
FLUVOXAMINE (Luvox, Luvox CR) Fact Sheet [G]

Bottom Line:

Fluvoxamine is used less often due to twice-daily dosing, sedation, risk for drug interactions, and fewer data for uses other than OCD, even though it's likely just as effective as other SSRIs.

FDA Indications:

OCD (8+ years).

Off-Label Uses:

Major depression; panic disorder; generalized anxiety disorder; PTSD.

Dosage Forms:

- **Tablets (G):** 25 mg, 50 mg (scored), 100 mg (scored).
- **ER capsules (G):** 100 mg, 150 mg.

Dosage Guidance:

- Start 50 mg QHS; may ↑ by 50 mg/day increments every four to seven days as tolerated; max dose 300 mg/day. Daily doses over 100 mg should be divided BID.
- ER: Start 100 mg QHS; may ↑ by 50 mg/day increments weekly; max dose 300 mg/day.
- Children and adolescents (8–17 years): Start 25 mg QHS, ↑ by 25 mg/day increments every four to seven days; max 200 mg/day (8–11 years) or 300 mg/day (12–17 years). Daily doses over 50 mg should be divided BID. Due to limited dose availability, ER not appropriate for children.

Monitoring: Sodium in patients at risk.

Cost: \$; ER: \$\$\$

Side Effects:

- Most common: Nausea, vomiting, somnolence, insomnia, nervousness, sexual side effects, sweating, tremor, headache.
- Serious but rare: Hyponatremia, mainly in the elderly; gastrointestinal bleeding, especially when combined with NSAIDs such as ibuprofen.
- Pregnancy/breastfeeding: Considered relatively safe.

Mechanism, Pharmacokinetics, and Drug Interactions:

- Serotonin reuptake inhibitor.
- Metabolized primarily through CYP1A2 and 2D6; potent inhibitor of CYP1A2 and 2C19; moderate inhibitor of CYP2C9 and 3A4; t_{1/2}: 16 hours.
- Avoid use with MAOIs (two-week washout if switching to MAOI); avoid other serotonergic agents (serotonin syndrome). Caution with substrates of CYP1A2 and 2C19.

Clinical Pearls:

- Discontinuation symptoms tend to be worse with fluvoxamine compared to other SSRIs.
- Consider using ER in patients who experience daytime sedation or for whom twice-daily dosing is a challenge.
- Always ask patients about other medications, as fluvoxamine can interact with many of them.
- Fluvoxamine is effective and approved for use in other countries for treating depression.
- Low-dose fluvoxamine (25–50 mg/day) has been used to inhibit the metabolism of clozapine to norclozapine (metabolite associated with adverse effects) in order to achieve an optimal 1.5:2 ratio of clozapine to norclozapine.

Fun Fact:

Preliminary data showed fluvoxamine use resulted in less clinical deterioration in patients with symptomatic COVID-19 compared to placebo. Investigators are looking into whether its binding and activation of sigma-1 receptors and subsequent reduced cytokine production may help mitigate the severe inflammatory process associated with COVID-19 infection.