

# Escitalopram

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## ABSTRACT

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Escitalopram belongs to the class of Selective Serotonin Reuptake Inhibitors (SSRIs). It acts by serotonin reuptake inhibition by blocking the serotonin transporter (SERT).

SSRIs are used in psychopharmacology and have a long half life- 22-27 hours. It is safe and is one of the most prescribed psychiatric drugs.

**Keywords:** SSRIs, Serotonin Reuptake Inhibition, Indications.

\*See End Note for complete author details

Escitalopram belongs to the class of Selective Serotonin Reuptake Inhibitors (SSRIs).

### Therapeutic indications

Depression, Generalized anxiety disorder, Obsessive-compulsive disorder, Panic disorder, Social phobia, Premenstrual dysphoric disorder, Post traumatic stress disorder, Premature ejaculation, Eating disorders etc.

### Mechanism of action

Serotonin reuptake inhibition by blocking the serotonin transporter (SERT) causes adaptive changes in receptor sensitivity, which is correlated to the delayed therapeutic action and tolerance to side effects.

### Dosage and administration

Available in 10 and 20mg scored tablets. It can be started at 5mg or 10mg and increased to 20mg after 1 week. It is usually given as once daily in the morning, to avoid sleep disturbances.

### Adverse effects

As mentioned above, the side effects are generally worse in the initial period.

### Gastrointestinal

Nausea is the most common and early side effect. It can be reduced by starting at a lower dose and instructing to take after meals.

### Sexual dysfunction

Delayed ejaculation in men, delayed orgasm in women

and diminished libido can occur. Decreasing the dose and giving drug holidays may help manage these symptoms.

### Discontinuation syndrome

Although rare with Escitalopram, these symptoms include anxiety, agitation, gastrointestinal distress and a flu-like syndrome.

### Bleeding

Depletion of serotonin in platelets can lead to excessive bleeding diathesis, especially when combined with anti-platelet therapy, NSAIDs, aspirin or clopidogrel.

### Hyponatremia

Risk factors include older age, female gender and volume depletion.

### Pharmacokinetics

The half life is 27 to 32 hours. Hence missing a dose generally doesn't cause discontinuation symptoms. The plasma protein binding is 56%, which is much less compared to other SSRIs. Escitalopram is a modest inhibitor of CYP2C19 and CYP3A4, which is lesser number of hepatic enzymes involved compared to other SSRIs. These factors reduce the chances of drug interaction.

### Pregnancy and breast feeding

Among antidepressants available, Escitalopram is among the safest in this period. The secretion into breast milk is also lesser compared to other SSRIs.

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## CONCLUSION

Rarely has a class of drugs transformed a field as dramatically as SSRIs transformed clinical psychopharmacology (viz. The Prozac Revolution), making them one of the most widely prescribed psychiatric medications.<sup>1</sup> Escitalopram, the latest addition to the class (2002), is among the safest, if not THE safest SSRI and hence among the safest medications currently available for the treatment of depression and anxiety disorders.

## END NOTE

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