

Viloxazine

Qelbree • extended-release capsules

A once-daily nonstimulant for ADHD. The goal is better focus and impulse control, with a plan to watch mood and side effects.

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

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

ADHD • AGE 6+ AND ADULTS

ER CAPSULES: 100, 150, 200 mg

Not a controlled medicine • Diagram labels describe laboratory findings, not separate proven benefits.

What it is used for

Qelbree treats ADHD in adults and children age 6 and older. It may help with distractibility, impulsivity and hyperactivity.

It works alongside practical supports for school, work and daily routines. It is not a quick energy boost or a substitute for sleep.

How it works

It changes norepinephrine signaling involved in attention and impulse control. The full treatment mechanism is still being studied.

The diagram's serotonin effects come from laboratory research. They do not prove separate benefits for depression, anxiety or other conditions.

What to expect over time

THE FIRST DAYS

Sleepiness, nausea or trouble sleeping may appear. Do not drive until you know the effects.

AS DOSES CHANGE

Your team checks mood, blood pressure, pulse and tolerability. Increases are at least a week apart.

OVER SEVERAL WEEKS

Look for better daily function. Benefit can build; stay in touch rather than changing doses yourself.

Taking your medication

Take once daily at the same time, with or without food, exactly as prescribed. Do not cut, crush or chew capsules.

If needed, open a capsule and put all contents on a teaspoonful or tablespoonful of applesauce or pudding. Swallow without chewing.

Use the whole mixture right away, or within 2 hours for applesauce or 15 minutes for pudding. Do not save it or use only part.

When to get help

Mood warning: contact your team immediately for new suicidal thoughts, worsening depression, agitation or sudden behavior changes. Applies to adults and children.

Call 911: immediate self-harm danger, collapse, severe chest pain, seizure or breathing difficulty. For US crisis support, call/text 988.

Get prompt advice: racing heart, major sleep loss, unusually high energy or risky behavior. Suspected overdose? Call Poison Control: 1-800-222-1222 immediately.

Early side effects

Sleepiness, insomnia, fatigue, headache, nausea, vomiting, dry mouth, constipation or reduced appetite may occur. Report disruptive effects.

Other effects to discuss

Track weight and children's growth. Report persistent irritability, anxiety or feeling unlike yourself; do not assume every mood change will pass on its own.

What to keep track of

Keep mood, BP/pulse and weight checks, especially after starting or changing the dose.

Before you start

Tell your team about depression, bipolar symptoms or suicide attempts in you or your family; high BP, heart problems, kidney/liver disease, allergies and pregnancy plans. Review medicines, supplements and caffeine. Early follow-up and a plan for concerns are part of treatment.

Medicines & interactions

MAO inhibitors

Do not combine with an MAOI or start Qelbree within 14 days after stopping one. Tell your pharmacist about recent antidepressants and Parkinson medicines.

Specific medicines to avoid

Do not combine with alosetron, duloxetine, ramelteon, tasimelteon, tizanidine or theophylline. Ask your pharmacist before taking a new medicine or stopping an interacting one.

Caffeine and other medicines

Coffee, energy drinks and caffeine supplements may have stronger or longer effects. Other psychiatric medicines may also need review or dose changes.

Alcohol and sedating products

Alcohol, sleep medicines and sedating allergy pills may worsen drowsiness. Avoid unreviewed combinations and driving while impaired.

Everyday tips

Use a daily reminder and refill before running out.

Keep regular sleep, meals and practical routines.

Track one or two goals, such as finishing tasks.

Ask someone you trust to flag mood changes.

Your questions, answered

What if I miss a dose?

Follow your pharmacist's plan. Usually take it when remembered unless the next dose is near; then skip it. Never double. Call if you are unsure or have missed several doses.

Can I stop if I dislike how I feel?

Contact your prescriber for a plan. A taper is not routinely required, but returning symptoms and interactions need review. Get urgent help for severe mood changes rather than waiting for the next appointment.

What if I become pregnant?

Tell your prescriber right away. The label generally advises stopping when pregnancy is recognized unless there is a specific benefit-risk reason to continue. Arrange the decision promptly; a pregnancy registry is available.

Can I breastfeed?

Small amounts enter milk. Effects on the baby and milk supply are not well studied. Discuss your treatment and feeding plan rather than assuming either complete safety or a need to stop breastfeeding.

Storage & safety

Store at room temperature in a tightly closed container, away from heat and moisture. Keep locked away from children and pets. Never share; ask your pharmacy about take-back disposal.

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?lang=en&setid=aedf408d-0f84-418d-9416-7c39ddb0d29a>
 2. <https://dailymed.nlm.nih.gov/dailymed/medguide.cfm?setid=aedf408d-0f84-418d-9416-7c39ddb0d29a>
 3. <https://medlineplus.gov/druginfo/meds/a621027.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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