

Protriptyline

Vivactil (historical brand) / protriptyline tablets

An activating tricyclic antidepressant. Careful dose changes and heart-safety checks matter with this medicine.

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

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

Use your divided-dose schedule

Tablets: 5 and 10 mg

Adult depression treatment · Not a sleep medicine · Overdose can be life-threatening

What it is used for

Treats depression in adults. It may be considered when low energy is prominent, but activation does not guarantee mood improvement.

It is not a routine treatment for insomnia or nerve pain. Other uses need a specific discussion of the evidence and alternatives.

How it works

Primarily reduces norepinephrine reuptake, changing its signaling. The exact way this leads to antidepressant benefit is not fully known.

Other actions can cause dry mouth, constipation or standing dizziness. Heart conduction may be affected, especially in overdose.

What to expect over time

EARLY DAYS

Restlessness, sleep trouble or dizziness may appear before benefit. Report troublesome effects before increasing.

OVER SEVERAL WEEKS

Mood improvement is gradual. Track sleep, energy and daily function; feeling stimulated alone is not recovery.

AFTER DOSE CHANGES

The medicine leaves the body slowly. Effects can build after an increase, so do not make quick extra changes.

Taking your medication

Usually taken in three or four divided doses. Use the exact schedule prescribed; do not move the whole day's dose to bedtime.

Dose increases are gradual and usually emphasize the morning dose. Ask before changing timing, splitting tablets or restarting.

Rise slowly. Avoid alcohol, and do not drive or do hazardous work until you know how alert and steady you feel on this medicine.

When to get help

Emergency care: fainting, chest pain, irregular heartbeat, seizures, sudden one-sided weakness, or swelling with breathing trouble.

Call promptly for worsening mood, suicidal thoughts, severe agitation or unusually high energy. Call 911 for immediate danger.

Get urgent care for inability to urinate, severe belly pain/constipation, or eye pain with vision changes. Do not wait for follow-up.

Early side effects

Dry mouth, constipation, nausea, sweating, dizziness, sleep trouble or restlessness can occur. Drowsiness is still possible.

Other effects to discuss

Report weight or sexual changes, falls, confusion or a fast pulse. Do not simply add a sleep medicine to treat new insomnia.

What to keep track of

Track mood, sleep, pulse, blood pressure, weight and bowel/bladder function. Your team may request an ECG or tests based on age, symptoms and other medicines. Selected blood-level checks can help with interactions or suspected toxicity; there is no single level that guarantees safety.

Before you start

Discuss a recent heart attack, rhythm problems, fainting, seizures, bipolar symptoms, self-harm risk, glaucoma, retention, severe constipation, thyroid disease, diabetes and liver/kidney problems. Share medicines and allergies. Older adults often need a safer alternative. Tell your team about surgery, ECT, pregnancy or nursing.

Medicines & interactions

MAOIs / cisapride

Do not combine. Allow at least 14 days after an antidepressant MAOI before starting. The reverse switch needs its own plan; this drug clears slowly.

Medicines that raise levels

Fluoxetine, paroxetine, bupropion and cimetidine can increase exposure. Dose or test changes may be needed; fluoxetine effects can persist for weeks.

Other antidepressants / tramadol

These combinations can add serious risks, including seizures or serotonin toxicity. Check linezolid and IV methylene blue before urgent treatment.

Cold, allergy and bladder drugs

Check decongestants and medicines such as diphenhydramine. Effects on heart rate, overheating, constipation, urination or confusion can add up.

Heart, thyroid and sedating drugs

Review rhythm, blood-pressure and thyroid medicines, opioids and sleeping pills. Avoid alcohol. Tell the dentist before local anesthetic with epinephrine.

Everyday tips

Use reminders and keep follow-ups. Agree on a limited supply if overdose risk is a concern; never share your tablets.

Try sugar-free gum, dental care, appropriate fluids, fiber and movement for mild dry mouth or constipation. Ask about persistent symptoms.

Use sun protection and avoid overheating. Report fever or sore throat, unusual bruising, jaundice, confusion or new unsteadiness promptly.

Ask someone you trust to notice mood changes. Risk needs monitoring at every age; the boxed warning includes increased risk through age 24.

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 your pharmacist if the timing is unclear.

Can I stop once I feel better?

Plan a gradual taper with your prescriber. Sudden stopping can cause nausea, headache or feeling unwell, and depression may return.

Does activating mean it is safe to drive?

No. Dizziness, drowsiness or slowed reactions can still occur. Wait until you know its effects, especially after dose changes.

Pregnancy or breastfeeding?

Discuss the benefits, risks and alternatives rather than stopping abruptly. Pregnancy data are limited; published nursing data are lacking.

Storage & safety

Store securely at room temperature, away from children, heat and moisture. Suspected overdose: call U.S. Poison Help 1-800-222-1222 immediately, even without symptoms; do not induce vomiting. Call 911 for collapse, seizure, breathing difficulty, inability to wake or imminent self-harm.

A final reminder

Not a substitute for your prescription or 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/drugInfo.cfm?setid=a023e637-bee9-8c86-e053-2a95a90aa488>
 2. <https://medlineplus.gov/druginfo/meds/a604025.html>
 3. <https://www.ncbi.nlm.nih.gov/books/NBK501170/>
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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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