



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>Clinical Pearls</p> <ol style="list-style-type: none"> 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. 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. 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.
	➤		➤	Fluoxetine (Prozac) Start: 20mg Increase by 10-20mg TR: 20-80mg		
Second Line Treatment						
Bupropion 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						
Bupropion XL (Wellbutrin) 150-450mg	=		=	Aripiprazole (Abilify) 2-5mg		

TR = Treatment range