

FLUVOXAMINE (LUVOX) IR—IMMEDIATE RELEASE, CR—SUSTAINED RELEASE

Provider Tip Sheet

DOSING INFORMATION

- Luvox IR
 1. Week 1: Baseline weight. Consider BMP for baseline sodium in older adults. Start IR: 50 mg qHS.
 2. Week 2: Increase to an Initial Target Dose (IR) of 100 mg qHS, if tolerated. Week 3-4 and beyond: Consider further increases in 50 mg increments qHS q3-4 weeks.
- Luvox CR
 1. Week 1: Baseline weight. Consider BMP for baseline sodium in older adults. Start CR: 100 mg qHS, the Initial Target Dose (CR).
 2. Week 3-4 and beyond: Consider further increases in 50 mg increments q3-4 weeks, if tolerated. Typical Dosage Range (IR/CR): 100 mg-200 mg qHS. Max Dose: 300 mg/day. Discontinuation: 25% per week to 25% per month depending on length of treatment in order to minimize withdrawal symptoms and relapse.

MONITORING

- Weight. Consider posttreatment BMP to rule out hyponatremia in older adults.

GENERAL INFORMATION

- Mechanism of Action: Selective serotonin reuptake inhibitor.
- FDA Indications: OCD.
- Off-Label Indications: Depression, other anxiety. Pharmacokinetics: $T_{1/2}$ = 15-16 hr.
- Common Side effects (OCD-IR): Nausea (40%), somnolence (22%), insomnia (21%), asthenia (14%), dry mouth (14%), nervousness (12%), diarrhea (11%), dizziness (11%), dyspepsia (10%), abnormal ejaculation (8%), sweating (7%), anorexia (6%), vomiting (5%), tremor (5%), anxiety (5%).
- Black Box Warning: Increased SI in patients < 25 y/o.
- Contraindications: Use of a MAOI within 14 days of stopping fluvoxamine, concurrent use of a MAOI including drugs with significant MAOI activity (e.g., linezolid), or use of fluvoxamine within 14 days of stopping a MAOI. Coadministration of tizanidine, thioridazine, alosetron, pimozide, or ramelteon.

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GENERAL INFORMATION (Continued)

- Warnings and Precautions: Clinical worsening and suicide risk, serotonin syndrome, important drug to drug interactions (SEE CONTRAINDICATIONS and DRUG-DRUG INTERACTIONS), discontinuation symptoms, abnormal bleeding, hypomanic/manic switch, seizures, hyponatremia. Metabolism/ Pharmacogenomics: Primarily metabolized by 2D6. Use caution with 2D6 poor metabolizers. Significant drug drug interactions: Use with great caution in combination with other medications as fluvoxamine is a potent inhibitor of multiple P450 enzymes including 1A2, 2C9, 3A4, and 2C19 (ASLO SEE CONTRAINDICATIONS). Fluvoxamine is a relatively weak 2D6 inhibitor. Use fluvoxamine with caution with 2D6 inhibitors; OF NOTE: tobacco induces the metabolism of fluvoxamine — consider dosage adjustment when starting or stopping tobacco; Check all drug-drug interactions and CONSIDER CONSULTATION WITH A PHARMACIST BEFORE PRESCRIBING THIS MEDICATION.
- Dosage Form: Capsule (Do not cut, crush or chew), Tablet. Generic available: IR: Yes; CR: Yes.

Support

We are committed to the care and well-being of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

Please view the Provider section of our website at ambetterofnorthcarolina.com for additional tools and resources. You may also contact your Provider Engagement Administrator directly, or contact Provider Relations for assistance at **1-833-863-1310**.

This document is an informational resource designed to assist licensed healthcare practitioners in caring for their patients. Healthcare practitioners should use their professional judgment in using the information provided. Fluvoxamine (luvox) measures are not a substitute for the care provided by licensed healthcare practitioners and patients are urged to consult with their healthcare practitioner for appropriate treatment.