

Phenelzine

Nardil

An MAOI for depression after other treatments. Food, medicine and blood-pressure precautions are essential.

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

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

15 mg tablets · Doses as prescribed

Carry an MAOI medication alert

Food and medicine precautions begin before treatment and continue for at least 14 days after the last dose

What it is used for

Treats depression, often when other antidepressants have not helped. It can be considered for depression with atypical features.

Social anxiety and panic disorder are off-label uses. Discuss your treatment goal; no medicine guarantees relief or works for everyone.

How it works

Blocks enzymes called MAO-A and MAO-B, reducing breakdown of serotonin, norepinephrine and dopamine. The full mechanism is not settled.

MAO also handles tyramine in food. Enzyme effects persist after the drug leaves the blood, so interaction precautions continue after stopping.

What to expect over time

BEFORE THE FIRST DOSE

Finish the agreed washout from other medicines. Get a written food list, interaction check and emergency plan first.

DURING DOSE CHANGES

Watch standing dizziness and blood pressure. Dose increases depend on tolerability, not a requirement to push through side effects.

OVER SEVERAL WEEKS

Benefit can take weeks at a suitable dose. Keep follow-ups; the prescriber weighs symptom change against adverse effects.

Taking your medication

Take the exact divided doses prescribed. Do not change timing or put all doses at bedtime yourself; rise slowly from sitting or lying.

Check all new medicines, cold remedies, supplements and substances. Avoid alcohol. Do not drive until you know how treatment affects you.

Do not stop abruptly or double doses. Follow food and drug precautions for at least two weeks after stopping, longer if instructed.

When to get help

Sudden severe headache, stiff neck, chest pain or pounding heart: hold further doses and call 911. Do not wait for a home BP reading.

Fever with confusion or stiff/twitching muscles, seizure, collapse or breathing trouble needs emergency care. Do not take more doses.

Report suicidal thoughts, major mood change, faintness or jaundice promptly. Immediate danger or severe symptoms require emergency care.

Early side effects

Standing dizziness, drowsiness or insomnia, fatigue, dry mouth and constipation can occur. Report troublesome symptoms before dose increases.

Other effects to discuss

Weight gain, swelling and sexual difficulties can occur. Report tingling or numbness; do not assume B6 deficiency or take high doses yourself.

What to keep track of

Check seated and standing blood pressure, weight, mood, sleep, falls and new medicines. Liver/kidney assessment helps identify reasons not to start; liver tests may also be needed during treatment. Diabetes medicines may need review. Food precautions do not prevent every serious adverse effect.

Before you start

Discuss heart failure, kidney or liver disease, abnormal liver tests, pheochromocytoma, seizures, bipolar symptoms and self-harm risk. Review all medicines, allergies and completed washouts. Carry MAOI identification and tell every clinician, dentist and pharmacist, including before surgery or anesthesia.

Medicines & interactions

Antidepressants / other MAOIs

Do not combine or cross-taper on your own. Buspirone and bupropion are also contraindicated. The washout depends on both medicines; see below.

Cold, cough and pain products

Avoid dextromethorphan, pseudoephedrine and phenylephrine. Meperidine and tramadol are dangerous combinations. Have every cold or pain product checked.

Stimulants / supplements

Do not combine with amphetamines, methylphenidate, cocaine or MDMA. Check triptans, St. John's wort, tryptophan, tyrosine and other supplements.

Blood-pressure / diabetes medicines

Blood-pressure drugs may worsen faintness; guanethidine is contraindicated. Insulin or other diabetes treatment may need adjustment. Do not self-adjust.

Procedures / urgent treatment

Anesthesia, dental injections, linezolid and IV methylene blue need specialist planning. Tell the team even if phenelzine was recently stopped.

Everyday tips

Avoid aged cheeses, cured or fermented meats, pickled fish, concentrated yeast/meat extracts, fermented soy, sauerkraut and spoiled or poorly stored protein foods.

The U.S. label also restricts liver, fava-bean pods and yogurt. Cream cheese and cottage cheese are exceptions on its cheese list; ask before substitutions.

Avoid alcohol, beer and wine, including alcohol-free or reduced-alcohol versions. Avoid excess caffeine and chocolate; agree on specific limits with your team.

Get a complete written MAOI food guide before starting. This summary is not the whole diet plan. Do not assume all fresh foods or bottled drinks are safe.

Your questions, answered

What if I miss a dose?

Take it when remembered unless the next dose is near; then skip it. Never double. Ask if you have missed several doses.

How long are switching gaps?

Usually at least 14 days; before phenelzine, at least 5 weeks after fluoxetine and 21 days after vortioxetine. Some situations require longer. Get written dates.

Can I stop when I feel better?

Arrange a gradual taper, often over weeks. Abrupt stopping can cause withdrawal or relapse. Food and medicine precautions continue after the final dose.

Pregnancy or breastfeeding?

Evidence is limited. Discuss better-studied options and the risks of untreated illness with your prescriber; do not stop abruptly on your own.

Storage & safety

Store securely in the original container; never share. Suspected overdose needs immediate hospital assessment even if initially well; call U.S. Poison Help 1-800-222-1222. Call 911 for collapse, seizure, breathing difficulty, inability to wake or imminent self-harm. Do not try home blood-pressure rescue.

A final reminder

Use with your prescription and complete MAOI diet/interaction 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/drugInfo.cfm?setid=513a41d0-37d4-4355-8a6d-a2c643bce6fa>
 2. <https://medlineplus.gov/druginfo/meds/a682089.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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