

Information for patients prescribed Duloxetine

Other formats

If you need this leaflet in another format such as Braille, large print, high contrast, British Sign Language or translated into another language, contact the Patient Advice and Liaison Service:

- 01392 402093 (for Mid Devon, East Devon and Exeter services)
- 01271 314090 (for North Devon services)
- rduh.pals@nhs.net

Why have I been prescribed duloxetine?

Duloxetine is used in the treatment of chronic and neuropathic pain. Duloxetine belongs to the group of medicines called Serotonin Noradrenergic Reuptake Inhibitors (SNRIs), which are also used to treat depression. You may notice that information provided in your medication packet may not mention the type of pain you are experiencing.

How does duloxetine work?

Duloxetine works by changing the amount of specific nerve transmitters in the nervous system, called serotonin and noradrenaline. This reduces pain messages arriving in the brain. You may find duloxetine also gradually lifts your mood and improves your sleep.

Duloxetine may not work straight away; however, you may notice some initial benefit. Duloxetine can take up to six to eight weeks for you to notice significant benefit. You may need to increase the dose; this can be done via your GP.

Duloxetine does not work for everyone, if you have not seen an improvement in your symptoms after six to eight weeks, consult your GP with a view to discontinuing duloxetine as you are not noticing any benefit.

When should I take it?

It is best to take duloxetine at the same time each day. You may wish to take it in the morning, but if you find that you feel drowsy, try taking it in the evening.

How is duloxetine taken?

- The capsules should be swallowed whole, with a glass of water.
- Duloxetine may be taken on a full or empty stomach.
- DO NOT take more than prescribed.

What if I forget or miss a dose?

- Take it as soon as you remember.
- If you take one dose only in the morning and you miss this dose, do not take the medicine in the evening. Wait until the next morning and skip the missed dose.
- DO NOT take two doses together.

Can I take duloxetine long-term?

Yes, if you find it helpful. You may wish to reduce treatment every so often, to see if your pain is still a problem. This should be done with the advice and support of your GP, pharmacist or pain specialist.

What are the possible side effects?

Most side effects are mild and can be expected to stop after a few doses. There are several common side effects associated with taking duloxetine. If you have concerns or if side effects are severe, please contact your doctor or pharmacist immediately.

Common or very common side effects	Uncommon side effects
<ul style="list-style-type: none"> • Headache • Drowsiness • Sickness (nausea) • Dizziness • Blurred vision • Anxiety • Decreased appetite • Constipation • Diarrhoea • Dry mouth • Fatigue • Flushing 	<ul style="list-style-type: none"> • Apathy • Arrhythmias • Burping • Chills • Impaired concentration • Dysphagia (difficulty swallowing) • Ear pain • Hyperglycaemia • Increased risk of infection • Hepatic disorders • Postural hypertension • Movement disorder

Common or very common side effects	Uncommon side effects
<ul style="list-style-type: none"> • Sexual dysfunction, reduced libido, erectile dysfunction/delay (this may continue after stopping the medication) • Tinnitus • Yawning • Dysuria (painful or uncomfortable urination) • Increased sweating • Rash • Flatulence • Trouble sleeping • Tremor • Tingling, numbness or pins and needles • Palpitations • Increased blood pressure • Muscle spasm 	

A full list can be found in the patient information leaflet included in the medication packet.

Serotonin Syndrome (also known as serotonin toxicity)

Duloxetine increases serotonin levels in the brain. Antidepressants, some pain medications (such as tramadol and tapentadol), St John's Wort and recreational drugs such as cocaine, MDMA, amphetamines and LSD have a similar effect. Therefore, caution is required when taking a combination of these medications. If the levels of serotonin become too high, you may develop serotonin toxicity.

The symptoms of serotonin toxicity include:

- agitation or restlessness
- altered mental state
- confusion

- rapid heart rate and high blood pressure
- dilated pupils
- dry eyes
- loss of muscle coordination or twitching muscles
- muscle rigidity
- heavy sweating
- diarrhoea
- headache
- shivering and goose bumps

Severe symptoms can be life-threatening and include:

- high fever
- seizures
- irregular heartbeat
- unconsciousness

If you have symptoms of serotonin toxicity, do not take the next dose and seek immediate medical attention.

Can I drink alcohol?

Alcohol increases the sedative effects of duloxetine. It is advised that you do not drink alcohol when you start taking duloxetine. Once you are settled on a steady dose, you may drink alcohol in moderation, but it may make you more drowsy than normal.

Can I drive?

Duloxetine may cause drowsiness. If this happens, **DO NOT** drive.

It remains the responsibility of the driver, to consider whether their driving is impaired before getting into a vehicle.

Do NOT drive if you experience any of the following symptoms:

- Sleepiness/drowsiness
- Poor co-ordination
- Impaired or slow thinking
- Dizziness
- Visual problems

What if I want to stop taking duloxetine?

If you stop taking duloxetine suddenly, you might experience withdrawal symptoms. Speak to your healthcare professional (doctor, nurse, pharmacist) who will be able to supervise a gradual reduction.

How to store duloxetine at home?

Please keep your medications locked away and out of the reach of children and pets.

How to dispose of unused medications?

Please take any excess or medications you no longer need to your local pharmacy for disposal. **Do not** throw away in general waste. **Do not** give any excess medications to friends or relatives.

What should I tell the prescriber before commencing duloxetine?

- If you are allergic to any medications
- If you are taking any prescribed, over-the-counter or herbal medicines
- If you are taking any recreational drugs
- If you have epilepsy or glaucoma
- If you are taking any medicine that causes sleepiness (e.g. strong painkillers such as morphine) or antidepressant medication that increase the level of serotonin (e.g. tramadol, TCAs, SSRIs and SNRIs)
- If you are pregnant or breastfeeding, or if you are planning to become pregnant in the future
- If you take any anticoagulants, antiplatelet agents or other drugs to thin the blood
- If you have or have had a mental health problem
- If you have kidney or liver problems
- If you are taking any antidepressant
- If you are taking ciprofloxacin, an antibiotic used to treat infections
- If you have increased intraocular pressure, or those at risk of acute narrow-angle glaucoma

Where can I find more information on duloxetine?

- Please ask your prescriber or pharmacist for more information, or if you have further questions concerning your medications.
- Your medication packet will contain a patient information leaflet for you to read
- A good website to use is the Electronic Medical Compendium (search for EMC) or go directly to <https://www.medicines.org.uk/emc/>



Further reading:

- British National Formulary (BNF) - <https://bnf.nice.org.uk/drugs/duloxetine/#indications-and-dose>



- NICE (National Institute for Health and Care Excellence) Guideline [CG193]: Chronic pain (primary and secondary) in over 16s: assessment of all chronic pain and management of chronic primary pain (2021) - <https://www.nice.org.uk/guidance/ng193>



- NICE (National Institute for Health and Care Excellence) Guideline [CG173]: Neuropathic pain in adults: pharmacological management in non-specialist settings (2020) - <https://www.nice.org.uk/guidance/cg173>



Your notes

PALS

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Scan the QR code to visit the Care Opinion website →

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