



Using *Moclobemide* in Children and Adolescents

This information explains how *Moclobemide* can be used as part of a treatment plan with children and adolescents. You may wish to share this information with your family members to help them to understand your treatment options. Since every person's needs are different, it is important that you follow the advice provided to you by your own doctor, nurse and/or pharmacist and speak to them if you have any questions about this medication.



What are Moclobemide used for?

Moclobemide (Manerix[®]) belongs to a group of medications called antidepressants.

Like many medications commonly used to treat childhood disorders, moclobemide has not been formally approved by Health Canada for use in children and adolescents. When the benefits (e.g., reducing your symptoms) of using moclobemide outweigh the potential risks (e.g., the side effects), many doctors may prescribe it to treat:

- Depression
- Depression associated with Bipolar Disorder

In some cases where other medications have not worked, moclobemide may also be used in children and adolescents with Attention Deficit Hyperactivity Disorder or social phobia.

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



How does Moclobemide work?

Moclobemide is a “*Reversible Inhibitor of Monoamine Oxidase-A*”. This means it works by preventing the body from breaking down some chemicals in the brain called norepinephrine and serotonin. It is believed that these brain chemicals are not working well in people who are depressed. The exact way that moclobemide improves the symptoms of depression is still not fully known.

How well does Moclobemide work in children and adolescents?

Testing of moclobemide in children and adolescent research studies has been limited. In some studies of children and adolescents with depression, medications like moclobemide have been found to help about **5-6 people out of 10**. 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 medication). In general, depressed youth prescribed moclobemide for 2-3 months will notice an improvement in their depressive symptoms (*such as improved mood, better sleep, more energy, and improved concentration*). Whenever possible, the addition of talk therapy (*such as Cognitive Behaviour Therapy – CBT*) to these medications increases the potential for benefits.



How should Moclobemide be taken?

Moclobemide is usually taken twice a day with or without food. Taking it just after a meal helps decrease the chance of getting a stomach ache. This medication should be taken at the same time each day as directed by your doctor. Try to connect it with something you do each day (like eating breakfast and supper) so that you don't forget.

Usually, your doctor will start with a low dose of moclobemide. Then, this dose will be slowly increased based on how you child respond to it. You and your doctor can then discuss the best dosage to stay on based on how this

medication is tolerated (how well the medication is working and how you are doing with side effects of the medication) and how well it helps decrease your symptoms.

When will this medication start working?

Moclobemide must be taken for 3 to 6 weeks before you begin to feel better. Different symptoms start to improve at different rates. 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 these medications take time to work, do not increase, decrease or stop them without discussing it with your doctor.

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



How long do I have to take this medication?



This depends on the symptoms you have, how frequent 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 to 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 if you are feeling better without discussing it with your doctor.

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.

Tip: Use the Antidepressant Monitoring Form to help measure your progress on this medication.

Is Moclobemide addictive?

No, moclobemide 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 to stop using moclobemide, your doctor will explain how to safely lower the dose so you don’t feel any “flu-like” effects as your body adjusts to being without it.

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

As with most medications, side effects can occur when taking moclobemide. Most side effects are considered to be mild and temporary. Side effects may occur before any beneficial effects. It is possible to experience a side effect that you feel is serious or long lasting. If this occurs, speak to your doctor about ways to manage them. Here are some of the more common side effects of taking this medication. In brackets are suggested ways to lessen these effects.

Common side effects

Should any of these side effects be too troublesome for you, please discuss them with your doctor, nurse or pharmacist.

- Constipation (*increase exercise, fluids, fruits and fibre*)
- Diarrhea (*usually disappears in the first week*)

- 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; this usually disappears*)
- Dry mouth (*try chewing sugarless gum, sour candies, ice chips, or popsicles*)
- Energized/agitated feelings (*avoid caffeine, from colas and coffee*)
- Headache (*try using a pain reliever like acetaminophen*)
- Loss of appetite (*try eating smaller, more frequent meals*)
- Changes in sexual performance or drive (*discuss with your doctor*)
- Stomach aches and nausea (*try taking this medication with food or a glass of milk*)

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:

- Unusual bruising or bleeding
- Skin rash or itchy skin
- Tingling in the hands or feet
- An uncomfortable sense of inner restlessness or agitation
- Muscle twitches or stiffness
- A switch in mood to an unusual state of excitement, irritability or happiness, thoughts of self harm, hostility or suicide.



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

- Report any changes in mood or thoughts of self harm to your doctor immediately.
- Do not stop taking this medication suddenly as this may result in the following: chills, nausea, vomiting, dizziness, tingling in hands and feet, muscle aches and fever.
- Several other medications can interact with Moclobemide. Before you begin taking any other new medication (prescription or non-prescription), or if you develop any new medical problem while you are taking an SSRI, check with your doctor, nurse, or pharmacist.
- Moclobemide can be taken with meals (may help decrease stomach upset), milk, water, orange or apple juice. AVOID taking Moclobemide with grapefruit juice as it may interact with these medications.
- Moclobemide can make some individuals feel drowsy, dizzy or slowed down. If you experience these temporary side effects, it is important to avoid operating heavy machinery or driving a car.
- Moclobemide may increase the effects of alcohol, resulting in more sedation or dizziness. Tell your doctor if you miss a period, become pregnant or are trying to become pregnant.

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

If you take your SSRI only at bedtime and you forget to take it, skip the missed dose and continue with your schedule the next day. Do NOT double your next dose. If you take it more than once a day, take the missed dose 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 up on next dose. Instead, continue your regular dosing schedule.



What storage conditions are needed for this medication?

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