



First line Treatment					Clinical Pearls	
Sertraline (Zoloft) Start: 25mg x4days Increase by: 25-50mg TR: 50-200mg	➤	Escitalopram (Lexapro) Start: 10mg Increase by: 5-10mg TR: 10-20mg	➤	Citalopram (Celexa) Start: 20mg Increase by 10mg TR: 20-40mg		<p>1. Screen all women with depressive symptoms for a history of bipolar disorder or hypomanic/manic symptoms. If present, antidepressant monotherapy is NOT recommended. Refer to mental health specialist.</p> <p>2. To minimize GI side effects, start sertraline at 25mg x 4 days then increase to 50mg daily. If GI symptoms persist for >1 week they are unlikely to resolve; consider switching medication.</p> <p>3. Evidence shows Cognitive Behavioral Therapy and Interpersonal Therapy to be effective for treating perinatal depression. Consider therapy alone for mild depression, or as an adjunct to medications for moderate/severe depression.</p>
			➤	Fluoxetine (Prozac) Start: 20mg Increase by 10-20mg TR: 20-80mg		
Second Line Treatment						
Bupropriion XL (Wellbutrin) Start: 150mg Increase by: 150mg TR: 150-450mg	➤	Venlafaxine XR (Effexor) Start: 37.5-75mg Increase by: 37.5-75mg TR: 75-225mg	➤	Duloxetine (Cymbalta) Start: 30-40mg Increase by: 20mg TR: 60-120mg		
			⚖	Mirtazapine (Remeron) Start: 15mg Increase by: 15mg TR: 15-45mg		
				⚖	Paroxetine (Paxil) Start: 20mg Increase by: 10mg TR: 20-60mg	
Augmentation Agents						
Bupropriion XL (Wellbutrin) 150-450mg	⚖			Aripiprazole (Abilify) Start: 2-5mg/ TR: 2-15mg		

TR = Treatment range