

Viloxazine

Qelbree, a once-daily non-stimulant medicine for ADHD

This medicine treats ADHD once a day without being a stimulant, for children from age 6 and for adults.

WHAT IT TREATS

ADHD, ages 6 and up

HOW YOU TAKE IT

Once daily, same time

WHEN IT WORKS

1 week; more by 6 weeks

HABIT FORMING

No; not a controlled medicine

⚠️ IMPORTANT SAFETY WARNING

In studies, thoughts of suicide and suicidal behavior happened more often with this medicine than with a sugar pill, at every age. Watch closely for new or worse mood in the first weeks and after each change, and call right away.

① WHAT THIS MEDICINE DOES

- **Viloxazine** raises norepinephrine, a brain chemical for focus and alertness, and it is not a stimulant.
- It is approved for ADHD in children from age **6**, in teens, and in adults, as one capsule a day.
- It is a real option when a controlled medicine is not the right fit, or when a different non-stimulant did not suit you.
- It treats ADHD only. It is not approved for depression, anxiety, or sleepiness, even though it affects mood chemicals.

🕒 HOW TO TAKE IT

- Take one capsule at the same time each day. You can take it with or without food, but keep it consistent.
- Swallow it whole, or open it and sprinkle the beads onto applesauce or pudding and eat right away without chewing.
- If sleepiness is a problem, ask about moving the dose to the evening. That change often solves it without stopping.
- Miss a dose? Take it as soon as you remember that day, then continue as usual. Do not take two in one day.
- Store it at room temperature, out of reach of children, and take it every day, including weekends and school breaks.

📈 WHAT TO EXPECT

- Some people notice a difference in the **first week**, which is faster than most non-stimulant options for ADHD.
- The full picture takes about **6 weeks**, since the amount is usually stepped up week by week to find the right level.
- Working well looks like better follow-through and fewer forgotten tasks across the whole day, not just at school.
- It does not have the peaks and wear-off of a stimulant, so afternoons tend to be steadier without a rebound hour.
- Height, weight, blood pressure, and heart rate get checked before you start and at follow-up visits, especially in kids.

💡 COMMON SIDE EFFECTS

- Sleepiness and tiredness are the most common effects and are the top reason people stop. Evening dosing usually helps.
- Trouble falling asleep is common in adults. If that is you, ask about taking it in the morning instead of at night.
- Nausea or vomiting can happen early. Taking it with a little food and staying upright afterward settles most stomachs.
- Appetite may drop for a while. Keep breakfast and dinner as anchor meals and add a snack when hunger comes back.
- Headache and dry mouth are common early on. Water through the day and sugar-free gum handle most of it.
- Irritability or a shorter fuse can show up, especially in children. Report it instead of waiting for it to pass.

⚠️ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- New or worse thoughts of suicide, or saying life is not worth living: call or text **988** now, or go to the ER.
- A sudden stretch of little sleep, racing speech, and huge energy can mean mania: call your prescriber that day.
- A spreading rash, blisters, or swelling of the lips or tongue: stop the medicine and get seen the same day.
- Fainting, chest pain, or a blood pressure reading far above your usual: call **911** or go to the ER.

🚫 WHAT TO AVOID

- Parents: in the first weeks, watch for new agitation, hopelessness, withdrawing from friends, or talk about dying.
- It is not used with tizanidine or theophylline, and it needs care with clozapine, olanzapine, and duloxetine.
- Caffeine hits harder on this medicine, so cut back on coffee, tea, and energy drinks if you feel wired.
- Never take it within **2 weeks** of an MAOI antidepressant. Give every prescriber your full medicine list.
- Stop it and call if you become pregnant, and talk with your prescriber before breastfeeding on this medicine.

① STOPPING IT SAFELY

- No taper is needed and there is no withdrawal illness, but ADHD symptoms come back within a few days.
- Do not stop or change it on your own, especially early on when mood is the thing being watched most closely.
- If sleepiness is the problem, shifting the time of day is worth trying before giving up on the medicine entirely.
- If it has not helped after the amount has been stepped up and held steady, say so. There are other options.

❓ QUESTIONS TO ASK

- What mood or behavior changes should we watch for, and who do we call at night?
- Should this go in the morning or the evening for me?
- Does this clash with anything else I take, including caffeine?
- How long do we give this before we decide it is or is not working?

Where this information comes from

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

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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.