

Selegiline

Emsam / once-daily skin patch

An MAOI antidepressant delivered through the skin. Food rules depend on strength; medicine precautions always apply.

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

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

One patch at a time / 24 hours

Patch strengths: 6, 9, 12 mg per 24 hours

For adult depression · Oral Parkinson disease products are not interchangeable with this patch

What it is used for

Emsam treats major depression in adults, including people who have not done well with other options. Response varies.

Oral selegiline has different dosing and a separate Parkinson disease indication. Do not substitute tablets or capsules for patches.

How it works

Blocks MAO enzymes that break down mood-related messengers. Antidepressant patch exposure affects both MAO-A and MAO-B.

Skin delivery reduces first-pass exposure in the gut and liver. The 6 mg patch needs no tyramine diet, but dangerous drug risks remain.

What to expect over time

EARLY DAYS

Skin irritation, headache, insomnia or standing dizziness can occur. Medicine precautions begin before the first patch.

OVER SEVERAL WEEKS

Mood benefit builds gradually. Dose increases, if needed, are no more often than every two weeks; higher is not always better.

KEEPING BENEFIT

Many people remain at 6 mg. Check benefit, blood pressure, skin and sleep regularly; do not change treatment on your own.

Taking your medication

Remove the old patch before applying one new patch each day. Wear for 24 hours; do not routinely remove it at bedtime for insomnia.

Use clean, dry, intact skin on the upper torso, outer upper arm or upper thigh. Rotate sites; avoid lotions or oils under the patch.

Do not cut patches. Press firmly in place, then wash hands. Avoid heating pads, saunas, hot tubs and prolonged direct sun over the patch.

When to get help

Sudden severe headache, stiff neck, chest pain or pounding heartbeat: remove the patch and get emergency care; do not wait for home BP.

Confusion/agitation with fever, sweating, muscle jerks or stiffness may be serotonin syndrome: remove the patch and get emergency care.

Report suicidal thoughts, worsening mood or unusually high energy promptly. Emergency care for fainting, seizures or immediate self-harm risk.

Early side effects

Skin redness/itching, headache, insomnia, diarrhea, dry mouth or nausea can occur. Report irritation that persists or spreads.

Other effects to discuss

Standing dizziness, sleep trouble, weight or sexual changes deserve review. Lower average trial rates do not mean effects cannot happen.

What to keep track of

Check blood pressure and pulse, standing symptoms, mood, sleep and patch sites. Review every new medicine and each dose-related diet change. Routine drug-level tests are not used, but other tests may be needed for your medical risks. Follow-ups matter even when the patch feels easy to use.

Before you start

Discuss bipolar symptoms, seizures, self-harm risk, blood pressure, heart disease, skin reactions, pregnancy and nursing. Not for pheochromocytoma or under age 12; not recommended at 12-17. Confirm all medicine washouts first. Tell clinicians and dentists you use an MAOI; carry an alert.

Medicines & interactions

Prohibited combinations

Do not combine with SSRIs/SNRIs, imipramine, clomipramine, other MAOIs, carbamazepine, dextromethorphan, meperidine, tramadol or methadone. Check the full lists.

Switching medicines

After Emsam, allow at least 14 days before prohibited medicines. Before Emsam, the gap depends on the prior drug: fluoxetine at least 5 weeks; vortioxetine 21 days.

Cold, pain and other products

Check decongestants, stimulants, buspirone, triptans, supplements, linezolid and IV methylene blue. Do not assume specialist combination reports make use safe.

Diet: 9 or 12 mg patches

Avoid aged/fermented meats, pickled herring, spoiled protein foods, fava pods, aged cheese, tap/unpasteurized beer, yeast extracts, sauerkraut, most soy products and tyramine supplements.

Food choices / alcohol

Fresh, well-stored meat or fish, fresh cheeses, grains and most vegetables are usually suitable. Ask if unsure. Avoid alcohol at every dose.

Everyday tips

At 9 or 12 mg, start the tyramine diet on day one. Continue for 14 days after stopping or reducing to 6 mg. Obtain the complete label food guide.

At 6 mg from the start, no tyramine diet is required. This does not make interacting medicines safe or remove every blood-pressure risk.

Rise slowly and avoid driving until your response is known. For sleep trouble, discuss a plan; do not shorten wear time or cut a patch.

Involve someone you trust in watching mood changes. Risk needs monitoring at every age, particularly early and after dose changes; under-25 risk is increased.

Your questions, answered

Patch forgotten or fallen off?

Remove any old patch, apply a new one at a new site and return to your usual change schedule. Never wear extra patches to catch up.

Can I stop or taper?

Agree on a plan using available strengths, never cut patches. Medication precautions last at least 14 days after stopping; higher-dose food rules also persist.

How do I dispose of patches?

Fold sticky sides together and promptly place in a lidded container out of reach of children and pets. Used patches still contain medicine. Wash your hands.

Pregnancy or breastfeeding?

Discuss pregnancy risks and alternatives promptly. Do not breastfeed during Emsam treatment or for 5 days after the final dose; arrange another feeding plan.

Storage & safety

Keep unopened patches in sealed pouches at room temperature, away from children and pets. Suspected overdose: remove patches and seek immediate emergency/poison-center advice, even if feeling well; symptoms can be delayed. U.S. Poison Help: 1-800-222-1222. Call 911 for collapse, seizure, breathing difficulty or immediate danger.

A final reminder

Not a substitute for the full Medication Guide, food table or patch instructions.

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=b891bd9f-fdb8-4862-89c5-ecdd700398a3&type=display>
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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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