohol abuse or dependence, diabetes, eating disorder (e.g. anorexia or bulimia), heart disease, thyroid disease, kidney or liver disease or seizures
- have any allergies or have experienced a reaction to a medication
- have any changes in mood or thoughts of self harm

- if you develop any new medical problem while you are taking bupropion
- miss a period, become pregnant or are trying to become pregnant or are breast-feeding

What special instructions should I follow while using bupropion?

- Keep all appointments with your doctor and the laboratory.
- Do not allow anyone else to use your medication.
- It is a good idea to have a visit or telephone call with your doctor within 1-2 weeks after you start taking bupropion, and then periodically after that to see how well the medication is working, how well you are tolerating the medication, and to discuss any problems you may have.

What should I do if I forget to take a dose of bupropion?

If you miss a dose of this medication, take it as soon as possible. However, if it is almost time for your next dose (e.g., within 4 hours), do not take the missed dose or double your next dose. Instead, continue with your regular dosing schedule.

What storage conditions are needed for bupropion?

- Keep this medication in the original container, stored at room temperature away from moisture and heat (e.g., not in the bathroom or kitchen).
- Keep this medication out of reach and sight of children.

About this document

Special thanks to the Kelty Centre for Mental Health for permission to adapt this document. The original document was developed by health professionals of BC Mental Health and Addiction Services, and reviewed by the staff of the Kelty Mental Health Centre. French translation provided courtesy of the Ontario Centre of Excellence for Child and Youth Mental Health and the Children's Hospital of Eastern Ontario (CHEO).

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