ABOUT YOUR MEDICINE

Brexanolone

Zulresso, a hospital drip treatment for depression after childbirth

Brexanolone is a two and a half day drip in hospital for depression after childbirth, and it can work within a day or two.

WHAT IT TREATS	HOW YOU TAKE IT	WHEN IT WORKS	AVAILABILITY
Postpartum depression	Hospital drip, 60 hours	Within 24-48 hours	No longer sold in the US

⚠ IMPORTANT SAFETY WARNING

This medicine can make you suddenly and deeply sleepy, or briefly pass out, with no warning at all. That is why you stay in a hospital the whole time, with a monitor on your finger and staff checking you every couple of hours.

WHAT THIS MEDICINE DOES

- **Brexanolone** is a copy of a natural hormone that falls sharply after birth, letting calming brain signals return.
- It goes in through a vein as a slow drip over **60 hours**, which is about two and a half days in hospital.
- It is **no longer marketed** in the United States, so your team may not be able to get it even if it would suit you.
- Zuranolone, a capsule you take at home for two weeks, treats the same illness and is what most people are offered now.

HOW TO TAKE IT

- You stay in a certified hospital or clinic for the full **60 hours** while the medicine drips in slowly.
- A small monitor clips to your finger the entire time, and staff check on you at least every **2 hours**.
- Your baby can usually stay with you, but another adult has to be there to hold and care for the baby.
- The drip is sped up and then eased back down in steps. You do not manage any of it yourself, so just rest.
- If you feel too sleepy at any moment, say so. Staff can slow the drip down or pause it while you settle.

WHAT TO EXPECT

- Many people feel a clear lift within **24 to 48 hours**, often before the infusion has even finished running.
- The benefit frequently holds for weeks after you go home, though your team will keep checking on you.
- Deep sleepiness during the infusion is expected, and catching it early is exactly what the monitoring is for.
- You will not be able to care for your baby alone during the stay, so line that help up before you are admitted.

COMMON SIDE EFFECTS

- Heavy sleepiness: this is the main effect. Tell staff instead of trying to push through and stay awake.
- Dizziness: stay in bed and press the call button before standing, and let someone walk with you to the bathroom.
- Dry mouth: sip water, and ask the nursing staff for ice chips or the small mouth swabs they keep on hand.
- Flushing or a hot feeling in your face: usually brief, and a cool cloth on the back of the neck helps a lot.
- Diarrhea or an upset stomach: mention it, so staff can adjust your fluids and treat it while you are there.
- Feeling drained the day you get home: plan a quiet day with help, and let someone else do the driving.

⚠ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Passing out or being hard to wake during the infusion is why you are monitored. Staff act on it at once.
- New or worse thoughts of suicide: call or text **988** now and tell your care team right away.
- Thoughts of harming your baby: call **988** or **911**. This is treatable, and speaking up is right.
- Once you are home, trouble breathing or fainting means call **911** rather than waiting it out.

WHAT TO AVOID

- Do not drive until at least the day after the infusion ends, and only once you have slept and feel clear headed.
- Skip alcohol during the infusion and for the rest of that day, because it deepens the sleepiness.
- Tell your team about opioids, sleep aids, and anxiety medicines, since all of them add to the drowsy effect.
- Do not plan to be your baby's only caregiver during the stay or on your first day back at home.
- Talk with your team about breastfeeding and pumping so you have a clear plan before you are admitted.

STOPPING IT SAFELY

- This is a single course. When the **60 hours** are done, the treatment is finished rather than stepped down.
- You do not have to wean off it, but you do need follow-up visits in the weeks that come after.
- Depression can return, so keep those appointments and speak up early if your mood starts slipping again.
- Keep taking any other antidepressant you were on unless your prescriber specifically tells you to stop.

QUESTIONS TO ASK

- Is this medicine still available at any hospital near me?
- Who will stay with me and care for my baby during the stay?
- Can I keep breastfeeding or pumping while I receive this?
- What follow-up will I need in the weeks after I go home?

Where this information comes from

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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.