

## Distinguishing antidepressant withdrawal from relapse

Antidepressant withdrawal symptoms can be mistaken for 'relapse'. While similar, it is possible to differentiate them.<sup>1</sup>

Withdrawal symptoms start soon after decreasing or stopping antidepressants (a few days) and improve soon (a few days) after re-starting them. Symptoms include physical or unusual symptoms such as dizziness, headache, and 'brain zaps', which come in a wave pattern that peaks after a few days and gradually resolves over weeks.

A red flag for withdrawal syndrome is if a patient decreases their antidepressant dose and starts experiencing symptoms that quickly reduce when re-starting their antidepressant.

Minimising symptoms requires hyperbolic tapering<sup>2</sup> with very slow reductions over many months. For example, a tapering schedule for sertraline might involve decreasing from 50mg to 25mg, then to 15mg, 10mg, 6mg, 4mg, 2mg, 1mg, and finally stopping at 0mg, with two to four weeks between each dose adjustment.

### References:

1. [Distinguishing withdrawal from relapse, with Prof Katharine Wallis](#) YouTube
  2. [Depression in adults quality statement 4: Stopping antidepressants](#) NICE (2023 update)
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