

Nortriptyline

Pamelor, Aventyl (brand discontinued in US), an older antidepressant that is gentler than most in its family

Nortriptyline lifts low mood and calms nerve pain, and it is usually the easiest of the older antidepressants to tolerate.

WHAT IT TREATS

Depression, nerve pain

HOW YOU TAKE IT

By mouth, often at bedtime

WHEN IT WORKS

2-4 weeks; fuller by 6

HABIT FORMING

No

⚠️ IMPORTANT SAFETY WARNING

Antidepressants can bring on new or worse thoughts of suicide, most often in people under **25** and in the first weeks. Anyone taking it should be watched closely for a darkening mood, and should call or text **988** if those thoughts start.

① WHAT THIS MEDICINE DOES

- **Nortriptyline** raises norepinephrine and serotonin, two brain chemicals that help hold your mood and energy steady.
- It is the same family as amitriptyline but built differently, so it causes less drowsiness and less dry mouth for most people.
- It also settles pain nerves that fire too easily, which is why it is a common choice for burning or shooting nerve pain.
- This is one of the few medicines where a blood test can show whether the amount in your body is in the helpful range.

② HOW TO TAKE IT

- Take **nortriptyline** at the same time each day. Bedtime suits most people, but some do better taking it in the morning.
- You can take it with or without food. A snack alongside it helps if your stomach feels queasy in the first days.
- Swallow capsules whole with a full glass of water. If you use the liquid, measure it with the syringe from the pharmacy.
- If you forget a dose and it is nearly time for the next one, skip the missed one. Do not take two at once.
- Store it in its own bottle, up high or in a locked box. It is dangerous in **overdose**, so safe storage matters.

🔪 WHAT TO EXPECT

- Sleep and appetite often improve first, in the first week or two. Mood usually follows in **2 to 4 weeks**.
- Give it about **6 weeks** at a steady amount before you and your prescriber decide whether it is really helping.
- For nerve pain, relief tends to build over **2 to 3 weeks** rather than arriving all at once.
- Your prescriber may check a blood level after a few weeks. That test guides adjustments and is a routine part of care.

♥️ COMMON SIDE EFFECTS

- Dry mouth: sip water through the day, chew sugar-free gum, and keep dental visits, since dry mouth invites cavities.
- Constipation: more water, more fruit and whole grains, daily walking, and a gentle stool softener if you still need it.
- Drowsiness: taking the dose at bedtime turns it into an advantage. Tell your prescriber if mornings still feel heavy.
- Dizziness when standing: rise in two steps, sit up first and pause, then stand while holding on to something solid.
- Blurry close-up vision or dry eyes: it usually eases in a few weeks, and plain lubricating eye drops help meanwhile.
- A faster heartbeat or mild sweating: often settles as your body adjusts, but mention it at your next appointment.

⚠️ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- New or worse thoughts of suicide: call or text **988** now, and tell your prescriber the same day.
- Chest pain, fainting, or a heart that races or skips beats means call **911** right away.
- If anyone takes too much of this, call **911** immediately. An **overdose** can harm the heart quickly.
- Not being able to pass urine, or sudden confusion, needs a same-day call to your prescriber.

🚫 WHAT TO AVOID

- Skip alcohol while you take **nortriptyline**. Together they can leave you very drowsy and unsteady on your feet.
- Do not drive or use machinery until you know how it affects you, especially in the first two weeks.
- Tell every prescriber and pharmacist. It clashes with some antidepressants, cold remedies, and heart rhythm medicines.
- Be careful in hot weather. This medicine makes sweating harder, so drink water and take breaks in the shade.
- If you are pregnant, nursing, or hoping to be, bring it up early so you can plan it together, not in a hurry.

⏸️ STOPPING IT SAFELY

- Do not stop on your own. Feeling better usually means the medicine is working, not that you no longer need it.
- A sudden stop can cause headache, nausea, chills, vivid dreams, and a restless wired feeling for several days.
- Your prescriber will lower it in small steps over **2 to 4 weeks** or longer, which prevents most of that.
- If a side effect is the problem, say so. There are other options, and any switch is planned rather than sudden.

❓ QUESTIONS TO ASK

- Will you check a blood level, and what would you do with the result?
- Do I need a heart tracing before I start or while I take this?
- How long should I stay on it if it works well for me?
- Which cold and allergy medicines are safe with this one?

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.