CITALOPRAM (Celexa) Fact Sheet [G]

BOTTOM LINE:
Citalopram does not have any pediatric indications, and its efficacy data are limited and modest; however, it is a reasonable second-line off-label SSRI option.

PEDIATRIC FDA INDICATIONS:
None.

ADULT FDA INDICATIONS:
Major depression.

OFF-LABEL USES:
OCD; major depression; PTSD; social anxiety; GAD; panic disorder; PMDD.

DOSAGE FORMS:
- **Tablets (G):** 10 mg, 20 mg (scored), 40 mg (scored).
- **Oral solution (G):** 10 mg/5 mL.

PEDIATRIC DOSAGE GUIDANCE:
- Minimal dosing guidance in children and adolescents.
- Ages 7–11: Start 10 mg QD, increase by 5 mg/day increments every one to two weeks; max 40 mg/day.
- Ages 12–17: Start 10 mg or 20 mg QD, increase by 10 mg/day increments every one to two weeks; max 40 mg/day.
- Most patients take it in the morning, but bedtime dosing is OK if there is no insomnia.

MONITORING: ECG in patients on >40 mg/day.

COST: $

SIDE EFFECTS:
- Most common: Nausea, insomnia, anxiety, sexual side effects, apathy, headache.
- Serious but rare: Hyponatremia, mainly in the elderly; gastrointestinal bleeding, especially when combined with NSAIDs such as ibuprofen.

MECHANISM, PHARMACOKINETICS, AND DRUG INTERACTIONS:
- Selective serotonin reuptake inhibitor.
- Metabolized primarily through CYP2C19 and 3A4; t ½: 35 hours.
- Avoid use with MAOIs (allow a two-week washout period); avoid other serotonergic agents (serotonin syndrome).
- Use caution in patients taking CYP2C19 inhibitors (eg, cimetidine, omeprazole), which will increase citalopram levels and potential for QT prolongation.

EVIDENCE AND CLINICAL PEARLS:
- A 12-week randomized double-blind European study of 244 adolescents with depression found no significant difference in improvement between citalopram and placebo. When patients receiving psychotherapy were excluded from analysis, there were significantly higher response and remission rates with citalopram than placebo.
- Another eight-week randomized double-blind trial in 174 children and adolescents with depression found citalopram response rates low (36%), but significantly higher than placebo (24%).
- Citalopram's maximum daily dose was reduced to 40 mg/day by the FDA in August 2011 due to data suggesting increased QTc interval prolongation at doses >40 mg/day. Mean QTc interval prolongation at 60 mg/day was 18.5 msec (vs ziprasidone, which has been shown to increase this interval by 20.6 msec).
- Use lower doses and max 20 mg/day in patients deemed to be poor CYP2C19 metabolizers.

FUN FACT:
A parody prescription drug commercial by the website *Funny or Die* is based on a combination of real-life clozapine and citalopram. The tagline is "DredLexa: the first depressant for rappers—sad music is better music."