


**ANXIETY DISORDER MEDICATION Comparison Chart**

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Jul 03

Generic/ <b>TRADE</b>	Class	Side effects	Anxiolytic Uses <sup>1,2,3,4</sup>	Comments (√ = therapeutic use)	INITIAL & MAX DOSE	USUAL DOSE RANGE	\$  /Month
<b>Alprazolam</b> <b>XANAX</b> (0.25,0.5); (1 <sup>x</sup> mg tab; TS 2mg <sup>x</sup> )	Triazolo	<b>Drowsiness</b> (tolerance develops), <b>dizziness</b> , ↓ concentration, anterograde amnesia, ↑ traffic <b>accidents</b> , physical <b>dependence</b> & rarely paradoxical anger or hostility.	PD PDA GAD SAD	√Anxiety, <b>Panic attacks</b> Severe withdrawal & some ? antidepressant effect	0.25mg 4-10mg	0.25mg po tid 0.5mg po tid	<b>15</b> 15
<b>Clonazepam</b> <b>RIVOTRIL</b> (0.5,1,2mg tab)	Nitro		GAD SAD	√ Anticonvulsant, Panic attack Other uses: <b>sedative</b> , social phobia & akathisia acute mania & neuralgic pain	0.25mg 10-20mg	0.5mg po tid 1mg po bid 2mg po tid	<b>15</b> 21 20
<b>Lorazepam</b> <b>ATIVAN</b> (0.5,1,2mg tab; 0.5,1,2mg sl <sup>x</sup> tab; 4mg/ml <b>amp<sup>x</sup></b> )	3- Hydroxy # <b>Benzodiazepine</b>	Alprazolam <b>Level ↑ by:</b> <b>fluvoxamine</b> ,grapefruit juice, ketoconazole, <b>nefazodone</b> ; Alprazolam <b>Level ↓ by:</b> theophylline	( <b>Fast acting</b> , rebound anxiety)	√ Anxiety, Preanesthetic Other: <b>sedative</b> , muscle relaxant, alcohol withdrawal; ↓ <b>DI's</b> , √Status epilepticus (slower onset, but longer duration vs diazepam)	0.5mg 10mg	0.5mg po tid 1mg po tid 2mg po tid	11 <b>12</b> 14
<b>Bupirone</b> <b>BUSPAR</b> (5,10mg tab)	<b>Azapirone</b> 5 HT <sub>1a</sub> agonist	Nausea, headache, dizziness, restlessness (non-sedating) Onset 1 week; Max effect <b>6 weeks</b>	GAD ( <b>Delayed onset</b> )	√ <b>Anxiety in Bz naive pt.</b> ;Other:alcohol withdrawal <b>Non-addicting</b> , DI-fluvoxamine,grapefruit juice; <b>NO dependency</b> , No cross tolerance with benzo's	5mg 60-90mg	5mg po tid 10mg po tid-qid	50 62-80
<b>Hydroxyzine</b> <b>ATARAX</b> (10,25,50mg cap,2mg/ml syr);(50mg amp <sup>x</sup> )	<b>Antihistamine</b>	Drowsiness, sedation, headache, weakness,anticholinergic,↓ cognition	Anxiety	√ Sedative/hypnotic, anti-pruritic Tolerance to efficacy	10mg 400mg	25mg po tid 50mg po tid	<b>14</b> 15
MAOIs:non-selective & irreversible; ✓ atypical depression/ <b>refractory PD/PDA/OCD</b> ; enzyme effect ~10day; many DIs & food cautions( <b>tyramine-hypertensive crisis</b> ); phenelzine <b>NARDIL</b> 15mg tab;tranylcypromine <b>PARNATE</b> 10mg tab							
<b>Moclobemide</b> <b>MANERIX</b> (100,150,300mg tab)	<b>RIMA</b>	Dry mouth, dizzy, headache, nausea, restless, tremor, insomnia, <b>less sexual</b> dysfunction, insomnia	SAD	• <b>no</b> dietary tyramine precaution,enzyme effect lasts ~24hrs ,selective & reversible enzyme inhibitor; <b>DI</b> :dextromethorphan,meperidine,sympathomimetic	100mg bid 600-900mg/d	150mg po bid pc 300mg po bid pc	<b>28</b> 58
<b>Propranolol</b> <b>INDERAL</b> (10,20,40,80 & 120mg tablet; <b>LA</b> 60,80,120 & 160mg); (Vial 1mg/ml <sup>x</sup> )	<b>Beta blocker</b>	<b>Hypotension</b> ,bronchospasm,fatigue Contraindicated:asthma, <b>bradycardia</b> Caution: diabetes Consider: <b>Atenolol</b> 25-100mg 60-90 min before task	SAD Anxiety	Other uses: <b>aggression</b> (impulsive outbursts), <b>akathisia</b> , lithium tremor, <b>performance anxiety</b> , panic, stage fright; ✓BP, Angina, Post MI, Arrhythmias ✓Atrial Fib, Migraine headache prophylaxis	10-40mg bid (10-80mg 30-90min B4 task) 320mg/d	20mg po bid 40mg po bid 80mg LA po od	10 <b>10</b> 25
<b>SSRI'S:</b> <b>Citalopram</b> = <b>CC</b> <b>CELEXA</b> (20, <b>40mg scored tabs</b> ) <b>Fluoxetine</b> = <b>F</b> <b>PROZAC</b> (10,20mg cap & 4mg/ml soln) <b>Fluvoxamine</b> = <b>X</b> <b>LUVOX</b> (50,100mg tab) <b>Paroxetine</b> = <b>P</b> <b>PAXIL</b> (20,30mg tab), (10mg tab <sup>x</sup> ) <b>Sertraline</b> = <b>S</b> <b>ZOLOFT</b> (25,50,100mg cap) <b>Nefazodone</b> = <b>Z</b> <b>SERZONE</b> (50,100,150,200mg tab)	<b>SSRI'S</b>  (not too useful for specific phobias)	<b>SSRIs SE in General (GI &amp; CNS)</b> <b>nausea</b> {21%(F) - 36%(X)}, anxiety, insomnia {~14%}, agitation, anorexia, <b>tremor</b> somnolence {11-26%}, sweating, dry mouth, headache, dizziness, diarrhea {12%(F,P)-17%(S)}, constipation {13-18%} sexual dysfx. <sup>5,6</sup> <b>D/C Syndrome</b> <b>Z</b> =as above <b>plus</b> ↓ BP,nausea,constip., dizziness, rare <b>hepatotoxicity</b> <b>Serotonergic svndrome</b> with MAOI -↓BP, tremor,agitation, hypomania	<b>PD</b> <b>F,P,S</b>  <b>PDA</b> <b>P,S</b>  <b>PTSD</b> <b>P,S</b>  <b>OCD</b> <b>F,P,S,X</b>  <b>SAD/GAD</b> <b>P,S</b>	<b>CC</b> -caution in pts prone to overdose <b>CC</b> - <b>few drug interactions</b> <b>F</b> -most <b>anorexic</b> & stimulating <b>F</b> -long half-life (5 week washout) <b>X</b> -most <b>nausea</b> ,constipating & sedating SSRI, ↑DI's <b>P</b> -most anticholinergic of SSRI's <b>S</b> -most diarrhea & male sexual dysfx of SSRIs <b>S</b> - <b>few drug interactions</b> <b>Z</b> - <b>least</b> stimulating 5HT, <b>less wt</b> gain; <b>less sex</b> dysfx. - <b>flat dose response curve for depression</b> : however titration to high doses sometimes required for treatment of anxiety ( <b>start low, aim high</b> ).	<b>CC</b> <b>10-20mg am</b> 60mg/d <b>F</b> 10-20mg od 80mg/d <b>X</b> <b>25-50mg hs</b> 300mg/d <b>P</b> 10-20mg am 60mg/d <b>S</b> <b>25-50mg am</b> 200mg/d <b>Z</b> 50-100mg bid 600mg/d	20mg po od 40mg po od 20mg po od am 40mg po od am 100mg po hs 150mg po hs 20mg po od am 40mg po od am 100mg po od cc 100mg po bid cc 100mg po bid 300mg po hs	<b>52</b> 52 <b>32</b> 57 <b>33</b> 45 <b>67</b> 126 <b>35</b> 63 36 <b>36</b>
<b>Tricyclic Antidepressants</b> <b>Clomipramine</b> = <b>Cl</b> <b>ANAFRANIL</b> (10, 25, 50mg tab) <b>Imipramine</b> = <b>I</b> <b>TOFRANIL</b> (10, 25, 50mg tab) <b>Desipramine</b> = <b>D</b> <b>NORPRAMIN</b> (10, 25, 50, 75,100mg tab)	<b>TCA's</b>	<b>CNS effects</b> (agitation on initiation of therapy, confusion, drowsiness, headache, tremors, seizures), <b>anticholinergic effects</b> ( dry mouth, blurred vision, constipation etc.); nausea, sweating, rash, <b>cardiovascular effects</b> ( ↑ heart rate, arrhythmias, orthostatic hypotension); anorgasmia	PD PDA PTSD  GAD OCD-esp. <b>Cl</b> SAD	May ↑ effect of anticholinergic & CNS meds. May take 2-3 months for maximum effect. <b>clomipramine for OCD</b> b/c most 5HT agent. <b>Fatal</b> (≥2gm) <b>overdose</b> → to heart & CNS •desipramine generally <b>better tolerated</b> than clomipramine & imipramine & has most NE activity & the least anticholinergic activity • trough plasma levels can be drawn	10-25mg 300mg	<b>Cl</b> 150mg po hs <b>Cl</b> 200mg po hs <b>I</b> 150mg po hs <b>I</b> 200mg po hs <b>D</b> 150mg po hs <b>D</b> 200mg po hs	51 <b>65</b> 40 <b>51</b> 44 <b>56</b>
<b>Venlafaxine</b> <b>EFFEXOR</b> (Reg. 37.5, 75mg tab) ( <b>XR</b> 37.5,75,150mg caps) (contents of XR may be <b>sprinkled</b> )	<b>SNRI</b> <b>5HT &amp; NE</b> (also some DA)	•As dose ↑: <b>↑BP</b> , agitation, tremor, sweating, nausea {~37%}, sleep disturbances, headache,“clean TCA” •side effects similar to SSRIs	<b>GAD/SAD</b> ? PD	• <b>less weight</b> gain; <b>few drug</b> interactions •adjust dose for ↓ renal function •caution: <b>withdrawal syndrome</b> (e.g. agitation, nausea, fatigue, dizziness, headache, etc.)	18.75-37.5mg bid 375mg/d	37.5mg po bid cc 75mg <b>XR</b> po <b>daily</b> 150mg <b>XR</b> po <b>daily</b> 225mg <b>XR</b> po <b>daily</b>	63 <b>63</b> <b>66</b> 122

# **Benzodiazepines:** D/C gradually to avoid rebound anxiety,avoid in pregnancy & in patients with a history of drug abuse, dose ↑ is rare in patients taking bz's for anxiety, use ↓ dose in elderly. **Pt**=patient <sup>x</sup>Non-formulary Sask  
**Drugs ↑ anxiety Sx:** amphetamines,antipsychotics,anticholinergic-toxicity,caffeine,cocaine,dapsone,digitalis-toxicity,dopamine,ephedrine,isoniazid,levodopa,lidocaine,methylphenidate,nicotinic acid,phenylephrine,pseudoephedrine,salbutamol,SSRI's,steroids & theophylline; plus **Withdrawal** from anxiolytics/sedatives,ethanol&narcotics.  
**Pregnancy category** <sup>5</sup>: **B**→bupropion, buspirone & sertraline **C**→citalopram, clomipramine, desipramine, **fluoxetine** (has most clinical experience), fluvoxamine, hydroxyzine, MAOIs, nefazodone, **paroxetine**-inactive metabolites & venlafaxine.  
**GAD**=generalized anxiety dx **OCD**=obsessive compulsive dx **PD**=panic dx **PDA**=panic dx with agoraphobia **PTSD**=post traumatic stress dx **SAD**=social anxiety dx; **BP**=blood pressure **DI**=drug interaction **Dx**=disorder

<sup>1</sup> Therapeutic Choices 3<sup>rd</sup> Edition, 2000

<sup>2</sup> Ontario Guidelines for the Management of Anxiety Disorders in Primary Care Fall 2000 1<sup>st</sup> Edition

<sup>3</sup> Micromedex 2003

<sup>4</sup> **Treatment Guidelines:** Drugs for Psychiatric Disorders. **The Medical Letter:** July, 2003; p. 69-76.

<sup>5</sup> Briggs GG, Freeman RK, Yaffe SJ. Drugs in Pregnancy and Lactation 6<sup>th</sup> Ed. Williams & Wilkins, Media, Pennsylvania, 2002.