For full prescribing information, please refer to package insert. WELLBUTRIN® SR Tablets. Reg. No. 34/1.2/0266.
Each tablet contains 150 mg of bupropion hydrochloride. Applicant: GlaxoSmithKline South Africa (Pty) Ltd, (Co. reg. no. 1948/030135/07), 57 Sloane Street, Bryanston, 2021.
STEPS CALL CENTRE PROGRAMME

DEPRESSION • ANXIETY • PANIC DISORDER • BIPOLAR DISORDER

- Support and counselling
- Disease information
- Patients' rights in terms of medical aid re-imbursements
- Self-help guidelines

CALL 08600 Steps or 08600 78377
**REFERENCES:**

1. NIMH (National Institute of Mental Health) http://www.nimh.nih.gov/healthinformation/depressionmenu.cfm

**WHAT IS DEPRESSION?**

Depression is a serious medical illness and it’s not something that you have made up in your head. It’s more than just feeling ‘down in the dumps’ or ‘blue’ for a few days, it’s feeling down, low and hopeless for weeks at a time. Depression affects the way a person eats and sleeps, the way one feels about oneself, and the way one thinks about things. It is not a sign of personal weakness, nor is it a condition that can be willed or wished away.1

**WHAT ARE THE SYMPTOMS?**

- Persistent sad, anxious, or "empty" mood
- Feelings of hopelessness, pessimism1
- Feelings of guilt, worthlessness, helplessness1
- Loss of interest or pleasure in hobbies and activities that were once enjoyed1
• **WHAT ARE THE CAUSES?**

- Family history of depression. Additional factors include stresses at home, work, or school, which are involved in its onset.
- It can also occur in people who have no family history of depression.
- Whether inherited or not, major depressive disorder is often associated with changes in brain structures or brain function.
- Low self-esteem, people who consistently view themselves and the world with pessimism or who are readily overwhelmed by stress, are prone to depression.
- Physical changes in the body due to medical illness or disease can cause depression making the sick person apathetic and unwilling to care for his or her physical needs, thus prolonging the recovery period.
- A serious loss, difficult relationship, financial problem, or any stressful (unwelcome or even desired) change in life patterns can trigger a depressive episode.

Often, a combination of genetic, psychological and environmental factors are involved in the onset of a depressive disorder.

• **HOW TO TAKE WELLBUTRIN® SR:**

- WELLBUTRIN® SR tablets should be swallowed whole and not crushed or chewed.
- Your doctor may have prescribed a dose of 150 mg/day or 300 mg/day.
- If you are on a 300 mg/day dose, take one 150 mg tablet in the morning and a second 150 mg tablet at least 8 hours later.

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In the meantime:

• Set realistic goals in light of the depression and assume a reasonable amount of responsibility.
• Break large tasks into small ones, set some priorities and do what you can when you can.
• Try to be with other people and to confide in someone; it is usually better than being alone and secretive.
• Participate in activities that may make you feel better.
• Mild exercise, going to a movie, or participating in religious, social, or other activities may help.
• Expect your mood to gradually improve, not immediately. Feeling better takes time.
• It is advisable to postpone important decisions until the depression has lifted. People rarely “snap out of” a depression.
• Remember, positive thinking will replace the negative thinking that is part of the depression and will disappear as your depression responds to treatment.

HELP YOURSELF

NEUROTRANSMITTERS AND DEPRESSION

Imbalances in serotonin, noradrenaline and dopamine (these are neurotransmitters or chemical substances released from nerve endings) are thought to be involved in depression.

Abnormalities in the three different neurotransmitters may result in different symptoms.

CAUSES OF DEPRESSION

mood

anxiety

panic

phobias

obsessions

compulsions

food cravings

inability to experience pleasure

failure to seek reward

psychomotor slowing

fatigue

low energy

lack of motivation

psychomotor retardation

depressed mood

impaired attention

problems concentrating

deficiencies in working memory

slowness in information processing

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• HOW DO I HELP MYSELF?
Depressive disorders can make one feel exhausted, worthless, helpless, and hopeless. Such negative thoughts and feelings make some people feel like giving up. It is important to realize that these negative views are part of the depression and do not usually reflect the actual circumstances. They should fade as treatment begins to take effect.

• CAN I CONTROL IT?
A variety of treatments including medications and short-term psychotherapies have proven effective for depression.

• WHAT ABOUT MEDICATION?
There are several types of antidepressant medications including selective serotonin reuptake inhibitors (SSRIs), tricyclics (TCAs), monoamine oxidase inhibitors (MAOIs) and newer ones which affect dopamine and nor epinephrine. These different antidepressants work on different neurotransmitters.

You have been prescribed WELLBUTRIN® SR by your doctor. It is a dopamine norepinephrine reuptake inhibitor and is indicated for the treatment of depression.
• ARE THERE CERTAIN CIRCUMSTANCES WHEN I SHOULD NOT TAKE WELLBUTRIN® SR?

Yes, if you:
- have hypersensitivity to any component of the preparation
- have a seizure disorder
- are taking any other preparation containing bupropion, the same active ingredient as WELLBUTRIN® SR
- are undergoing abrupt discontinuation of alcohol or sedatives
- have or had a previous diagnosis of bulimia or anorexia nervosa
- are currently taking monoamine oxidase inhibitors (MAOIs)
- have severe liver disease

This is meant as an illustration of how different classes of antidepressants may work.

- depression
- anxiety
- panic
- phobias
- obsessions
- compulsions
- food cravings
- mood

- Noradrenaline dopamine reuptake inhibitor
- TRICYCLIC ANTIDEPRESSANTS
- SELECTIVE SEROTONIN REUPTAKE INHIBITORS
- SEROTONIN-NORADRENALINE RE- UPTAKE INHIBITORS
- MONOAMINE OXIDASE INHIBITORS

*Adapted from Stahl 1,2,3 and Schmidt et al 4
WHEN SHOULD I START TO FEEL BETTER?

Although some improvements may be seen in the first few weeks, most antidepressants must be taken regularly for 3 to 4 weeks and in some cases 8 weeks, before the full therapeutic effects can be felt.¹

The full antidepressant effect of WELLBUTRIN® SR may not be evident until after several weeks of treatment.

HOW LONG DO I STAY ON MEDICATION?

Patients are often tempted to stop their antidepressant medication as soon as they feel better. This may be too soon, as once your mood has improved, it is important to continue for at least 4 to 9 months to prevent a recurrence of depression.¹

Never stop taking an antidepressant without consulting your doctor first.¹

WHAT SIDE-EFFECTS COULD I EXPERIENCE?

In some people, antidepressants may cause mild and usually temporary side-effects. Typically these are annoying, but not serious. However, any unusual reactions/side-effects or those that interfere with normal functioning should be reported to the doctor immediately. Some of the most common side-effects of WELLBUTRIN® SR include:

- Insomnia
- Headache
- Weight loss
- Dry mouth
- Gastrointestinal disturbance (nausea and vomiting)