

Scientific - Drug Induced

Sunday, 7 November 2010
9:22 PM

7/11/2010

Drug-induced mood disorders. [Int Phar...

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Int Pharmacopsychiatry. 1980;15(1):59-73.

Drug-induced mood disorders.

Ananth J, Ghadirian AM.

Abstract

Various drugs including antihypertensives, anxiolytics, antibiotics, antidepressants, corticosteroids, choline, indomethacin, levodopa, metronidazole, neuroleptics, oral contraceptives, sulphonamides and physostigmine have been reported to produce depression as a side effect. Clinically, these drug-induced depressions may go unnoticed and thus create therapeutic problems. Although causal relationship is difficult to establish, depression occurring during the course of drug treatment needs an evaluation of all the medications that the patient has been receiving. We believe that postpsychotic depressions include three types of depression: pendular depression—primarily disease related; chronic depression—primarily environment related, and amine-depletion depression—drug related. Thus, drug-induced depressions constitute a subgroup of postpsychotic depression. Clinically, it is essential to carefully monitor patients receiving drugs known to produce depression. Thus, prompt recognition of the drug-induced depressions may assist in initiating proper therapeutic measures.

PMID: 6104651 [PubMed - indexed for MEDLINE]

[Publication Types](#), [MeSH Terms](#), [Substances](#)

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Scientific - Psych Side Effects

Saturday, 6 November 2010

10:34 PM

Psychiatric Side Effects of Antibiotics

Scientific and anecdotal evidence that antibiotics can cause depression, anxiety and other mental side effects

Maybe it's not just in your head

It's not commonly known, but there are many scientific studies and personal accounts suggesting that antibiotics may cause depression and anxiety. This blog documents scientific studies related to depression and anxiety from antibiotics and certain other medications.

If you are experiencing negative side effects from an antibiotic, talk to your doctor about your reaction.

Listed side effects of some common antibiotics:

Ciprofloxacin ([MedlinePlus Drug Information](#)): nervousness, agitation, anxiety, feelings of not trusting others or feelings that others want to hurt you, depression, thoughts about dying or killing yourself, hallucinations (seeing things or hearing voices that do not exist)

Levofloxacin ([Levaquin.com](#)): Central nervous system effects, including convulsions, confusion, anxiety, depression, and insomnia, may occur after the first dose.

TUESDAY, DECEMBER 9, 2008

Possible Levaquin-Associated Depression

Dr. Zeischegg discusses the dangers of long-term antibiotic use, potentially including this young woman's [depression after long-term use of Levaquin](#).

Posted by CYP at [10:53 AM](#) [1 comment](#)
Labels: [depression](#), [levaquin](#), [levofloxacin](#)

Patients' Reports of Metronidazole Side Effects

In [Askpatient database](#).

Posted by CYP at [10:49 AM](#) [2 comments](#)
Labels: [anxiety](#), [depression](#), [metronidazole](#)

One Person's Experience with Metronidazole

As this person on Seldo writes, metronidazole can have some [bad mental side effects](#) which might be easier to handle if you know they are from the drug and not from you!

Posted by CYP at [10:47 AM](#) [0 comments](#)
Labels: [depression](#), [metronidazole](#)

Anxiety-causing potential of ciprofloxacin and norfloxacin in rats

Sen S, Jaiswal AK, Yanpallewar S, Acharya SB. Anxiogenic potential of ciprofloxacin and norfloxacin in rats. Singapore Med J. 2007 Nov;48(11):1028-32.

"The results indicate that ciprofloxacin- and norfloxacin-treated rats showed anxious behaviour in comparison to control rats in all the parameters studied.... The present experimental findings substantiate the clinically observed anxiogenic potential of ciprofloxacin and norfloxacin."

Posted by CYP at [10:38 AM](#) [0 comments](#)
Labels: [anxiety](#), [cipro](#), [ciprofloxacin](#), [norfloxacin](#)

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Metronidazole induced confusional agitated state

Rohatgi A, Monga R, Goyal D. Metronidazole induced acute confusional agitated state. J Assoc Physicians India. 2000 Feb;48(2):261. from [PubMed](#).

Posted by CYP at [10:36 AM](#) [0 comments](#)
Labels: [Flagyl](#), [metronidazole](#)

Metronidazole and Agitated Depression

Voth AJ. Possible association between metronidazole and agitated depression. Can Med Assoc J. 1969 Jun 7;100(21):1012-3. from [PubMed](#).

"Within two days of beginning this treatment [metronidazole] the woman developed a severe agitated depression. She called me up at night complaining of insomnia, extreme restlessness, agitation and severe depressive feelings with uncontrollable weeping spells. She blamed the medication for her condition because she had never experienced such a reaction before. I doubted this association but suggested that she stop the medication for two days. She returned to her normal self within 24 hours. She had no previous record of emotional or psychiatric upset and the only other medication she was using was Norinyl-1 which she continued to take. I would be interested to know if other physicians have had similar experiences with metronidazole."

Posted by CYP at [10:34 AM](#) [0 comments](#)
Labels: [Flagyl](#), [metronidazole](#)

Levofloxacin Caused Anxiety in Rats and Mice

Erden BF, Ulak G, Yildiz F, Utkan T, Ozdemirci S, Gacar N. Antidepressant, anxiogenic, and antinociceptive properties of levofloxacin in rats and mice. Pharmacol Biochem Behav. 2001 Mar;68(3):435-41. from [PubMed](#).

Levofloxacin, an optically active isomer of ofloxacin, is a fluorinated quinolone with a broad spectrum of antibacterial activity. Fluoroquinolones have been used for the treatment of bacterial infections for many years. Although they were considered as relatively safe drugs, various adverse effects have recently been reported along with increase in the usage of new-generation fluoroquinolones. In the present study, some of the central nervous system (CNS)-related side effects of levofloxacin were clarified in animals. Our results suggested that: levofloxacin (10-20-40 mg/kg i.p.) had no depression-like effect in the forced swimming test (FST) in rats; exerted anxiety-like effect in the elevated plus maze test in rats; did not alter the locomotor activity in rats; had no apparent effect on sleep latency but shortened the sleeping time on pentobarbital sleeping time in mice; and showed analgesic activity in acetic acid writhing and hot plate test in mice.

Posted by CYP at [10:32 AM](#) [0 comments](#)
Labels: [levaquin](#), [levofloxacin](#)

Fluoroquinolones Cause Anxiety In Rats

Prabhu S, Rewari S. A comparative study of anxiogenic effects of fluoroquinolones in rats. Indian J Physiol Pharmacol. 1998 Jan;42(1):135-8. from [PubMed](#).

The present study compares the anxiogenic effects of three fluoroquinolones namely ciprofloxacin, ofloxacin and pefloxacin in rats using elevated plus-maze. The rats were treated with 12.5 mg/kg and 25 mg/kg of ciprofloxacin, ofloxacin or pefloxacin and then tested in elevated plus-maze half an hour later, for a period of 5 min. All the three fluoroquinolones decreased the time spent in open arm considerably. This decrease was statistically significant only with the higher doses of ciprofloxacin and ofloxacin ($P < 0.05$). Mean time spent in closed arm was increased by all the test drugs in both the doses. Increase was statistically significant with both the doses of ofloxacin ($P < 0.05$). Mean time spent in closed arm was increased by all the test drugs in both the doses. Increase was statistically significant with both the doses of ofloxacin ($P < 0.05$, $P < 0.01$ respectively) and higher doses of ciprofloxacin and pefloxacin ($P < 0.01$, $P < 0.05$

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CYP

6/11/2010

Psychiatric Side Effects of Antibiotics

respectively). The number of entries in open arm and closed arm were decreased by both the doses of the three fluoroquinolones used in the study. The reduction in total number of arm entries by ciprofloxacin, ofloxacin and pefloxacin in both the doses was highly significant. The results suggest definite anxiogenic potential of fluoroquinolones.

Posted by CYP at [10:30 AM](#) [0 comments](#)

Labels: [cipro](#), [ciprofloxacin](#), [ofloxacin](#), [pefloxacin](#)

Psychiatric Side Effects of Ofloxacin

Hall CE, Keegan H, Rogstad KE. Psychiatric side effects of ofloxacin used in the treatment of pelvic inflammatory disease. Int J STD AIDS. 2003 Sep;14(9):636-7. from [PubMed](#).

The Clinical Effectiveness Group of the Medical Society for the Study of Venereal Diseases and the Association of Genitourinary Medicine published guidelines on the management of pelvic inflammatory disease in 1999. Subsequently, the use of ofloxacin has increased in our department. However, ofloxacin can cause serious psychiatric side effects, particularly in those with a past psychiatric history. This is of relevance to genitourinary medicine (GUM) physicians as there is a high prevalence of psychiatric illness amongst patients attending GUM clinics. We present two cases of ofloxacin causing severe psychiatric symptomatology, in one case causing an acute psychotic reaction. It is recommended a psychiatric history is taken prior to prescribing ofloxacin and that consideration is given to alternative therapy for those with previous psychiatric illness.

Posted by CYP at [10:26 AM](#) [0 comments](#)

Labels: [ofloxacin](#)

SUNDAY, DECEMBER 7, 2008

Quinolone Antibiotic Side Effects, GABA, and MedWatch reporting

Jay S. Cohen, MD writes about the new warnings for fluoroquinolone antibiotics, which include Cipro (ciprofloxacin) and Levaquin (levofloxacin).

This corresponds with a pet project of mine: to increase awareness of how antibiotics can cause depression and anxiety, among other psychiatric side effects.

Some of the warned possible side effects: tendon rupture, peripheral neuropathy, changes in heart/EKG, thinking problems, and psychological symptoms.

If you have these side effects, you're supposed to stop the medication and probably not take a fluoroquinolone again, since toxicity is reported to be cumulative.

Cohen says that he thinks quinolones are overused for minor infections (such as urinary tract infections, etc.) and that they should be reserved for cases when only a quinolone will work or when the infection has not responded to other, safer antibiotics.

He makes a very good point. Most doctors and pharmacists think that drugs are mostly safe, since they have to be FDA-approved. However, more than half of approved drugs later were found to have serious side effects not detected at the time of approval (ref. Moore, TJ, Psaty, BM, Furberg, CD. Time to act on drug safety. JAMA 1998;279(19):1571-3.).

Cohen suggests GABA to help with anxiety or agitation. I might look into that myself, because I've been having low-grade anxiety on my long-term doxycycline and tetracycline.

Here's some information about GABA from the Denver Naturopathic Clinic.

I wonder if my antibiotics or anything else I'm going through has been affecting my GABA levels. I notice that caffeine hits me HARD lately, to the point that I can barely think (I had caffeine twice in the past few months).

Contested illness, illness and stigma, chronic illness advocacy, Lyme disease, adrenal fatigue, Enneagram Type 4, using doug coil which is working great for me. This is my playground for developing ideas that I might use later. Blog is not edited nor does it represent my official thoughts. Comments, book recommendations - please email me at freeideasblog1@gmail)! Looove getting emails.

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However, this might just be due to my liver being compromised from all this other stuff (Lyme and long-term abx).

The situation with GABA and depression is complex, and GABA might bring on depression in people who are prone to it, as the article mentions.

Here's the MedWatch site for reporting serious drug side effects.

Posted by CYP at [1:06 AM](#) [0 comments](#)

Labels: [cipro](#), [depression](#), [fluoroquinolone](#), [levaquin](#), [quinolone](#)

40mg B6 May Help to Alleviate Psychiatric Side Effects of Birth Control

Bermond P. Therapy of side effects of oral contraceptive agents with vitamin B6. *Acta Vitaminologica et Enzymologica*, 1982;4(1-2):45-54. from [Popline](#).

Studies carried out in different countries over the last 15 years have provided evidence that supplementation with or excess of estrogen-progestogen hormones may be accompanied by an increased urinary excretion of tryptophan metabolites, as occurs in pyridoxine deficiency. Further methods of assessment of vitamin B6 in humans have confirmed that there is impaired status in women using oral contraceptives (OCs). Disturbances in the tryptophan metabolism have been shown to be responsible for such symptoms as depression, anxiety, decrease in libido, and impairment of glucose tolerance occurring in some OC users. **Administration of 40 mg vitamin B6 daily not only restores the normal biochemical values but also relieves the clinical symptoms in those vitamin B6 deficient women taking OCs.** Further studies are justified to clarify whether vitamin B6 supplementation may contribute to improving depression in other situations where there is hyperestrogenism (pregnancy, puerperium, estrogen-progestogen treatments), as well as correcting metabolic impairments, such as a minor alteration in glucose tolerance. (author's modified) (summary in ITA)

Posted by CYP at [1:02 AM](#) [0 comments](#)

Labels: [anxiety](#), [B6](#), [birth control](#), [depression](#), [oral contraceptives](#)

30mg Pyridoxine (B6) Might Help with Depression from Oral Contraceptives

A. Leonard Luhby M.D., Myron Brin Ph.D., Myron Gordon M.D., Patricia Davis R.N., Maureen Murphy R.N., and Herbert Spiegel Ph.D. Vitamin B6 metabolism in users of oral contraceptive agents. I. Abnormal urinary xanthurenic acid excretion and its correction by pyridoxine. 1971. *American Journal of Clinical Nutrition*, Vol 24, 684-693.

ABSTRACT: The response of the increased urinary xanthurenic acid (XA) excretion following a 2-g l-tryptophan load to oral doses of 2, 5, 10, and 20 mg pyridoxine hydrochloride was systematically studied in a group of women using oral contraceptive agents (OCA). This was done through three consecutive menstrual cycles in each subject. Vitamin B6 was given during the first and third cycles, whereas the middle cycle was a nonvitamin B6-supplemented control (placebo) period. Tryptophan load tests were done at the beginning, in the middle, and at the end of each menstrual cycle.

None of 10 non-OCA using control subjects excreted over 35 μ moles XA/8 hr. The majority of OCA users excreted in excess of this amount with an average of 167 μ moles. Those with increased XA excretion, positive reactors, comprised 75% of the OCA using group.

The 8-hr urine collection period was found to contain a relatively constant fraction (average, 63.4%) of the 24-hr xanthurenic acid excretion after a 2-g - tryptophan oral load. As such, it was a valid and reliable urine collection period for this index of vitamin B6 inadequacy.

Detrimental metabolic effects of various tryptophan metabolites in animal systems, interference with gluconeogenesis, oxidative phosphorylation, insulin metabolism, and in being carcinogenic, were pointed out.

The 2-mg dose of pyridoxine hydroxychloride, equivalent to the Recommended Dietary Allowance (37, 38) of vitamin B6, was sufficient to correct only 10% of the women studied, whereas the 20-mg dose did not correct all subjects. A regression analysis of the dose-response data revealed that **25 mg would be required to correct all OCA using women**. In view of the limited number of subjects studied, a **dose of 30 mg (allowing 5 mg as a safety factor) is recommended to correct the altered vitamin B6-tryptophan metabolism resulting from OCA use**.

Posted by CYP at 1:00 AM 0 comments

Labels: [B6](#), [birth control](#), [depression](#), [oral contraceptives](#)

Most Common Reason for Stopping Oral Contraception is Depression

Kulkarni J. Depression as a side effect of the contraceptive pill. Expert Opin Drug Saf. 2007 Jul;6(4):371-4. from [PubMed](#).

Millions of women worldwide use the combined oral contraceptive pill as an effective form of contraception. However, the focus on its side effects to date has mainly been on physical aspects, even though **the most commonly stated reason for discontinuation is depression**. **There are surprisingly few large studies investigating depression related to oral contraceptive use**. A pilot study was conducted showing that women using the combined oral contraceptive pill were significantly more depressed than a matched group who were not. More research is needed to better inform women and doctors about depression related to oral contraceptive use, and clinical guidelines are needed regarding the different types of oral contraceptives and their potential depressogenic properties.

Posted by CYP at 12:56 AM 0 comments

Labels: [birth control](#), [depression](#), [oral contraceptives](#)

Problems in Studying Oral Contraceptive-Induced Depression

Slap GB. Oral contraceptives and depression: impact, prevalence and cause. J Adolesc Health Care. 1981 Sep;2(1):53-64.

One million American adolescents are currently using oral contraceptives. Sixty percent of those beginning the pill discontinue its use within a year. Concern that mood change might be contributing to the decision to stop the pill prompted a review of the literature on the association between oral contraceptive use and depression. Trends in adolescent pregnancy, contraceptive use, and compliance are discussed in the first section. In the second, 12 clinical studies are analyzed. Because there are no studies of mood change and oral contraceptive use in adolescents, some data from adults are presented. Biochemical theories to explain an association between oral contraceptive use and depression are discussed in section three. Nine of the 12 clinical studies reported depression in 16-56% of women using oral contraceptives. Three studies found no association between oral contraceptive use and depression. **The major problems found in the clinical trials were selection bias, poor assessment of pre-therapeutic mood state and unclear definition or measurement of depression**. Current biochemical research suggests that **oral contraceptives induce tryptophan oxygenase, which leads to pyridoxine deficiency in some women**. However, the use of pyridoxine to prevent or treat depression in women taking oral contraceptives requires further study.

Posted by CYP at 12:54 AM 0 comments

Labels: [birth control](#), [depression](#), [oral contraceptives](#)

Oral Contraceptives Affect Tryptophan Excretion, Effect Reversed by Pyridoxine (Vitamin B6)

Rose DP, Braidman IP. Excretion of tryptophan metabolites as affected by pregnancy, contraceptive steroids, and steroid hormones. 1971. American Journal of Clinical Nutrition, Vol 24, 673-683.

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My summary/comments from reading the paper: Rose reports that Ross observed elevations of xanthurenic acid excretion in women taking oral contraceptives, after the women had taken a tryptophan load. The effect was reversed by administering large doses of pyridoxine (a form of Vitamin B6).

Other studies confirmed this effect and showed that women using oral contraceptives also excrete more "kynurenine, 3-hydroxykynurenine, 3-hydroxyanthranilic acid, kynurenic acid, and acetylkynurenine in urine collected after a 5- or 2-g dose of L-tryptophan. Treatment with pyridoxine reduced the urinary excretion of metabolites, including 3-hydroxyanthranilic acid, to normal limits (18, 19)."

The authors go on to say that estrogens given alone produce an identical tryptophan metabolism change with the same reversal upon administering large doses of pyridoxine.

18. Rose DP. The influence of oestrogens on tryptophan metabolism in man. Clin Sci 31: 265.

19. Price JM, Thornton MJ, Mueller LM. Tryptophan metabolism in women using steroid hormones for ovulation control. 1967. Am J Clin Nutr 20:452.

Posted by CYP at [12:26 AM](#) [2 comments](#)

Labels: [birth control](#), [depression](#), [oral contraceptives](#)

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More Tetracycline Anecdotes

Saturday, 27 November 2010
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<http://www.healingwell.com/community/default.aspx?f=19&p=3&m=662439>

Chopper New Member Date Joined Jul 2007 Total Posts : 1	Posted 7/12/2007 7:25 AM (GMT -7) Hey, I have a problem similar to meda's, and was wondering if someone could help. I am 16 and im on Doxycycline. i have been reading about the side effects, and some of them were depression and agitation. just recently, i have realised myself that i am becoming angry much quicker then i normaly would, even little things have started to make me angry. Once i calm myself down i become depressed . In general, I am not happy. But i must keep taking it over an extended period of time, around three months. I fear that it will continue to get worse. Does anyone have any suggestions? Back to Top
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Jonny Regular Member Date Joined Jun 2007 Total Posts : 51	Posted 7/14/2007 4:12 PM (GMT -7) Hi id like to respond to the doxylone (sp?) that you are on I have had a very similar problem with me Iv been on zithromax mostly for sinus infect. and it I feel caused some of my depression Im usually on it for dental work and sinus pretty often I know being on certain antib. is not good but in my low immune system etc. I have to be and I noticed everytime Im on it I get agitated etc. sorta irritating you should talk to you doc about it now Im already on antidep. but did notice depressions seems to get worse while on the antibiotic. Jonny Back to Top
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Meaka New Member Date Joined Jul 2007 Total Posts : 1	Posted 7/29/2007 4:34 PM (GMT -7) Hey, Meda and Chopper- I'm 16 too, and have been on Doxycycline for only a little while, but I used to take it for Lymes Disease. I remember the depression I went through, but I always thought it was because I was sick. Now that I'm taking it for an acne medication, I notice that I'm depressed ... I totally feel like crying all the time! I think that you just have to stick through it and put up with it.... but talk to your doctor if it's really bad. Back to Top
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Sunnivara Regular Member Date Joined Apr 2007 Total Posts : 115	Posted 7/30/2007 1:15 AM (GMT -7) I don't know about doxycycline in particular but I took the antibiotic Avelox (moxifloxacin HCL) once and it took me into a deep, dark place I never want to go again! It actually lists depression as a possible side effect so I know at least some antibiotics can cause depression . Fortunately, I felt much better within just a couple days of stopping it. Back to Top
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mc86 New Member Date Joined Oct 2007 Total Posts : 1	Posted 10/31/2007 2:01 AM (GMT -7) I am 21 yrs old and I have been taking doxycycline 100mg (for chronic inflammation) for 5 days now. Yesterday was the first time I experienced a dark, depressed feeling that made me feel as though something was weighing my chest down. I am usually an energetic happy person always looking on the bright side, but right now it's as if I'm stuck in some kind of trance, a nightmare I should say. I burst into tears for no apparent reason today..and my emotions are noticeably heightened. I feel worthless. I don't feel "up to" anything. I am starting to feel like I'm losing it. I wonder why my doctor didn't mention that depression was a possible side effect. I read the side effects that came with the prescription and no where on it did i find depression . i wonder if it's just me or if its doxy... <i>Post Edited (mc86) : 10/31/2007 2:07:24 AM (GMT-6)</i> Back to Top
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<p>crew New Member</p> <p>Date Joined Nov 2007 Total Posts : 3</p>	<p>Posted 11/29/2007 2:59 PM (GMT -7)</p> <p>Depression is not a documented side effect of doxycycline but it really should be. Here is my experience with it.</p> <p>I suffer from depression but have had it under control for years. I am in my 40's not a teenager. I recognize when I am having an "episode" and can usually identify the cause and take steps. about 6 weeks ago the doctor put me on doxycycline for a skin condition. Almost immediately I started the worst episode of depression that I have felt in a very long while. I didn't connect it to doxycycline because it wasn't listed as a side effect. I stopped taking the antibiotic, not because I thought it was the cause but because it was upsetting my stomach (I wasn't taking it with food). Within a day or two I noticed I felt much better. That's when I starting wondering if there was any information on the doxycycline causing depression.</p> <p>I checked online and found several people complaining of this side effect but I couldn't find it on any of the drug indication sites. Next, I called my sister, who is a dermatologist, and asked her. She had never heard of depression being a side effect of this drug. She prescribes it all of the time. With that in mind, I started back on my antidepressant medicine and began the 6 weeks of the antibiotic. Now, I this point you might be questioning my judgment, but I figured I knew what to expect and I thought I could handle it.</p> <p>After 3 weeks I called the doctor to ask if I could switch to a different antibiotic because the depression was so bad. The doctor (not a very good doctor) left a message suggesting I just stop taking it. Well I have always been taught that if you don't finish a course of antibiotics your body gets resistant to them. What with MSRA cases cropping up I decided to try and finish the last 3 weeks. After 5 weeks I was having increasing thoughts of slitting my wrists to watch the blood. Although I suffer from chronic depression I have NEVER been suicidal. I took the medicine for 2 more days and figure that will have to be close enough to the 6 weeks!</p> <p>Today is my first day of NOT taking the drug. I'll let you know how I feel tomorrow! :)</p> <p>If your teenager is feeling depressed after taking this medicine, DO NOT rely on the doctor to know this side effect but insist on a different medicine.</p> <p style="text-align: right;">Back to Top</p>
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<p>peacesoul Veteran Member</p> <p>Date Joined Jan 2007 Total Posts : 2170</p>	<p>Posted 12/5/2007 11:36 AM (GMT -7)</p> <p>bump</p> <p>6 days on doxy and I feel my anxiety is worse.</p> <p>Any new input</p> <p style="text-align: right;">Back to Top</p>
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<p>crew New Member</p> <p>Date Joined Nov 2007 Total Posts : 3</p>	<p>Posted 12/5/2007 9:10 PM (GMT -7)</p> <p>It has been about 5 days since i stopped the doxy. The really bad thoughts and depression are gone. I am dealing with my "normal" depression which I think it triggered. At least I know how to take care of that.</p> <p style="text-align: right;">Back to Top</p>
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<p>crew New Member</p> <p>Date Joined Nov 2007 Total Posts : 3</p>	<p>Posted 12/6/2007 1:47 PM (GMT -7)</p> <p>Thanks Shy but I'm not taking the doxycycline anymore. I'm feeling much better now. If I needed the doxycycline for a long term or repeated use I would certainly contact a doctor about using a different medicine. From the medical sources I have looked into, the medical community does not recognize depression as a side effect for doxy but the patient evidence certainly says otherwise!</p> <p style="text-align: right;">Back to Top</p>
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<p>ShynSassy Veteran Member</p> <p>Date Joined Dec 2005 Total Posts : 3036</p>	<p>Posted 12/7/2007 6:09 AM (GMT -7)</p> <p>I wonder how long it will take before they figure that out? So many different side effects for meds,I would bet that within a year you will see the new "updated side effects".</p> <p>Shy</p>
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<p>Love_no1 New Member</p> <p>Date Joined May 2008 Total Posts : 1</p>	<p>Posted 5/20/2008 10:06 AM (GMT -7)</p> <p>To all concern,</p> <p>I had the MRSA infection and I was on antibiotics 4 different kinds and finally they put me on tetracycline for 2 months,</p> <p>I felt so bad physically and mentally. I have been off the antibiotic since Feb 29, 2008 and am still having nightmares about suicide and murder dreams.</p> <p>I believe that antibiotics do create depression. And I think we need to do some research. I just went on Zoloft and I hope this helps, but it has only been two weeks. If anybody is concerned please write back. Because Teenagers are taking it for acne and that is just wrong.</p> <p>Thanks,</p> <p style="text-align: right;">Back to Top</p>
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<p>JonnyB New Member</p> <p>Date Joined May 2008 Total Posts : 6</p>	<p>Posted 5/23/2008 11:13 AM (GMT -7)</p> <p>I am 21, and currently on DoxyCycline. I was prescribed it as an alternative to Penicillan, because I am allergic to it.</p> <p>I was diagnosed with a semi serious condition, that is cure-able with a single dose of Penicillan, but because of my allergies, I have to go through 2 weeks of DoxyCycline instead.</p> <p>I am on my 2nd week, and am experiencing 'severe mental distress'. I put it in quotes because thats pretty much the only way I can describe it.</p> <p>I have felt extremely bored, tired, and lack of will to eat.</p> <p>I find myself sitting at my pc, and then I am grabbing my head in frustration at small things, then after these mood swings, which occur within an hour of me taking the pill, I find I am retreating to my bed, to lye on my side, and wait for a calm resolve to settle.</p> <p>Does anyone agree that this sounds like a side effect. I dont actually know how to describe this to the doctor in a way that doesnt sound 'funny'.</p> <p>Note - The condition I was diagnosed with, was 'the Syph' - Queue Embarrassment.</p> <p style="text-align: right;">Back to Top</p>
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<p>JonnyB New Member</p> <p>Date Joined May 2008 Total Posts : 6</p>	<p>Posted 5/23/2008 2:31 PM (GMT -7)</p> <p>This depression is really getting to me now. Every small little thing throughout the day is getting me down.</p> <p>Only thing that actually seems to be relaxing is pepsi... Strange, I know, but I have a pepsi addiction too.</p> <p>I havent actually told my GP im on the Doxy cause I got them from a certain clinic..... (for the afore mentioned problem) ,should I tell my GP, and ask if there is any alternative?</p> <p>I have about 7 more tablets to go, and thats 2 a day, but still, I think im gonna need my GP to give me some pick-me-ups after this.</p> <p>Its like, im playing a game on my pc, I die, and im so wound up, and tired from it all, that I quit the game, and go lye on my bed with my head covered by my arms, and im just lying there for an unknown reason. Over dramatic I know, but these pills are giving me mental problems.</p> <p>I cant even be in the same room as my Housemate, because I feel tired all the time, and if im in the living room, im putting my head back, and closing my eyes trying to relax.</p> <p>Does anyone think that my case is slightly over the top, or is it usual with these pills? I dont remember being this bad before the pills, AND lets face it, I joined this forum, because I suspected I was being made depressed by the pills... (I Typed into google "Doxycycline, mental problems, depression" and voila, found this forum).</p> <p style="text-align: right;">Back to Top</p>
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<p>blamo New Member</p> <p>Date Joined Jun 2008 Total Posts : 1</p>	<p>Posted 6/25/2008 10:09 PM (GMT -7)</p> <p>Hey everyone. I thought I'd reply to this thread just to add my experience with Doxycycline. I'm 30 years old, I had a break out of my face of acne. So I got tired of it, went to my doctor and she gave me a prescription of Doxycycline. First I didn't take it with a full glass of water everytime and it really messed with my stomach, pretty strong stuff, so be sure you take this with a lot of liquids.</p> <p>I understand that issue since it was on the label and I was just being stupid and not following directions, but the interesting side effect that wasn't on the label was depression and a general blah feeling about life. Usually I'm a very positive and light hearted person and this made me feel like a robot in life with no real will to live. I stopped taking the drug and it eased off, then I took the pill and it came right back, so I just stopped taking the medicine cold turkey and I'm feeling great and back to my old self again.</p> <p style="text-align: right;">Back to Top</p>
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Screen clipping taken: 27/11/2010, 10:42 PM

<p>JonnyB New Member</p> <p>Date Joined May 2008 Total Posts : 6</p>	<p>Posted 6/26/2008 1:04 AM (GMT -7)</p> <p>I finished the course I mentioned above of Doxycycline, and went back to the Doc who prescribed it.</p> <p>I sorta let slip that I had missed the last 3 doses of the pills, cause I misplaced them, then found them, so the course was sorta put out of whack.</p> <p>The Doc then said I had to take one more week of the stuff to make sure its had the desired effect.</p> <p>This time, he said I can take the two pills at the same time during the day with food. When I told him about the Depression I was feeling, he said that Depression isnt one of the Symptoms or Side Effects of DoxyCycline, and he said that maybe I was just feeling depressed as result of another side effect. Eg - Maybe the upset tummy was making me upset or something?</p> <p>Anyhow, I noticed for the 1st day, that when taking 2 pills at same time, the depression hits you faster, and harder, its more noticable, I ended up holding my head in my hands for about 10-20 minutes when it hit me, then lying on my bed lifeless, and bored out of my skull.</p> <p>The second day wasnt so bad, but I did experience some pain in my chest, which I believe is a 'real' recognised side effect of doxycycline. It was like a numb pain, that was constantly there for few hours in my right side of my chest, and it hurt more when I exhaled. Told doctor about it, he thought nothing of it.</p> <p>In the end, after the 3rd day, I didnt notice much depression or pain. Maybe I had just got used to it. Now im off the stuff, and hoping I never have to go back onto it again. I blame my genetic makeup.... for making me Allergic to Penecillan, hense Doxycycline being prescribed as an alternative.</p> <p style="text-align: right;">Back to Top</p>
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Screen clipping taken: 27/11/2010, 10:43 PM


<p>Dontdothedox New Member</p> <p>Date Joined Oct 2008 Total Posts : 1</p>	<p>Posted 10/28/2008 7:58 AM (GMT -7)</p> <p>I have seen enough in this forum and others, grouped with my own experience over the last 2 weeks to say no matter what your actual problem is. don't take this drug. it has sent me into violent mood swings, panic and Hide under a rock- depression. now all i can do is wait for it to go away, i have dealt with it for this long because it never ocured to me that it could be an antibiotic causing it. I thought, "Well you've been sick and in the bed doing nothing, not seeing the light of day, its the disturbance of your routine." now i know its the medicine, but that doesn't ease the actual symptoms of the anger and anxiety. I've quit taking it now and i'll never take it again even if its the only thing to save my life. I have been down right belligerent with people who i would never be hatefull with, I dont' know i just cant believe the medical industry doesnt' recognize such devistating side effects.</p> <p style="text-align: right;">Back to Top</p>
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Screen clipping taken: 27/11/2010, 10:43 PM

<p>BeccNaTioN New Member</p> <p>Date Joined Jan 2009 Total Posts : 1</p>	<p>Posted 1/12/2009 12:14 PM (GMT -7)</p> <p>Hi Guys,</p> <p>Im only new to this site, but i thought i would share my experiences with Doxycycline with you all.</p> <p>Im a healthy and fit almost 21 year old female. I was given this medication to help keep infection at bay for my kidney stones.</p> <p>I was admitted to the Psychiatric ward of my local hospital 2 days ago, For trying to hang myself. Something im not proud of. Something that is not who i am.. something i would never do, nor have ever thought about doing.</p> <p>I was on this medication for 15 days.. after 6 days.. i was crying for no reason, i was screaming at people, and i started to fear leaving the house..and i was also starting to hate myself and want to harm myself... by the tenth day, my depression was severe and if i tried to go out.. i would make it as far as the driveway before i would have a panic attack and start vomitting</p> <p>My doctor was made aware of this immediately by my family whom payed it no attention said it was a normal thing. And that life must be troubling me.</p> <p>I was released on high alert till the medication has filtered out of my system, Please if you are taking this drug, and the signs start appearing.. dont ignore them and think life is just hard or that you just feel off that day.. because i would hate for another person to deal with what i and my family dealt with.</p> <p><i>Post Edited (BeccNaTioN) : 1/12/2009 11:18:12 AM (GMT-7)</i></p> <p style="text-align: right;">Back to Top</p>
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Kronos999 New Member Date Joined Apr 2009 Total Posts : 1	Posted 4/7/2009 12:35 PM (GMT -7) I realize this is an old topic but I have something to add. I was on Doxycyclin for 2 weeks last year in mid September for Influenza symptoms and a Upper Respiratory Infection. By the end of my first week I was in a daze almost every day, having constant negative thoughts and thoughts of suicide. This came to a peak on the 6th day of me taking the drug when I attempted suicide via Tylenol overdose. I was totally gone and not thinking straight yet (fortunately) I didn't take enough to result in death but I was terribly sick and had to get an emergency stomach pump after my roommate found out and drove me to the hospital (I'm in College). I stopped taking the drug then and there but I am now having increasingly frequent Suicidal Ideations whenever I am in a emotionally tense situation and I'm beginning to think suicide as more of a solution than a problem. Anyway...I never felt like this ever before taking Doxy and I blame the drug more than anything else.
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nagger15 New Member Date Joined Apr 2009 Total Posts : 1	Posted 4/12/2009 7:00 AM (GMT -7) i took one tetracycline yesterday and it drove me crazy, i went into a depression so bad i wished i would die,now 12 hours later i'm just starting to feel normal. this happens every time i try to take this or supra
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Does tetracycline cause depression?

Steve
Im 16 and i have been taking tetracycline for about two months. I have noticed that ive been more depressed and less motivated. I tried looking this up but common side effects didnt say anything about depression or mood swings. But it did say for younger people not to take it. Im not taking it for acne. I was just thinking maybe its not a good idea.... Any info/advice would be nice.

1 year ago

<http://answers.yahoo.com/question/index?qid=20090911235344AAJSD4W>

Doxycycline induced hypoglycemia

Friday, 14 December 2012

8:06 PM

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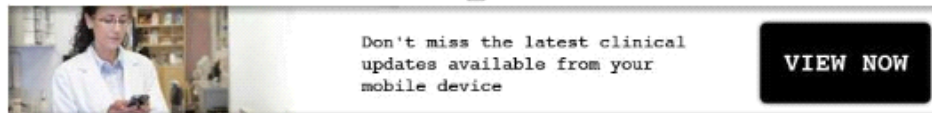
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Southern Medical Journal > Case Reports

Doxycycline-Induced Hypoglycemia in a Nondiabetic Young Man

Shehzad Basaria, MD, Milena Braga, MD, W. Tabb Moore, MD | Disclosures

South Med J. 2002;95(11)



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References

This is the first report of a nondiabetic patient with doxycycline-induced hypoglycemia. The only previous report of doxycycline-induced hypoglycemia was in an elderly patient with type 2 diabetes.^[1] However, a handful of reports have implicated other tetracycline products in causing hypoglycemia in both diabetic and nondiabetic patients.^[2,3] Miller^[2] reported oxytetracycline-induced hypoglycemia in a diabetic patient whose blood glucose levels were initially uncontrolled because of glandular fever. Dangerously low glucose values have occurred within 2 hours of instillation of tetracycline hydrochloride into the pleural space of a nondiabetic patient.^[3] The mechanism by which tetracyclines induce hypoglycemia is not clear. Increased sensitivity to insulin and decreased clearance of insulin have been implicated.^[4] Although tetracyclines can induce hepatic damage and thereby deplete glycogen stores, all patients reported had normal results of liver function tests. Furthermore, animal studies have shown normal hepatic glycogen stores in dogs with oxytetracycline-induced hypoglycemia.^[4] We propose that doxycycline should be included in the list of drugs that can cause hypoglycemia. Extensive metabolic research is needed to determine the mechanism of doxycycline-induced hypoglycemia.

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Reprint Address

Reprint requests to Shehzad Basaria, MD, Johns Hopkins Bayview Medical Center, Division of Endocrinology and Metabolism, 4940 Eastern Ave, Suite A-503-E, Baltimore, MD 21224.

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Self Harm and Glucose

Sunday, 16 December 2012

7:42 AM

E R SR E

the latest tasty tidbits of eating disorders research

TUESDAY, MAY 19, 2009

Is Self-Harm in Eating Disorders Associated with Impaired Glucose Metabolism?

Self-injury (such as cutting or burning oneself) is fairly common amongst people with eating disorders- approximately 25% to 45% of people with eating disorders self-injure, and approximately half of those who self-injure also have eating disorders (full article here). Many people report a sense of dissociation while self-harming, a desire to turn emotional pain into physical pain (ie, "real" pain), and also that this behavior reduces anxiety. Whether self-harm is from issues relating to impulse control, a more compulsive pattern of behavior, or something else entirely, the amount of overlap between self-injury and eating disorders is significant.

An interesting new paper from the journal *Psychoneuroendocrinology* looked at the relationship between self-injury and glucose metabolism in women with eating disorders, and what they found was significant. Women engaging in self-harm behaviors were given an oral glucose tolerance test, in which they were asked to drink a sweet solution to measure how the body handles sugar. The self-harming women who also had an eating disorder had higher levels of blood glucose after the test, but also higher levels of a hormone called glucagon.

Glucagon is essentially insulin's opposite: when the blood sugar is low, the pancreas secretes glucagon to prod cells into breaking down long chains of carbohydrates called glycogen into small sugars that can be released into the bloodstream and readily used by the body. When blood sugar rises after a meal, the pancreas secretes insulin, which stimulates cells to pull excess sugars out of the bloodstream and store them as glycogen for a rainy day*.

Besides low blood sugar, several other factors can stimulate the release of glucagon, including epinephrine (aka adrenaline), which is involved in the fight or flight response. Though I was unable to find any specific studies linking high levels of epinephrine and self-injury, it's certainly plausible to think that people who self-harm would have higher levels of epinephrine, especially right after an incident where such behavior occurs. Alternately, if high levels of glucagon also stem from high levels of epinephrine, the sufferer may be caught in a cycle of self-harm during episodes of low blood sugar.

For instance, a common pattern in those who binge and purge is binge-purge-self harm, where the self-harm typically occurs after the completion of the binge/purge cycle. After a binge, blood sugar goes up and glucagon levels go down. After a purge, blood sugar goes down, and glucagon and epinephrine levels go up.

No one knows at this point where the relationship between self-harm and glucose metabolism lies on the cause/effect scale. Certainly there is a feedback cycle between all of these systems. But one good point to keep in mind is the importance of helping sufferers regulate blood sugar levels by frequent meals and snacks that involve complex carbohydrates, proteins, AND fats. Food is medicine for the eating disorder, but it also might be true for self-injury.

*Aren't you glad I paid attention in my 8am biochem lecture 10 years ago?

(cross-posted at *ED Bites*)

Posted by Carrie Arnold at 12:04 AM
Labels: eating disorders, metabolism, self-injury

8 S GS I W

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