

Withdrawal from Psychiatric drugs

If you are considering withdrawing from a psychiatric medication. There are a few things worth taking into consideration. Firstly, it is important to be aware that many people experience withdrawal effects. These vary from person to person. Some experience little or no effects, for others the withdrawal process can be very harsh and unpleasant, and can be associated with difficult physical, emotional or psychological experiences. The most commonly experienced discontinuation/withdrawal symptoms are dizziness, numbness and tingling, gastrointestinal disturbances (particularly nausea and vomiting), headache, sweating, anxiety and sleep disturbances. Some people experience anxiety, low mood that was even worse than before starting the medication and a very small minority may even experience suicidal ideation or feeling manic. Withdrawal, therefore can be dangerous in some instances, so it's worth taking the time to consider if it is wise for you to withdraw, why you would like to withdraw, and what you can do to increase the chances of successful withdrawal.

The risk of withdrawal effects are increased in the following instances

- if you are on the medication for a long period of time
- If you are reducing or withdrawing from a high dose of the medication

For example, it is likely to be much easier for a person, who takes 5mg of citalopram for 2 weeks to withdraw than it would be for a person who has taken 40 mg of citalopram for 10 years. In the latter scenario, gradual withdrawal or tapering the dose of the medication would be recommended to reduce the risk of withdrawal effects. In the words of Peter Breggin, psychiatrist, 'as a very rough gauge, it's not uncommon to require a month of withdrawal for every year of drug exposure, so that if you've been on a medication for five years, you might need five months to withdraw from it'. Some people require even longer than this to withdraw and reductions of 10% per month may be necessary. It is important to take your time to slowly taper the drug, under the supervision of an experienced GP or Psychiatrist.

Withdrawal effects and 'relapse'

Often withdrawal effects are mixed up with relapse of the condition that indicated the prescription of the drug in the first instance. This is because withdrawal effects can sometimes trigger very difficult emotions, such as depression, irritability or anxiety.

For this reason it is often important to consider when is the best time to try withdrawal and also to have planned activities and supports in place to help optimise wellbeing during this period. It is typically wise to withdraw when you are in a 'good place' in your life emotionally and psychologically.

Don't rush the withdrawal process. Listen to your feelings at every stage along the way. Do not withdraw faster than you feel comfortable with. If you begin to feel too physically or emotionally uncomfortable, you can usually solve the problem by returning to the previous dose. For example, if you become very depressed, anxious and fatigued within a few days of reducing

fluoxetine from 40mg to 20 mg, you can immediately return to the 40mg dose and that should solve the problem if it's due to withdrawal. You may try again at a later date, this time withdrawing by a smaller amount e.g. 40mg to 37.5mg, and 37.5 to 35mg and this may prove easier for you.

If withdrawal symptoms do arise it can be useful to consider having a personal health program to rely on. This program may include daily exercise, stress release, bodywork such as the Alexander technique, craniosacral therapy or massage, herbal or nutritional supplementation and a way of dealing with stressful thoughts or doubts that arise such as the work of Byron Katie (www.thework.com). Some studies suggest taking a high quality omega 3 fatty acid at 1,000mg daily may reduce risk of relapse or withdrawal. Healthy diet, conscious breathing, meditation, visualization, and a therapeutic relationship with a psychologist, psychotherapist or supportive health care practitioner may complete the program. People who successfully withdraw from Psychiatric medications usually have a number of internal and external supports to call upon if life becomes very challenging during and after the period of withdrawal.

Other tips

- Inform yourself about the drug you take, including withdrawal risks
- Check in with your GP regularly regarding your progress
- Inform friends or family that you are withdrawing from medication and ask them daily to keep an eye on you (You may not realise that you are losing control over your emotions or behaviour, so trusted family or friends can help you, if you need it)
- Bristol Drug and tranquilizer project offer a free helpline especially for those considering or going through withdrawal www.btpinfo.org.uk

For an extraordinarily comprehensive guide to coming off psychiatric drugs, you can download a free e-book entitled 'Harm Reduction Guide to Coming Off Psychiatric Drugs' at www.willhall.net