

Vilazodone

Viibryd • tablets: 10, 20 and 40 mg

An antidepressant taken once a day. Food belongs in the routine—not just on the first day.

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

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

TAKE EVERY DOSE WITH FOOD

BUILD BENEFIT GRADUALLY • DO NOT STOP SUDDENLY

Your prescription sets your dose. This sheet is not permission to start, increase or taper it yourself.

What it is used for

Treats major depression in adults. Anxiety can improve as depression improves, but it is not FDA-approved for an anxiety disorder or for children.

Off-label treatment needs a clear reason, symptom targets and a follow-up plan.

How it works

It changes serotonin signaling by slowing reuptake and partly activating a serotonin receptor.

That does not mean depression is simply a serotonin shortage. Faster relief or fewer sexual effects than other antidepressants is not established.

What to expect over time

EARLY DAYS

Nausea, loose stools or sleep changes may appear before benefit. Contact your clinician if they are troublesome.

OVER SEVERAL WEEKS

Mood and functioning may improve gradually. Keep follow-ups; worsening symptoms should not wait for a six-week deadline.

REVIEW TOGETHER

Check benefit, side effects and doses taken with food. Treatment length depends on your response and history.

Taking your medication

Take the prescribed dose once daily with food. An empty stomach reduces absorption; do not compensate by taking extra tablets.

A common start is 10 mg daily for seven days, then 20 mg. A later increase to 40 mg requires at least another seven days and your prescriber's direction.

Do not stop suddenly. Avoid driving or hazardous tasks until you know how it affects your alertness and judgment.

When to get help

Contact your clinician promptly: worsening mood, suicidal thoughts, unusual bruising, persistent diarrhea, racing thoughts or much less need for sleep.

Get urgent care: fever with confusion, sweating or muscle jerking; severe headache with confusion or weakness; major bleeding; painful eye or vision changes.

Call 911: immediate danger, seizure, collapse or inability to wake. For overdose, call Poison Control at 1-800-222-1222 right away.

Early side effects

Diarrhea, nausea, vomiting, dizziness or insomnia can occur. Food and a slower clinician-directed increase may help. Report persistent diarrhea, dehydration or severe abdominal pain.

Other effects to discuss

Sexual effects, sleep and weight changes are worth discussing; fewer sexual effects are not guaranteed. If you feel flat or unlike yourself, ask your clinician before changing your dose.

What to keep track of

Track mood, sleep, side effects and doses taken with food. Sodium tests depend on risk or symptoms; warfarin and digoxin require extra monitoring.

Before you start

Discuss bipolar disorder or mania, seizures, bleeding, low sodium, glaucoma, pregnancy plans and breastfeeding. Mention water pills and all other medicines or supplements. Pregnancy and human milk information is limited; make a plan together rather than stopping abruptly. It is not approved for children. Closer mood checks matter early and after dose changes, especially through age 24.

Medicines & interactions

MAOIs and serotonin-raising medicines

MAOIs need a 14-day gap in either direction. Linezolid and IV methylene blue require coordinated medical management. Check tramadol, triptans, other antidepressants, St. John's wort and dextromethorphan cough products.

Medicines that change drug levels

Some antibiotics, antifungals, HIV medicines, seizure medicines and rifampin can require dose changes. Ask about grapefruit; do not assume every amount has the same effect. Tell the team about digoxin.

Bleeding and impairment

Check aspirin, ibuprofen, naproxen, antiplatelets and blood thinners such as warfarin. Ask which pain medicine is suitable. Avoid alcohol and review sedatives or opioid pain medicines.

Everyday tips

Link your daily dose to a reliable meal and use reminders if useful.

Keep appointments and contact the team between visits for new or worsening symptoms.

Include therapy, regular activity and steady sleep as appropriate to your treatment plan.

Speak up about diarrhea or sexual effects. There may be useful adjustments; you do not have to quietly put up with them.

Your questions, answered

What if I miss a dose?

Take it when remembered, with food, unless the next dose is nearly due. Then skip it. Never double. Ask for advice after several missed days.

What if I vomit after taking it?

Do not take an extra replacement dose. Ask for advice if vomiting continues or you cannot keep medicines or fluids down.

Why does food matter so much?

Food helps your body absorb the medicine reliably. There is no calorie target on this sheet, and fasting is not a safe way to lower your dose.

Can I stop when I feel better?

Discuss when and how to stop. A personalized taper reduces withdrawal risk; dizziness, nausea, sleep changes or electric-shock feelings can occur with abrupt stopping.

Storage & safety

Keep tablets in their labeled container at room temperature, safely away from children and pets. Do not share them. Ask a pharmacy about take-back disposal for unwanted medicine.

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=4c55ccfb-c4cf-11df-851a-0800200c9a66>
 2. <https://dailymed.nlm.nih.gov/dailymed/lookup.cfm?setid=4c55ccfb-c4cf-11df-851a-0800200c9a66>
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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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