

Desipramine

Norpramin • tablets: 10, 25, 50, 75, 100 and 150 mg

A tricyclic antidepressant that acts mainly on norepinephrine. Heart safety and careful dosing matter with this medicine.

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

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

FOLLOW YOUR DOSE PLAN

OVERDOSE NEEDS IMMEDIATE HELP

Not FDA-approved for children. This sheet is not a personal dosing or medication-switching plan.

What it is used for

FDA-approved for depression in adults. It may be considered when other antidepressants have not helped enough.

Nerve pain and selected ADHD treatment are off-label. Heart and overdose risks limit its role, especially in children.

How it works

Slows norepinephrine reuptake, changing signaling between nerve cells. Mood benefit builds over time.

It is often less sedating or drying than some other tricyclics, but can still affect sleep, bowels, blood pressure and heart rhythm.

What to expect over time

FIRST DAYS

Dizziness, dry mouth or sleep changes may appear before benefit. Stand up slowly and report troublesome effects.

OVER WEEKS

Improvement may start within 2–4 weeks; fuller benefit may take longer. Review mood and daily function, not just energy.

ONGOING

Keep planned visits, ECGs and blood tests. Feeling well does not mean you should stop or increase the dose yourself.

Taking your medication

Take the prescribed dose at consistent times, with or without food. It may be once daily or divided. Ask about morning versus evening timing if sleep is affected.

Follow gradual dose changes. Do not double missed doses or stop abruptly. Avoid alcohol. Do not drive until you know how it affects you.

Do not change other medicines without checking. Tell the surgery or dental team you take desipramine.

When to get help

Call 911: seizure, collapse, breathing trouble or immediate self-harm danger. For any suspected overdose, get help now even if well; see the “Storage & safety” section.

Urgent care: fainting, irregular heartbeat, severe belly or eye pain, inability to urinate, or fever with confusion, tremor or stiffness.

Call promptly: worsening mood, suicidal thoughts, high energy with little sleep, severe constipation, fever/sore throat, jaundice, rash or new confusion.

Early side effects

Dry mouth, constipation, blurred vision, sweating, nausea, dizziness and either sleepiness or insomnia can occur. Plan dental and bowel care; persistent palpitations need review.

Other effects to discuss

Sexual difficulties, weight changes, ongoing constipation or feeling groggy deserve discussion. Lower average sedation than some related drugs does not make it risk-free.

What to keep track of

Review mood, blood pressure, pulse, weight and bowel/urinary symptoms. ECGs and blood levels depend on dose, risks and interactions. Normal results do not rule out toxicity. Keep the agreed testing schedule.

Before you start

Review heart disease/recent heart attack, fainting, family sudden death, bipolar/suicide history, seizures, glaucoma, constipation, urinary problems, thyroid treatment and kidney/liver disease. Mention pregnancy, breastfeeding, allergies and all medicines. Older adults have greater fall, confusion and heart risks. Do not use during acute heart-attack recovery or with an MAOI.

Medicines & interactions

MAOIs and switches

Antidepressant MAOIs need at least 14 days' separation in either direction. Linezolid or IV methylene blue needs specialist management. Do not plan a switch yourself.

Medicines that raise drug levels

Check fluoxetine, paroxetine, bupropion, cimetidine and quinidine. Dose changes or blood levels may be needed. Fluoxetine's interaction can persist for 5 weeks or longer after stopping.

Heart rhythm and serotonin

Check rhythm-affecting medicines, other antidepressants, tramadol, triptans and St. John's wort. Combinations can increase heart or serotonin-toxicity risks.

OTC products and other treatments

Decongestants, sedating allergy/sleep products, sedatives, thyroid and blood-pressure medicines need review. Avoid alcohol. Check every new medicine or supplement first.

Everyday tips

Track mood, sleep, energy and useful daily activities. Tell your team if you feel unusually wired.

Use reminders and keep follow-ups. Ask how to time a blood test around your doses.

Rise slowly. Discuss dry-mouth, bowel and sexual effects rather than quietly stopping treatment.

Lock medicines away. Agree on the amount to keep at home; even a small supply can be dangerous in overdose.

Your questions, answered

What if I miss a dose?

Take it when remembered unless the next dose is near; then skip it. Never double. After several missed days, ask before restarting.

Can I stop when I feel better?

Plan a gradual taper with your prescriber. Sudden stopping can cause nausea, headache, feeling unwell or poor sleep; depression can return. Tapering reduces, but does not eliminate, these risks.

What about pregnancy or breastfeeding?

Plan together rather than stopping on your own. Balance untreated illness and medication risks. Milk transfer is usually low, but infant evidence is limited; agree on feeding and infant monitoring.

What if I take too much?

Call Poison Help (1-800-222-1222) immediately, even without symptoms. Heart-rhythm problems and seizures can be fatal. Call 911 for collapse, seizure or breathing trouble. Do not induce vomiting.

Storage & safety

Keep locked in its labeled container, away from children, pets, heat and moisture. Never share. Use a pharmacy take-back program for leftovers.

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/drugInfo.cfm?setid=7280f157-3fff-41c5-b3f4-510b8bacdaba>
 2. <https://medlineplus.gov/druginfo/meds/a682387.html>
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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.

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