

Escitalopram

Lexapro, an antidepressant called an SSRI

Escitalopram eases depression and constant worry, and it is one of the gentler medicines in its family.

WHAT IT TREATS

Depression, anxiety

HOW YOU TAKE IT

Once daily, any food

WHEN IT WORKS

1-2 weeks; fuller by 6-8

HABIT FORMING

No

⚠️ IMPORTANT SAFETY WARNING

Antidepressants can raise the risk of suicidal thoughts in people under **25**, mostly in the first weeks or after a dose change. Tell someone right away and call your prescriber. Do not stop the medicine on your own.

① WHAT THIS MEDICINE DOES

- **Escitalopram** is an antidepressant. It helps your brain hold on to serotonin, a chemical that steadies mood and worry.
- It is approved for depression from age 12 and for constant, hard-to-shut-off worry from age 7, plus panic and social anxiety.
- In large studies comparing antidepressants, it lands near the top for both how well it works and how well people tolerate it.
- It is not habit forming and it will not flatten you out. Most people say they feel steadier, not different.

🕒 HOW TO TAKE IT

- Take it once a day at the same time. Morning or evening both work fine, so choose the one you will remember.
- You can take it with or without food. If your stomach is unhappy in the first week, take it with a meal instead.
- Swallow the tablet whole with water. A liquid form exists if swallowing pills is hard, so ask your pharmacist.
- If you miss a dose, take it when you remember that day. If it is nearly time for the next one, skip it. Never double up.
- Store it at room temperature. Keep it somewhere you already look daily so the habit builds itself.

📈 WHAT TO EXPECT

- Sleep, appetite, and energy often shift first, in about **1 to 2 weeks**. Mood and interest usually catch up later.
- Give it **4 to 6 weeks** at a steady dose before deciding. The fullest benefit can take 8 to 12 weeks.
- Side effects often arrive before the benefit does. That gap is the single most common reason people quit too early.
- A higher dose is not automatically better here. Your prescriber raises it only if you get a partial answer, not by reflex.

♥️ COMMON SIDE EFFECTS

- Nausea is common in the first week or two. Take it with food and keep meals smaller and plainer until it fades.
- Sleepiness or trouble sleeping can both happen early. Ask about switching your dose to morning or to bedtime.
- Headache and tiredness are common at first and usually ease within two weeks. Water, rest, and routine help.
- Sexual side effects are common: less desire, delayed orgasm, or less sensation. Say so, because there are real fixes.
- Extra sweating and a fine hand tremor can happen. Cutting back on caffeine and dressing in layers helps a lot.
- Weight often creeps up slightly over a year. Steady meals, walking, and decent sleep matter more than dieting here.

⚠️ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- New or worse thoughts of suicide, especially early or after a dose change: call or text **988** now and tell someone today.
- Call **911** for agitation with fever, stiff muscles, a racing heart, or twitching. That can mean too much serotonin.
- Call your prescriber for new confusion, bad headache, or unsteadiness, especially in an older adult. Salt levels are fixable.
- Call your prescriber if you feel wired and sleepless for days, or if you bruise and bleed more easily than usual.

🚫 WHAT TO AVOID

- Skip alcohol, especially in the first weeks. It works against the medicine and drags sleep and mood back down.
- Ask before any new medicine, herb, or supplement. St. John's wort, tramadol, and migraine triptans are the big ones.
- Mention heartburn pills like omeprazole. They raise **escitalopram** levels, so your prescriber may adjust the dose.
- Check before regular ibuprofen, naproxen, or aspirin. Together they raise your chance of stomach bleeding.
- Tell your prescriber if you are pregnant, nursing, or planning to be. That is a choice to weigh together, not alone.

⏸️ STOPPING IT SAFELY

- Never stop on your own, even when you feel great. Feeling well is the medicine working, not proof you are finished with it.
- Stopping suddenly can bring dizziness, electric-shock feelings, irritability, and broken sleep. A slow taper prevents it.
- Your prescriber will step the dose down over **2 to 4 weeks** or longer, sometimes using the liquid for small drops.
- Most people stay on it at least **6 to 12 months** after they feel well. Stopping early is the top reason symptoms return.

❓ QUESTIONS TO ASK

- How long should I give this before we decide whether it is working?
- What can we try if the sexual side effects do not go away on their own?
- Do any of my other prescriptions or supplements clash with this one?
- Who do I call after hours if I start feeling worse instead of better?

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.