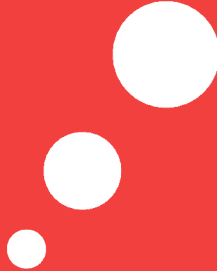


"I'VE BEEN ON THIS FOR  
YEARS. DOES THAT MEAN I'M  
ADDICTED?"

OR: I'VE HEARD THIS  
CAUSES DEPENDENCE,  
IS THAT TRUE?



# Dependence and addiction are not the same thing.

## *dependence*, n.

The body adapts to the presence of a substance over time. When that substance is removed, a withdrawal reaction follows. This is a physiological process and says nothing about compulsion, craving, or loss of control.

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## *addiction*, n.

Compulsive use of a substance despite the harm it causes, accompanied by craving, loss of control, and a tendency to escalate doses. This is a disorder of behaviour and reward, not of biology alone.

## **ANTIDEPRESSANTS DO NOT:**

I. Cause 'addiction'. Addiction involves craving, compulsively using a drug despite harm, and needing to increase the doses to have the same effect. People taking antidepressants do not experience this.

II. Antidepressants do not activate the brain's reward pathways in the way addictive substances do. This has real implications for how you understand your prescription and yourself.

**IF YOU STOPPED A MEDICATION FOR HYPERTENSION SUDDENLY, YOUR HEART RATE WOULD REBOUND. IF YOU STOPPED STEROIDS ABRUPTLY, YOUR BODY WOULD STRUGGLE TO REGULATE CORTISOL. THIS IS NOT ADDICTION: IT'S HOW THE BODY RESPONDS TO THE WITHDRAWAL OF ANY SUBSTANCE IT HAS ADAPTED TO.**

SSRIs work the same way -- physical dependence is a predictable biological process (not a sign that something has gone wrong with you or that you lack willpower), it is well-established, and it is manageable with a slow taper under medical guidance.

# What happens when you abruptly stop medication?

**Stopping antidepressants abruptly can produce a range of physical symptoms - not inevitable, but worth knowing about before you make any changes to your medication. They're called "discontinuation symptoms" and include:**

- Dizziness and problems with balance
- Nausea
- Flu-like symptoms: fatigue, headache, sweating
- Sleep disturbance, often with vivid dreams
- Sensory disturbances, including brain zaps
- Anxiety, irritability, or agitation

# PSYCHOLOGICAL DEPENDENCE IS REAL TOO:

Some patients take antidepressants for years without significant difficulty, and yet the prospect of stopping feels overwhelming, not because of anything physical, but because the medication is what they perceive has made them 'stable'.

Often there is a fear that they will 'relapse', compounded by any discontinuation symptoms (see next) that happen on stopping the medication abruptly.

This is a recognised phenomenon, distinct from both physical dependence and addiction.

# SO HOW LONG IS STAYING ON MEDICATION THE RIGHT DECISION?

- Continuation treatment for at least a few months after 'remission' (i.e. the absence or near-absence of depressive symptoms) is recommended following a first episode. Literature tells us this helps reduce the risk of having a depressive episode again.
- For a significant chunk of patients, i.e. those with more episodes, or with chronic depression, longer-term treatment may be required. Remaining on medication here is not dependence, but the indicated management of a recurrent condition.
- The decision to discontinue medication is often nuanced, and based on individual factors

# IF YOU NEED TO STOP THE MEDICATION SAFELY:

I. Slowly, and with your doctor, over weeks or months

II. “Hyperbolic tapering” or reducing by smaller amounts as you go lower tends to produce fewer symptoms

III. Very small doses may require tablet splitting or liquid formulations if available (again, discuss with your doctor)

Withdrawal symptoms tend to appear within days of stopping - relapse of the underlying condition typically takes longer to emerge. If you are unsure which you are experiencing, speak to your doctor.

- ✓ Dependence is not the same as addiction
- ✓ Withdrawal is not the same as relapse
- ✓ Struggling to stop is not a character flaw
- ✓ Remaining on medication is not a failure

IF YOU HAVE QUESTIONS ABOUT YOUR OWN MEDICATION, YOUR EXPERIENCE OF STOPPING, OR HOW LONG YOU SHOULD CONTINUE TREATMENT, THESE ARE CONVERSATIONS WORTH HAVING WITH YOUR DOCTOR