

Imipramine

Tofranil / Tofranil-PM

A tricyclic antidepressant with several uses. Careful dosing and secure storage matter.

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

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

Follow your exact formulation

Overdose is an emergency—even without symptoms

Diagram: parent-drug and metabolite actions are shown.
Desipramine is an active metabolite.

What it is used for

Imipramine treats adult depression. Panic disorder and selected nerve-pain or bowel conditions are other uses. Ask which symptoms your prescription targets.

HCl tablets can temporarily help bedwetting from age 6 after medical causes are checked. This approval does not cover pamoate capsules or childhood depression.

How it works

It slows serotonin and norepinephrine reuptake between nerve cells. Gradual changes may help mood. How it helps bedwetting is less clear.

Other actions can cause dry mouth, constipation, drowsiness or dizziness. It can also affect the heart's electrical conduction, especially in overdose.

What to expect over time

EARLY DAYS

Dry mouth, constipation, sleepiness or dizziness may appear before benefit. Report troublesome effects rather than simply waiting them out.

OVER WEEKS

Mood or panic symptoms may improve gradually. Keep follow-up to review function and side effects; raising the dose is not always the answer.

FOR BEDWETTING

Track wet nights and side effects with the child's clinician. Treatment needs review and a supervised stopping plan, not indefinite renewal.

Taking your medication

Take it at the same prescribed times, with or without food. Some regimens use bedtime dosing; others divide doses. Do not assume every formulation is the same.

Follow only your prescribed increases. Children's bedwetting doses have separate age and weight limits. Never use an adult schedule for a child.

Avoid alcohol. Rise slowly and do not drive until you know the effects. Use sun protection. Ask before changing the dose, timing or any other medicine.

When to get help

Overdose: get help now, even without symptoms. Poison Help: 1-800-222-1222. Collapse, seizure, breathing trouble or cannot wake: 911.

Urgent care: fainting, irregular pulse, confusion, painful vision changes, inability to urinate, severe constipation, fever/sore throat or jaundice.

Call promptly: suicidal thoughts, mood worsening or little sleep with unusual energy. Fever with confusion and stiff/twitching muscles is an emergency.

Early side effects

Dry mouth, constipation, blurred vision, sleepiness, sweating and dizziness may occur. Anxiety or insomnia can also happen. Report persistent effects.

Other effects to discuss

Weight gain, sexual difficulties or ongoing bowel and mouth symptoms deserve review. Feeling groggy or flat does not prove the dose is too high.

What to keep track of

Review mood, pulse, blood pressure, weight, falls, bowel and bladder function. ECGs depend on age, heart risk, dose and interactions. Blood levels may help but do not prove safety or predict benefit by themselves. Follow the exact blood-draw timing instructions. Mood checks matter at every age, especially through age 24 and after changes.

Before you start

Tell your team about recent heart attack, rhythm problems or fainting, seizures, bipolar symptoms, glaucoma risk, urinary or bowel problems, low sodium, thyroid treatment, kidney or liver disease, pregnancy or breastfeeding. Older or frail adults often need another option or lower doses. Discuss overdose risk openly and agree on safe storage and the amount dispensed. A small supply is still dangerous if misused.

Medicines & interactions

MAOIs, linezolid & IV methylene blue

Do not combine with MAOIs; at least 14 days are needed in either direction. Tell urgent-care clinicians you take imipramine before linezolid or IV methylene blue is considered.

Medicines that raise its level

Fluoxetine, paroxetine, bupropion, fluvoxamine and cimetidine may raise exposure. Dose or level checks may be needed. Fluoxetine effects can last weeks after stopping.

Heart and serotonin medicines

Antipsychotics, some antibiotics, methadone and other antidepressants may add rhythm or serotonin risks. Check every product.

Cold, allergy & sleep products

Decongestants may raise blood pressure. Some antihistamines and bladder or sleep medicines add constipation, urinary difficulty and confusion. Check before use.

Alcohol, sedatives & stimulants

Avoid alcohol. Sedatives add impairment; stimulants may increase exposure or heart effects. Imipramine can weaken clonidine's blood-pressure effect. Do not adjust these yourself.

Everyday tips

Use reminders; bring mood, panic or wet-night records to visits.

Ask about fluids, fiber, dental care and sugar-free gum.

For panic, include cognitive behavioral therapy skills.

Tell dentists, surgical teams and pharmacists you take it.

Your questions, answered

What if I miss a dose?

Take it when remembered unless the next is nearly due; then skip it. Never double. Call before restarting after several missed days.

Can I stop when I feel better?

Plan a gradual taper. Sudden stopping can cause nausea, headache, vivid dreams or sleep problems, and symptoms can return. Bedwetting treatment also needs supervised review.

Why check an ECG or blood level?

ECGs and combined imipramine/desipramine levels can guide risk and dosing decisions. Neither a normal ECG nor a level in range guarantees safety.

Pregnancy or breastfeeding?

Discuss treatment and untreated-illness risks; do not stop on your own. Late exposure may affect newborns. Breastfeeding needs individual review, especially with high doses or newborn or premature infants.

Storage & safety

Keep medicine locked away from children, pets and anyone at risk of taking extra. Store tightly closed at room temperature, away from heat and moisture. Never share; use pharmacy take-back. If you may harm yourself, seek help immediately: 911 for immediate danger, or 988 for U.S. crisis support.

A final reminder

Read your product's Medication Guide.

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/medguide.cfm?setid=db007ac0-020e-4962-8903-7497ab96a74e>
 2. <https://medlineplus.gov/druginfo/meds/a682389.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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