

Atomoxetine

Strattera

A nonstimulant for ADHD. Benefit builds gradually, with daily treatment and a plan that fits your life.

From Jeffrey Panko, PMHNP-BC's education collection ·

Draft for review · Clinical content has not been revalidated for this website.

TAKE EVERY DAY AS PRESCRIBED

CAPSULES: 10, 18, 25, 40, 60, 80, 100 mg

For adults and children age 6+ · Not a controlled medicine · Swallow capsules whole.

What it is used for

It treats ADHD alongside practical support at home, school or work. It is an option when a stimulant is unsuitable or unwanted.

It is not a quick focus boost or general treatment for depression or anxiety. Agree on specific treatment goals with your prescriber.

How it works

It slows removal of norepinephrine, a brain messenger involved in attention and impulse control. This can help ADHD symptoms.

It lacks the usual stimulant high or addiction potential. Taking extra is still unsafe: side effects and overdose matter.

What to expect over time

THE FIRST 1-2 WEEKS

Early side effects may appear before much benefit. Keep your safety check-ins.

THE NEXT SEVERAL WEEKS

Focus and follow-through may improve gradually. Your team adjusts the dose if needed.

ABOUT 6-12 WEEKS

Review meaningful progress at a suitable dose. Benefit and timing differ for everyone.

Taking your medication

Follow your bottle: usually each morning, or split morning and late afternoon/early evening. Take daily, not just on busy days.

Food may ease nausea. Swallow capsules whole. If powder gets in an eye, rinse with water and get medical advice.

Ask before changing timing or dose. Some medicines require slower dose increases. Do not drive until you know your response.

When to get help

Call 911: chest pain, fainting, stroke symptoms, severe breathing trouble, seizure or severe allergy. Possible overdose? Call Poison Control: 1-800-222-1222.

Get urgent help: suicidal thoughts, hallucinations, little need for sleep or major behavior changes. Watch children's mood closely early and after dose changes.

Stop and seek care: yellow skin/eyes, dark urine or unexplained right-upper belly pain. Inability to urinate or a painful/prolonged erection needs urgent care.

Early side effects

Nausea, stomach upset, less appetite, fatigue, dizziness, dry mouth or constipation may occur. Some people feel sleepy; others have trouble sleeping.

Other effects to discuss

Report sexual changes, trouble starting urine, ongoing weight loss or feeling unlike yourself. Blood pressure and pulse can rise; children's growth needs checking.

What to keep track of

Keep BP/pulse, weight and growth checks. Track sleep, appetite, mood and daily function.

Before you start

Tell your team about heart disease, fainting, family sudden death, blood-pressure problems, bipolar disorder, suicidal thoughts, liver disease, glaucoma, pheochromocytoma, seizures or urinary problems. Review all medicines and supplements. Blood tests are not routine, but liver symptoms need prompt tests.

Medicines & interactions

MAOIs: do not combine

Allow at least 14 days when switching either way with MAOI antidepressants. Linezolid and IV methylene blue also matter; your clinician must plan treatment.

Some antidepressants

Fluoxetine, paroxetine, bupropion and duloxetine can raise atomoxetine levels. Your prescriber reviews the dose and pace; do not adjust it yourself.

Heart and asthma medicines

Review blood-pressure medicines, asthma inhalers and especially oral albuterol. They may need closer pulse/BP checks. Do not stop a rescue inhaler yourself.

Stimulants, cold remedies, alcohol

Check other ADHD drugs, decongestants, caffeine/energy drinks, alcohol and supplements. Ask your pharmacist before adding anything.

Everyday tips

Link your dose to a daily routine and use reminders.

Keep regular meals and a consistent sleep schedule.

Use practical ADHD supports alongside medicine.

Tell your team about side effects between appointments.

Your questions, answered

What if I miss a dose?

Take it when remembered, but never exceed your prescribed total in any 24 hours. Do not double. If the next dose is close or you are unsure, ask your pharmacist.

Can I stop it?

A taper is generally not needed, but plan stopping with your team because ADHD symptoms may return. Severe side effects need urgent advice, not waiting for a routine visit.

Will it change my personality?

The goal is easier daily functioning, not making you feel dulled or unlike yourself. Report troubling mood or behavior changes; do not assume you have to live with them.

Pregnant or breastfeeding?

Make an individual plan. Pregnancy risks remain uncertain. Small newer studies show low transfer into milk; long-term data are limited. Watch a nursing baby for sleepiness, poor feeding or poor weight gain.

Storage & safety

Keep in the original container at room temperature, away from children and pets. Never share. Ask a pharmacy about take-back disposal. If a capsule breaks, wash exposed hands and surfaces.

A final reminder

Follow your prescribed plan.

About this information

For general information only; not a substitute for individualized medical advice. This sheet does not cover every risk or interaction. Ask your prescriber or pharmacist before changing how you take this medication.

Sources

1. <https://dailymed.nlm.nih.gov/dailymed/fda/fdaDrugXsl.cfm?setid=309de576-c318-404a-bc15-660c2b1876fb&type=display>
 2. <https://www.ncbi.nlm.nih.gov/books/NBK501732/>
 3. <https://womensmentalhealth.org/adhd-medications/>
-

Educational inclusion does not mean this medication or its indications are treated at this practice. Review the guide for your exact product with your prescriber or pharmacist.

thoughtscape NP Psychiatry
Jeffrey Panko, PMHNP-BC