



Information for Parents: Selective Serotonin Reuptake Inhibitors (SSRI's)

What are SSRIs? The family of anti-depressant and anti-anxiety medication called SSRI's includes fluoxetine, sertraline, fluvoxamine, citalopram, escitalopram and paroxetine. The brand names for these medications Prozac, Zoloft, Luvox, Celexa, Lexapro, and Paxil. Prozac and Zoloft are most commonly used to treat depression and anxiety in very young children.

What are these medications used to treat? These medications treat the symptoms of Major Depressive Disorder and depressive disorder "not otherwise specified", as well as Generalized Anxiety Disorder, Separation Anxiety Disorder, Selective mutism, and anxiety disorder "not otherwise specified".

Why do we think these medications should help preschoolers with depression or anxiety? There are good research studies that show that fluoxetine (Prozac) is helpful in treating depression in older children, adolescents, and adults and that fluvoxamine and sertraline and fluvoxamine can successfully treat anxiety disorders in older children, adolescents, and adults. There are no large research studies focused on medications for depression and anxiety in preschoolers.

Are these medications approved by the FDA? The FDA approves medications after there is enough research to say that the medication works a specific group of people with a specific disorder. There has not been enough research about whether these medications work for anxiety or depression in preschool children. These medications are not approved by the FDA in this age group. Doctors are allowed to prescribe medications that are not FDA approved if they believe that the medications may be helpful.

What are the common side effects of these medications? Most children do not have significant side effects with these medications. The most common side effects are headache and stomachache, which generally go away quickly. Some children may become feel jittery inside, and may some look more active. About 1 in 3 may develop more emotional symptoms. Other children may respond by being more tired (then we would give the medication at night).

What are the possible serious side effects of SSRI's medications? Children may develop more hyperactivity, decreased need for sleep, or disorganized behaviors. In children under 7 years old, this may occur for 1 in 5 children.

In older children, children may talk more about suicide or hurting themselves on these medications or may try to harm themselves. This has not been described in children under 7. However, the FDA has placed a "Black Box" on these medications reminding doctors to see a child frequently and keep track of their safety when starting SSRI's.

How will my child's doctor know if the medication is working and safe for him/her? Your child's doctor will ask you and other adults in your child's life to fill out questionnaires about your child's symptoms to keep track of behavioral changes with the medication.

In the first months, your child's doctor will need to check-in with you regularly to be sure that you are not seeing any behavioral side effects, and especially that your child is not talking about death more or doing any new dangerous behaviors.

How long will it take before I see any effects? These medications take between 3-6 weeks to start to have an effect on depression or anxiety. Look for improvement in the signs of depression or anxiety that that you have noticed in your child (being overly sad or irritable, trouble sleeping, trouble eating, not having enough energy, feeling guilty when he/she shouldn't, become overly upset or nervous over small things, trouble concentrating).

How will I know if there are side effects? Look for more trouble organizing feelings, more trouble sleeping, or complaints about stomach or headache. Let your child's doctor know if you see that your child is having any new difficulties. Every child is different, so also let your child's doctor know if you notice anything new when your child starts a medication.

How long will my child be on an SSRI? You and your child's doctor will make a decision about when to take your child off the medication. Generally, it's a good idea for a child to be taken off an SSRI after taking it for 9-12 months if the symptoms of depression or anxiety are doing well. This time off lets you, your child, and your child's doctor see what symptoms the child still has without the medication and make careful decisions about what kind of treatment should continue. If the medication is working, it is best not to stop before 9 months because there is a higher likelihood that the symptoms will come back during that time.

When should I stop giving my child the SSRI?

Generally, it is best for children not to stop these medications suddenly but to slowly lower the dose over time to avoid extra symptoms. Please call your child's doctor if you see anything that makes you worried, but especially new trouble sleeping, or disorganized play or behavior.

What are the alternatives if I do not want my child to take a medication? You are the boss.

Whether your child takes a medication for depression or anxiety is your decision, and your doctor will try to give you the best information available to help with the decision. Generally, your child's doctor will not recommend medication unless your child has participated in therapy and still has symptoms that are getting in his/her way at school or at home. Special kinds of therapy ("Cognitive Behavioral Therapy") can be very useful for young children with anxiety and other therapies with you and your child can help depressive symptoms. It is also important that you, your child's clinician, and your child's doctor talk about other things that could take away some of your child's stress, such as making sure he/she feels safe, making sure that all the adults are "catching him at being good", working with the school to help your child be successful, and being sure that other people's depression or mental health problems are not making it harder for your child to get better.

How to reach your child's ECSS doctor:

For more information:

American Academy of Child and Adolescent Psychiatry http://www.aacap.org/cs/root/facts_for_families/
Parents Med Guide www.Parentsmedguide.org