Tell your doctor about these conditions. Also take special care with Mirtazapine if you tell you if they think your depression is getting better and if you feel worse after a short period of unchanged or worse symptoms. If you are depressed you can sometimes feel better and get worse again. Mirtazapine will take 1 to 2 weeks before it starts working. If your doctor has prescribed Mirtazapine tablets for you, go to a hospital straight away. If you do not feel better or if you feel worse after 1 or 2 weeks of unchanged or worse symptoms. If you feel you can expect to start feeling better sooner.

2. What you need to know before you take Mirtazapine tablets

Do not take Mirtazapine tablets if:

• you are allergic to any of the ingredients of this medicine listed in section 6 (what other medicines should not be taken with Mirtazapine).

Tell your doctor or pharmacist before taking Mirtazapine if:

• you are taking or have recently taken any other medicines such as monoamine oxidase inhibitors (MAO-I).

Serotonin syndrome can be caused by the combination of Mirtazapine tablets and other medicines that increase the amount of serotonin in your body. It is important to tell your doctor or pharmacist about the medicines you are taking, even those purchased without a prescription.

Tell your doctor or pharmacist that you are taking Mirtazapine if:

• you are taking or have taken a medicine that can affect the way the body handles insulin or other antidiabetic medicines (such as insulin, sulfonylureas, metformin).

Driving and using machines

These symptoms usually begin during the first 1 to 2 weeks of taking Mirtazapine tablets. If these symptoms continue or become worse, your doctor may need to change your dose or stop your treatment. These symptoms are usually not dangerous.
Mirtazapine tablets contain Lactose (non-active substance). If you have a condition which means you are lactose intolerant or if you have milk allergy, you should talk to your doctor before you start taking this medicinal product.

3. How to take Mirtazapine tablets

3.1 The recommended dose

• increase in appetite and weight gain (may affect more than 1 in 10 people)

• thoughts of harming or killing yourself

• epileptic attack (convulsions)

• yellow colouring of eyes or skin; this may suggest disturbance in liver function (jaundice)

Rare

Uncommon

and tell your doctor immediately.

• 3rd degree skin rashes (Stevens-Johnson syndrome, toxic epidermal necrolysis).

• muscle pain, stiffness and/or weakness, (may affect up to 1 in 100 people)

• urge to move

• inappropriate anti-diuretic hormone secretion (may affect up to 1 in 10,000 people)

• abnormal sensation in the skin e.g. burning, tingling, prickling, stinging, tickling or tingling (paraesthesia) (frequency cannot be estimated)

• abnormal sensations in the mouth (oral paraesthesia)

• low blood pressure

• muscle twitching or contractions (myoclonus)

• hallucinations

• feeling agitated

• nightmares

• low blood pressure

• sensations of numbness in the mouth (oral paraesthesia)

• fainting (syncope)

• abnormal sensation in the skin e.g. burning, tingling, prickling, stinging, tickling or tingling (paraesthesia)

• dry mouth

• feeling anxious

• fever

• rash or skin eruptions (exanthema)

• cough

• nausea

• vomiting

• diarrhoea

• localized swelling

• oedema

• paraesthesia

• Rigaud syndrome or drug hypersensitivity syndrome

• rash or skin eruptions (exanthema)

• fever

• sweating

• low blood pressure

• dizziness

• urinary tract infection

• cystitis

• prolonged painful erection of the penis

• further swelling associated with inflammation of the vocal cords

• further swelling of the hands and feet

• further swelling of the face

• abnormal blood test results (bone marrow depression).

In rare cases mirtazapine can cause

• increased blood triglycerides.

• abnormal blood test results (bone marrow depression).

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