YOUR MEDICATION INFORMATION

Bupropion Hydrochloride (HCl) (generic)
bupropion sustained release
bupropion extended release

CLASSIFICATION:
Dopamine and norepinephrine reuptake inhibitor antidepressant.

COMMON USAGE:
Bupropion is indicated for the treatment of major depressive disorder and for symptoms of seasonal affective disorder. It is also indicated for tobacco smoking cessation. The safety and effectiveness of bupropion has not been established for patients under age 18.

CONTRAINDICATIONS:
Using bupropion is not recommended for individuals with a history of a seizure disorder (epilepsy), an eating disorder (bulimia or anorexia), or if recently taking MAOI antidepressants (see below in "Interactions").

WARNINGS:
Suicidality in Children and Adolescents: Drugs that treat depression increased the risk of suicidal thinking and behavior (suicidality) in short-term studies in children and adolescents with Major Depressive Disorder (MDD) and other psychiatric disorders. Bupropion is not approved for use in pediatric patients. Anyone considering the use of bupropion or any other antidepressant in a child or adolescent must balance this risk with the clinical need. Patients who are started on these medications should be observed closely for clinical worsening, suicidality, or unusual changes in behavior. Families and caregivers should be advised of the need for close observation and communication with the physician.

Notify the prescribing clinician immediately if any of the following develop:

- Thoughts about suicide or dying
- Attempts to commit suicide
- New or worse depression
- New or worse anxiety
- Feeling very agitated or restless
- Panic attacks
- Difficulty sleeping
- New or worsened irritability
- Acting aggressive, being angry, or violent
- Acting on dangerous impulses
- An extreme increase in activity and talking
- Other unusual changes in behavior or mood

Seizures: Bupropion is associated with a dose-related risk of seizure, which means the chance of having a seizure increases with the higher doses of the medication. It is important that you take your medication as directed and do not take more than one dose at a time. If you experience a seizure while on this treatment, discontinue taking the medication and contact your physician immediately.

Pregnancy: The safety of bupropion in pregnant and nursing mothers is not established. The potential benefits of bupropion must be weighed against the possible hazards.

IMPORTANT SIDE EFFECTS:
Bupropion is generally well-tolerated by most people. The side effects that are most commonly reported are: loss of appetite, weight loss, dry mouth, skin rash, sweating, ringing in ears, insomnia, stomach pain, anxiety, agitation and shakiness. Some patients have reported feeling nausea and others have reported having difficulty sleeping. These side effects are generally mild and disappear after a few weeks. If nausea develops, try taking the medicine with food. If you have trouble sleeping, avoid taking bupropion too close to bedtime.

This is not a complete list of all known or potential adverse effects. Notify your physician or your child's physician of any symptoms that have started since beginning this medication, changing its dose, or adding or changing any other medication or diet.

INTERACTIONS WITH OTHER MEDICATIONS:
Bupropion should not be taken with other antidepressants unless specifically recommended by your prescriber. The risk of adverse effects could be increased if bupropion is combined with with carbamazepine (Tegretol), clozapine (Clozaril), fluoxetine (Prozac, Sarafem), haloperidol (Haldol), lithium (Eskalith, Lithobid), loxapine (Loxitane), molindone (Moban), the phenothiazines, phenytoin (Dilantin), the thioxanthenes, or trazodone (Desyrel). Bupropion should not be taken with cimetidine (Tagamet) or with any of the monoamine oxidase inhibitors (MAOIs), such as phenelzine (Nardil), tranylcypromine (Parnate), isocarboxazid (Marplan), orphenadrine (Norflex) or cyclophosphamide (Cytoxan), as these drugs could increase bupropion's effects.

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Patients should be made aware that Zyban, used as an aid to stop smoking, contains the same active ingredient found in Wellbutrin, Wellbutrin SR and Wellbutrin XL and should not be used in conjunction with these or any other medications that contain bupropion.

This is not a complete list of all known or potential drug interactions. To help prevent problems, make sure that your prescribers know about all medications you are taking, including over-the-counter drugs; dietary herbal supplements; folk or home remedies; or unusual foods, drinks or dietary habits.

COMMON DOSAGES:

The following dosage information is intended as general guidelines only. Always follow the direction of the prescribing clinician regarding dosing.

Bupropion (immediate release) (Wellbutrin): The recommended initial dose for adults is 200 mg/day, given as 100 mg in the morning and 100 mg in the evening. Based on response, the dose may be increased to 300 mg/day in 100 mg doses three times a day. (If your doctor has prescribed the immediate release formulation for three times a day, do not take all of the day's tablets at one time.)

Wellbutrin sustained release (SR): The recommended initial dose for adults is a single 150 mg daily dose given in the morning. If that is adequately tolerated, an increase to the 300 mg dose, given as Wellbutrin SR 150 mg twice daily, may be made as early as day four of dosing. There should be an interval of at least eight hours between successive doses.

Wellbutrin extended release (XL): The recommended initial dose for adults is a single 150 mg daily dose given in the morning. If that is adequately tolerated, an increase to the 300 mg dose, given once daily, may be made as early as day four of dosing. There should be an interval of at least 24 hours between successive doses.

Sustained-release (SR) and extended-release tablets (XL) always should be swallowed whole — not chewed, crushed or dissolved — so that the timed-release mechanism will not be altered. The full antidepressant effect of bupropion may not be felt until four weeks or longer. If you forget to take a dose, take it as soon as you remember, but if it is within eight hours of your next dose, then skip the missed dose. Do not take double doses.

IDENTIFICATION:

Wellbutrin immediate release formulation is available in 75-mg and 100-mg tablets. The 75-mg tablets are yellow-gold, round and printed with "Wellbutrin 75". The 100-mg tablets are red, round and printed with "Wellbutrin 100".

Wellbutrin SR is available in 100, 150, and 200-mg strength tablets. The 100-mg tablets are blue and round, printed with "WELLBUTRIN SR 100". The 150-mg tablets are purple and round, printed with "WELLBUTRIN SR 150". The 200-mg tablets are light pink and round, printed with "WELLBUTRIN SR 200".

Wellbutrin XL is available in 150 mg and 300 mg tablets. Both the 150-mg and 300-mg tablets are creamy-white to pale yellow, round tablets printed with either "WELLBUTRIN XL 150" or "WELLBUTRIN XL 300". [The FDA has approved the first generic formulation of Bupropion HCl, to be available in 150 mg and 300 mg tablets.]

Zyban is available in 150-mg tablets that are purple and round, printed with "ZYBAN 150".

STORAGE:

Bupropion should be stored at controlled room temperature (68º F to 77º F) in a tightly closed, child-, light- and moisture-resistant container. Keep the medication out of direct sunlight and avoid storing it in a warm and humid area, such as the bathroom or kitchen, to avoid deterioration. To prevent accidental poisoning, keep all medications out of the reach of children. Do not take expired medication. Do not transfer medication from one container to another. Carefully discard discontinued medication where children cannot find it.

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