



Sertraline for obsessive compulsive disorder (OCD) and depression

This leaflet is for parents and carers about how to use this medicine in children. Our information sometimes differs from that provided by the manufacturers, because their information is usually aimed at adults. Please read this leaflet carefully. Keep it somewhere safe so that you can read it again.

Do not stop giving this medicine suddenly, as your child may get withdrawal symptoms.

Name of medicine

Sertraline

Brand name: Lustral®

Why is it important for my child to take this medicine?

Sertraline is a type of drug called a selective serotonin reuptake inhibitor, which are commonly known as SSRIs. SSRIs increase the activity of a chemical called serotonin in the brain. This helps to reduce the symptoms of OCD, particularly when used with therapy. It also helps to reduce the symptoms of depression and to improve mood and behaviour.

What is sertraline available as?

Tablets: 50 mg, 100 mg

Liquid Medicine: 50 mg in 5 mL, can be ordered specially from your pharmacist.

When should I give sertraline?


Sertraline is usually given **once** each day, this is usually in the morning.

Give the medicine at about the same time each day so that this becomes part of your child's daily routine, which will help you to remember.

How much should I give?

Your doctor will work out the amount of sertraline (the dose) that is right for *your* child. The dose will be shown on the medicine label.

Your doctor may suggest that your child has a low dose to start with. They may then increase the dose as your child gets used to the medicine, depending on how your child responds to it.

 **It is important that you follow your doctor's instructions about how much to give.**

How should I give it?



Tablets should be swallowed with a glass of water or juice. Your child should not chew the tablet. If your child has difficulty swallowing tablets, you can crush it and mix with a small amount of soft food such as yogurt or jam. Crushed tablets have a bitter taste, and can have a numbing effect on the tongue so make sure your child swallows it straight away, without chewing. If their tongue is numb, avoid giving them hot food or drink until feeling returns.



Liquid medicine: Measure out the right amount using an oral syringe or medicine spoon. You can get these from your pharmacist. Do not use a kitchen teaspoon as it will not give the right amount.

When should the medicine start working?

It may take up to 4 weeks before your child starts to feel better. It is important that you continue to give sertraline to your child during this time. If you are not sure whether it is helping, discuss this with your doctor but continue to give the medicine.

What if my child is sick (vomits)?


- If your child is sick less than 30 minutes after having a dose of sertraline, give them the same dose again.
- If your child is sick more than 30 minutes after having a dose of sertraline, you **do not** need to give them another dose. Wait until the next normal dose.

If your child is sick again, seek advice from your family doctor, pharmacist or hospital.

What if I forget to give it?

Give the missed dose when you remember during the day, as long as this is at least 12 hours before the next dose is due.

If you have missed more than one dose, contact your doctor or pharmacist for advice.

 **Never give a double dose of sertraline.**

What if I give too much?


 **It may be dangerous to give too much sertraline.**


If you think you may have given your child too much sertraline, contact your doctor or local NHS services (details at end of leaflet) or take your child to hospital. Take the medicine container or packaging with you, even if it is empty. This will be useful to the doctor. Have the medicine or packaging with you if you phone for advice.


Are there any possible side-effects?


We use medicines to make our children better, but sometimes they have other effects that we don't want (side-effects).


Side-effects you must do something about

 If your child seems confused or agitated and has a fever (temperature above 38°C), muscle stiffness and a rapid heartbeat, **take them to hospital or call an ambulance straight away**. They may have a rare but serious reaction called serotonin syndrome.

 If your child gets swelling of the eyes, face or lips, a rash, redness, itchiness, blistering or peeling of the skin, or has difficulty breathing, take them to your doctor or hospital straight away. They may be allergic to sertraline.

 Very rarely, sertraline can cause seizures (convulsions or fits). If your child has a seizure, phone for an ambulance. Do not restrain your child, but try to protect them from being hurt (e.g. put a cushion under their head and move them away from furniture).

 If your child has trouble focusing, seems confused, unsteady or disorientated, or has hallucinations (seeing things that are not there), contact your doctor straight away.

 If your child feels very low or suicidal, tense, nervous, worried or on edge, contact your doctor as soon as possible.

Other side-effects you need to know about

Your child may get some of the following side-effects when they first start taking sertraline. These usually wear off after a few days as your child's body gets used to the medicine. If they are still a problem after a week, contact your doctor.


- Your child may get indigestion, stomach ache, feel sick (nausea) or be sick (vomit). Giving the medicine with some food or milk may help.
- Your child may get diarrhoea or constipation (difficulty doing a poo). They may need to urinate (do a wee) more often than usual or have difficulty controlling urination.
- They may have a headache.
- They may have difficulty sleeping or have nightmares, or they may feel more sleepy and tired than normal.
- Sertraline can affect the ability to do skilled tasks such as driving, riding a bicycle or playing sports. Your child should take care when doing tasks that require coordination until they get used to the medicine.
- Your child's appetite may be affected – they may feel more or less hungry than usual. Tell your doctor if your child gains or loses a lot of weight.
- They may have difficulty swallowing. Try giving your child soft food to eat.
- They may produce a milky substance from the nipples. This is nothing to worry about but contact your doctor if this happens.
- Some people who take sertraline feel elated (very happy). Contact your doctor if this happens.


There may sometimes be other side-effects that are not listed above. If you notice anything unusual and are concerned, contact your doctor. You can report any suspected side-effects to a UK safety scheme at www.mhra.gov.uk/yellowcard


Can other medicines be given at the same time as sertraline?

- You can give your child medicines that contain paracetamol, unless your doctor has told you not to.
- Sertraline should not be taken with some medicines that you get on prescription. It is important to tell your doctor and pharmacist about any other medicines your child is taking **before** giving sertraline.
- Check with your doctor or pharmacist **before** giving any other medicines to your child. This includes herbal and complementary medicines.

Is there anything else I need to know about this medicine?

 Do not stop giving sertraline suddenly, as your child may get withdrawal effects (dizziness, feeling sick, pins and needles, headache and anxiety). If you or your child wants to stop this medicine, discuss this with your doctor. They may want to reduce the dose slowly.


 Do not change the dose of sertraline without discussing this with your doctor.

 Your child should not eat grapefruit or drink grapefruit juice as this may increase the amount of sertraline in the body, which could be harmful.

- If your daughter thinks she may be pregnant she should see her doctor as soon as possible and continue taking sertraline in the meantime
- When used for the treatment of OCD, sertraline works best when used with behavioural therapy.

General advice about medicines

- If you are not sure a medicine is working, contact your doctor but continue to give the medicine as usual in the meantime. Do not give extra doses as you may do harm.
- Only give this medicine to *your* child. Never give it to anyone else, even if their condition appears to be the same, as this could do harm.

 If you think someone else may have taken the medicine by accident, contact your doctor for advice.

- Make sure that you always have enough medicine. Order a new prescription at least 2 weeks before you will run out.
- Make sure that the medicine you have at home has not reached the 'use by' date on the packaging. Give old medicines to your pharmacist to dispose of.

Where should I keep this medicine?

- Keep the medicine in a cupboard, away from heat and direct sunlight. Liquid medicine may need to be kept in the fridge. Check the instructions on the bottle.
- Make sure that children cannot see or reach the medicine.
- Keep the medicine in the container it came in.

Who to contact for more information

Your child's doctor, pharmacist or nurse will be able to give you more information about sertraline and about other medicines used to treat depression and OCD. You can also get useful information from:

England: NHS 111 Tel 111 www.nhs.uk

Scotland: NHS 24 Tel 111 www.nhs24.scot

Wales: NHS Direct Tel 0845 46 47 (2p per min) or 111 (free) www.nhsdirect.wales.nhs.uk

Northern Ireland: NI Direct www.nidirect.gov.uk

Mind: 0300 123 3393 www.mind.org.uk

YoungMinds: 0808 802 5544 www.youngminds.org.uk

ChildLine: 0800 1111 www.childline.org.uk

www.medicinesforchildren.org.uk



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The primary source for the information in this leaflet is the British National Formulary for Children. For details on any other sources used for this leaflet, please contact us through our website, www.medicinesforchildren.org.uk. We take great care to make sure that the information in this leaflet is correct and up-to-date. However, medicines can be used in different ways for different patients. It is important that you ask the advice of your doctor or pharmacist if you are not sure about something. This leaflet is about the use of these medicines in the UK, and may not apply to other countries. The Royal College of Paediatrics and Child Health (RCPCH), the Neonatal and Paediatric Pharmacists Group (NPPG), WellChild and the contributors and editors cannot be held responsible for the accuracy of information, omissions of information, or any actions that may be taken as a consequence of reading this leaflet.