



## **Physician Fact Sheet on Antidepressant Therapy for Adult Persons with Mental Retardation and Developmental Disabilities (MR/DD)**

1. Antidepressants can be prescribed for depression, anxiety disorders and self-injurious behavior (SIB).
2. Selective serotonin reuptake inhibitors (SSRIs) are effective in treatment of depression, anxiety disorders, and SIB for persons with all levels of intellectual impairment.
3. All SSRIs, e.g., Lexapro and sertraline, work well in persons with MR/DD but improvement of symptoms occurs over 4 to 6 weeks.
4. SSRIs can cause akathisia, i.e., restlessness and agitation.
5. SSRIs can produce sedation, agitation, sleep disturbance, and weight changes.
6. Third generation antidepressants, including venlafaxine and mirtazapine, can be used in place of SSRIs.
7. Tricyclic antidepressants can be used when SSRIs are ineffective.
8. Tricyclic antidepressants may produce many side-effects including confusion, urinary retention, and constipation.
9. Nortriptyline is the tricyclic antidepressant with least toxicity.
10. Avoid the use of polypharmacy such as two antidepressants.
11. Avoid monoamine oxidase inhibitors because of problems with dietary restrictions or drug-drug interactions.
12. Electroconvulsive therapy is effective in persons with MR/DD, especially those with severe symptoms, catatonia or psychosis.

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