BCGuidelines.ca

Appendix A: Medications That Mimic Mood Disorders

Class	Selected Agents
Central nervous system (CNS) medications	 Anticonvulsants (e.g., barbiturates, vigabatrin, topiramate) Antiparkinsonian drugs (e.g., levodopa, amantadine) Anti-migraine agents (e.g., flunarizine)
Cardiovascular system (CVS) medications	 Beta-blockers* (especially propranolol, metoprolol) Centrally-acting antihypertensives (e.g., clonidine, methyldopa) Vasodilators (e.g., hydralazine) Antiarrhythmics (e.g., amiodarone, digoxin)
Hormonal agents	 Corticosteroids Gonadotropic-releasing hormone agonists (e.g., leuprolide, goserelin)
Anti-infectives	 Antiretrovirals (efavirenz) Interferon-α Antimalarial (mefloquine)
Miscellaneous	Isotretinoin Clomiphene citrate

^{*} Controversy in Care: ¹ a connection between the use of beta-blockers and depression has long been hypothesized, especially propranolol and metoprolol. This association is supported by many case reports and small reviews. However, a meta-analysis and more recent reviews failed to demonstrate this association.

References

- 1. Celano CM, Freudenreich O, Fernandez-Robles C, et al. Depressogenic effects of medications: a review. Dialogues Clin Neurosci. 2011;13:109-25.
- 2. Whooley MA, Simon GE, Managing depression in medical outpatients, N Engl J Med. 2000;343:1942-50.
- 3. Ko DK, Hebert PR, Coffey CS, et al. ß-blocker therapy and symptoms of depression, fatigue, and sexual dysfunction. JAMA. 2002;288:351-7.
- 4. Gerstman BB, Jolson HM, Bauer M, et al. The incidence of depression in new users of beta-blockers and selected antihypertensives. J Clin Epidemiol. 1996;49:809-15.
- 5. Tonstad S, Davies S, Flammer M, et al. Psychiatric adverse events in randomized, double-blind, placebo-controlled clinical trials of varenicline: a pooled analysis. Drug Saf. 2010;33:289-301.