

Patient information sheet: Amitriptyline

What type of drug is it?

Amitriptyline is one of a number of medicines called tricyclics. Although originally used to treat depression it has since been shown to be very useful in improving pain control in much smaller doses (up to 75 mg as opposed to 150mg). Because of this you may find the medication leaflet supplied with your Amitriptyline only gives information for the use of this drug in depression, this is normal. It works in a different way from other pain relief drugs and is particularly helpful in treating nerve pain, for example shooting, stabbing or burning pains. Other similar drugs are called are Imipramine, Trimipramine, Nortriptyline and these also used the management of chronic pain.

Is it safe?

Some people are confused when they are given an antidepressant medication to treat pain either because they are not depressed or that the doctor might be thinking the pain is 'in the mind'. Some people also worry about becoming addicted or dependent. These fears are false. Amitriptyline has been used successfully in thousands of patients with chronic pain. You will not become addicted to it or dependent on it, and you should be able to stop it without serious problems even if you have been taking it for several months or years.

In order to be used safely it is very important that you inform your pain specialist and GP about any other medications you are taking (including those you buy over the counter) and medical conditions you suffer, or have suffered from. In particular inform them if you have suffered from heart dysrhythmias (palpitations), glaucoma or have prostate problems.

Are there any side effects?

Like all medicines, Amitriptyline tablets can cause side effects, although not everybody gets them. Some side effects are more common such as drowsiness, slight dryness of the mouth, feeling lightheaded and in bigger doses sluggishness and sleepiness in the morning. Other side effects you may notice are constipation and mental clouding. There are some ways to ease these side effects.

- Dry mouth- Drink more non-alcoholic drinks, chewing also increases saliva in the mouth.
- Constipation- Drink more non-alcoholic drinks, eat plenty of fibre containing foods and fruit and vegetables.

If you are affected by drowsiness or lack of concentration you must not drive or operate machinery. Alcohol may make you drowsier therefore it is recommended that you restrict your alcohol intake. Most of these side effects will improve after several days, so it is worth carrying on with Amitriptyline. If you find the side effects are too much and you don't find any beneficial effects then speak to your doctor first about stopping the drug as it is best to reduce the dose slowly instead of abruptly stopping. If you find you can't take Amitriptyline you may be able to take one of the other tricyclic drugs (mentioned above) and experience fewer side effects.

How will it help me?

Amitriptyline affects the way pain is perceived in the nervous system and brain, changing the concentration of the chemicals in the brain (neurotransmitters) that produce the experience of pain. In general they do three things:

- They help the pain
- They improve sleep
- They reduce stress and help mood

Most people will notice some improvement after a week. A slow build up will help to achieve a higher dose with fewer side effects (see below).

How should I take it?

It is best to start with a small dose and build up slowly. Most doctors start with 10mg but some might choose 20 or 25mg. The dose only needs to be taken ONCE a day. Because the drug can cause drowsiness (and so improves sleep) it is best taken at bedtime one to two hours before your bedtime. Try to take the dose regularly every day.

Everyone is different and some people find they get a good effect from 10mg but others need more. The best approach is to start at a low dose (10mg) and double the dose after 5 days increasing, as prescribed if no positive effects are noted, up to a maximum dose of 75mg per night. If the side effects are problematic, then cut the dose down again. Swallow the tablets with a drink of water

How long will I take Amitriptyline for?

You will probably need to take this medicine for as long as you have the pain. Other treatments or pain medications may also help your pain. If so then the dose of Amitriptyline can be reduced as it you might no longer require the amount you had been taking. Amitriptyline should always be reduced slowly in the same way that you increased it to avoid withdrawal symptoms.

Who do I contact with queries or concerns?

The information in this leaflet is to guide your use of Amitriptyline safely. Further information is available inside the medication package.

If you have any further questions or concerns about taking this medicine please contact your prescribing GP or dispensing pharmacist.