

# Medication interaction checklist

Interactions get caught when your prescriber and pharmacist can see the whole list. This sheet helps you bring the whole list.

## Tell your prescriber and pharmacist about all of these

- Every prescription you take, with doses, including ones from other prescribers.
- Over-the-counter medicines: pain relievers (ibuprofen, naproxen, aspirin), cold and allergy products, sleep aids, antacids, and anti-diarrheals.
- Supplements and herbs, especially St. John's wort, which interacts with most antidepressants.
- Hormonal contraception. Some psychiatric medications change how well it works, and it changes lamotrigine levels.
- Anything you stopped in the last few weeks. Some medications, like fluoxetine and MAOIs, linger long after the last dose.
- Alcohol, nicotine, cannabis, and anything else used regularly. Nicotine and cannabis change the levels of some medications. This is about safety, not judgment.
- Pregnancy, plans for pregnancy, or breastfeeding.
- Kidney or liver problems, heart rhythm problems, seizures, or glaucoma.

## Combinations worth flagging out loud

- Two or more serotonin-raising drugs: antidepressants plus tramadol, triptans for migraine, dextromethorphan (in many cough syrups), lithium, or St. John's wort. Rarely, this can add up to serotonin syndrome.
- An SSRI or SNRI plus NSAIDs, aspirin, or blood thinners: added bleeding risk. Ask whether a stomach-protecting step makes sense.
- Anything sedating plus anything else sedating: benzodiazepines, sleep medications, opioids, alcohol, some antihistamines. Effects stack.
- Medications that affect heart rhythm (QT): some antidepressants and antipsychotics, plus some antibiotics and antifungals. The pharmacist can screen the combination.
- MAOIs plus almost anything: strict washout periods apply before and after. Around five weeks after stopping fluoxetine, two weeks for most other antidepressants.
- Grapefruit juice with certain medications: it raises levels of some drugs, so ask if yours is one.

## Three questions that catch most problems

- "Does anything on my list interact with this new medication?"
- "Is there anything over-the-counter I should avoid while on this?"
- "Which symptoms would mean I should stop and call you?"

### For educational purposes only

This sheet is general education from PsychiatryRx.org, medically reviewed by a board-certified psychiatrist. It isn't medical advice and it doesn't replace your prescriber, your pharmacist, or the FDA label that comes with your medication. Medication decisions depend on your history, your other medications, and where you live, so always follow your prescriber's instructions over anything printed here. Don't start, stop, or change a medication based on this sheet alone. If you're in crisis in the US, call or text 988.