

PATIENT INFORMATION ON AMITRIPTYLINE

[A-muh-trip-tuh-leen]

Brand names:
Endep, Entrip

This information sheet has been produced by the Australian Rheumatology Association to help you understand the medication that has been prescribed for you. It includes important information about:

- **how you should take your medication**
- **what are the possible side effects**
- **what tests you may have to monitor your condition and to detect unwanted effects**
- **other precautions you should take while you are taking amitriptyline.**

Please read it carefully and discuss it with your doctor.

IMPORTANT THINGS TO REMEMBER

- You must see your rheumatologist regularly to make sure the treatment is working and check for possible side effects.
- You should have regular blood tests as suggested by your rheumatologist.
- If you are worried about any side effects, you should contact your rheumatologist as soon as possible.
- If you stop amitriptyline for any reason, you must contact your rheumatologist.

For more information about inflammatory conditions associated with arthritis, see Arthritis Australia's website:
www.arthritisaustralia.com.au

What is amitriptyline?

Amitriptyline is a medication that is used to help manage chronic (long term) pain. It is often recommended in particular when people have been having a lot of trouble sleeping due to the impact of the pain. It is also used in higher doses to treat depression.

When pain has been present for some time (e.g. more than a few weeks), the nerves in the area can become sensitised. This is when nerves start to send pain signals more often and more easily, meaning your child may start to feel more pain in the area. Things that are usually okay, like shaking hands, may become painful.

How is amitriptyline given?

Amitriptyline is available as oral tablets.

What is the dose, and how often is it given?

The dose depends on the size and weight of your child. It also depends on how well the amitriptyline works for them.

It is usually started at a low dose, which is then increased. This is done for two reasons: to reduce the possibility of side effects, and to find the lowest dose necessary.

Amitriptyline makes your child feel sleepy. It is given at night, so that your child can get to sleep more easily. It should be taken about 30 minutes before bed-time, although some people need to take it earlier.

How long will it be used for?

Amitriptyline is often used as a "cycle breaker" in pain conditions. This means that it will be used for a few months to try to alter how the pain nerves are working. The dose will then be reduced or ceased. If the pain becomes a problem again, amitriptyline can be restarted. Some young people are on amitriptyline for several years.

Are there any side effects?

You might experience side effects with your treatment. Contact your rheumatologist if you have any concerns about possible side effects. Many side effects disappear when amitriptyline treatment is stopped. Side effects are more likely to occur at higher doses.



Most common side effects	Treatment
Sleepiness in the morning	<ul style="list-style-type: none"> • Take it earlier in the evening • Reduce the dose size
Dry mouth	<ul style="list-style-type: none"> • Drink water to keep mouth moist • Use sugar-free chewing gum or sweets • If this is severe, medication may need to be stopped
Dizziness (usually when a dose is increased)	<ul style="list-style-type: none"> • If minor, usually goes away after a few days • If severe, the dose may need to be reduced
Constipation	<ul style="list-style-type: none"> • Eat plenty of fibre, drink plenty of water

Rare side effects	Treatment
Heart; problems with the heart rhythm	<ul style="list-style-type: none"> • Stop taking the medication, and contact your child's doctor
Trouble passing urine	<ul style="list-style-type: none"> • Stop taking the medication, and contact your child's doctor
Confusion, agitation	<ul style="list-style-type: none"> • Stop taking the medication, and contact your child's doctor

Things you need to know when your child is taking this medication

Amitriptyline can be stopped straight away if necessary although it is often gradually reduced prior to stopping.

It is not addictive, and your child doesn't become dependent on it. Within the first few days it will help your child get to sleep more easily.

Amitriptyline is not a pain killer, even though it is used to help pain. It reduces the nerve sensitivity over time. You will start to notice that your child can do things that would have been too painful before. It might take several weeks before seeing this benefit.

Please keep this medication stored away from small children. Amitriptyline can be dangerous in cases of deliberate or accidental overdose.

What to do if your child is sick

Your child can keep taking amitriptyline if they have any normal childhood illness (for example the common cold).

Interactions

Amitriptyline can interact with certain medications: in particular, amitriptyline should not be taken with other antidepressants or tramadol. This can make your child feel unwell.

Immunisations

All vaccinations are safe to have while your child is taking amitriptyline.

Infections

There is no change or increase in the risk of infections.

Myths and misconceptions

At high doses amitriptyline can be used as an anti-depressant. People with severe depression who start on antidepressants can have an increased risk of suicide. This doesn't happen if the person is being treated for pain and doesn't have depression.

You may hear a lot of different information about amitriptyline from friends, pharmacists or people that you know. If you are worried about anything, please talk to your child's doctor or nurse.

Questions?

If you have any questions or concerns write them down and discuss them with your doctor.

Your doctor's contact details

You should see your rheumatologist regularly to make sure the treatment is working and to minimise any possible side effects.

The information in this sheet has been obtained from various sources and has been reviewed by the Australian Rheumatology Association. It is intended as an educational aid and does not cover all possible uses, actions, precautions, side effects, or interactions of the medications mentioned. This information is not intended as medical advice for individual problems nor for making an individual assessment of the risks and benefits of taking a particular medication. It can be reproduced in its entirety but cannot be altered without permission from the ARA. The NHMRC publication: *How to present the evidence for consumers: preparation of consumer publications* (2000) was used as a guide in developing this publication.

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