

# Atomoxetine

Strattera, a non-stimulant medicine for ADHD

This medicine treats ADHD around the clock without being a stimulant, and it is not habit forming.

## WHAT IT TREATS

**ADHD, ages 6 and up**

## HOW YOU TAKE IT

**Once or twice daily**

## WHEN IT WORKS

**2 weeks; full at 6 weeks**

## HABIT FORMING

**No; not a controlled medicine**

### ⚠️ IMPORTANT SAFETY WARNING

In studies, a small number of children and teens taking this medicine had new thoughts of suicide, and none died. Watch closely for new or worse mood, especially in the first weeks and after any dose change, and call right away.

## ① WHAT THIS MEDICINE DOES

- **Atomoxetine** raises norepinephrine, a focus and alertness chemical, without acting like a stimulant.
- It works around the clock, so mornings and evenings are covered, not just the school or work day.
- It is a good fit when stimulants make anxiety, tics, or sleep worse, or when a controlled medicine is not wanted.
- It is not a rescue pill. Taking an extra one on a hard day does nothing, because the benefit comes from steady use.

## ② HOW TO TAKE IT

- Take it at the same time each day. Many people take it at night with food because that eases nausea and daytime sleepiness.
- Swallow the capsule whole. Do not open, chew, or crush it, because the powder inside can badly irritate the eyes.
- If a capsule is opened by accident and powder gets in an eye, rinse with water right away and call your prescriber.
- Miss a dose? Take it when you remember that same day, then go back to the usual schedule. Never take two at once.
- Store it at room temperature, out of reach of children, and take it every day even on weekends and holidays.

## 📈 WHAT TO EXPECT

- This one is slow. Some benefit shows up around **2 weeks**, and the real answer is not clear until about **6 weeks**.
- Judging it after a few days is the most common mistake families make. Give it the full run at the target amount.
- Working well looks like steadier attention across the whole day and evening, with less of a wear-off in the afternoon.
- The improvement is usually more gradual and less dramatic than a stimulant, which some people prefer.
- In children, height and weight get tracked. Growth often dips early and then catches back up over **2 to 3 years**.

## ♥️ COMMON SIDE EFFECTS

- Nausea and stomach upset are common early. Taking it with food, and at night rather than morning, fixes it for most people.
- Lower appetite happens for many people. Anchor a solid breakfast and a calm dinner, and add snacks when hunger returns.
- Daytime sleepiness or fatigue is common. Moving the dose to bedtime is usually the answer, so ask before changing it.
- Dry mouth is common. Sip water, chew sugar-free gum, and stay on top of brushing and dental visits.
- Adults more often notice trouble starting urination or changes in sexual function. These are worth reporting, not enduring.
- Heart rate and blood pressure go up slightly, so both get checked before starting and at follow-up visits.

### ⚠️ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- New or worse thoughts of suicide, or talk of not wanting to be here: call or text **988** now, or go to the ER.
- Yellow skin or eyes, dark urine, or pain in the upper right belly can mean liver trouble: stop and call today.
- A spreading rash, blisters, or peeling skin: stop the medicine and get seen the **same day**.
- An erection lasting more than **4 hours**, or fainting: go to the emergency room right away.

## 🚫 WHAT TO AVOID

- Parents should watch closely for the first weeks and after each change: new agitation, hopelessness, or talk of dying.
- Never take it within **14 days** of an MAOI antidepressant, and tell your prescriber about narrow-angle glaucoma.
- Some antidepressants, like fluoxetine, paroxetine, and bupropion, make this medicine much stronger. Say what you take.
- Decongestants, inhalers, and other stimulants add to the rise in heart rate and blood pressure. Ask before combining.
- Alcohol does not react directly, but it works against attention and mood. Discuss pregnancy and breastfeeding first.

## ⏸️ STOPPING IT SAFELY

- You do not need to taper. There is no withdrawal, and there is no burst of hyperactivity when it is stopped.
- ADHD symptoms come back within days once it is out of your system, so plan the timing around school or work demands.
- Never stop or adjust it on your own, especially in the first weeks when mood should be watched most closely.
- If it did not help after a full **6 weeks** at the target amount, that is real information. Bring it back to your prescriber.

## ❓ QUESTIONS TO ASK

- What exact mood changes should I watch for, and who do I call after hours?
- When will we decide whether this is working well enough?
- Should we take it at night to cut the nausea and daytime sleepiness?
- How will growth, weight, and blood pressure be checked over the next year?

# Where this information comes from

988 Suicide and Crisis Lifeline. (2024). *988 Suicide and Crisis Lifeline*. <https://988lifeline.org/>

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U.S. National Library of Medicine. (2024). *Atomoxetine*. MedlinePlus. <https://medlineplus.gov/druginfo/meds/a603013.html>

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## NOTE

Sources are listed in APA 7th edition style. This handout is general information about a medicine, not medical advice, and it does not replace the instructions from your own prescriber or pharmacist. Never start, change, or stop a medicine on your own. If you think you are having a serious reaction, call your prescriber; if you cannot breathe, cannot stay awake, or are thinking of harming yourself, call 911 or 988 right away.