

Lithium (say: lith-e-umm)

What is lithium used for?

- Lithium carbonate (also called Lithicarb[®] and Quilonum[®]) is usually used to help prevent the symptoms of bipolar mood disorder (e.g. mania or depression) from coming back
- It can also help some people with schizoaffective disorder, or personality problems in people also with cyclothymia
- It can also be used to help the symptoms of acute mania, unipolar depression, aggression and cluster headaches
- It is made as tablets
- A liquid can also be made (as lithium citrate).

What is the usual dose of lithium?

 The usual dose of lithium is around 400-1000mg a day, but this will depend on the results of your blood tests.

How should I take lithium?

- Swallow the tablets with at least half a glass of water whilst sitting or standing
- This is to make sure that they reach the stomach and do not stick in your throat
- Do not break, crush or chew controlled release lithium tablets, and avoid taking with hot drinks
- It can be taken before, with, or after food.

When should I take lithium?

- Lithium is best taken once a day at bedtime
- It can be taken twice a day (morning & evening).

What are the alternatives to lithium?

- There are many other medicines (e.g. valproate, quetiapine, olanzapine)
- Talking therapies and other treatments may help you manage your symptoms.
- See our "Handy charts" for e.g. bipolar mood disorder, bipolar depression and mania to help you compare the medicines available and how long to take them
- This will help you discuss your care with your doctor, case manager or pharmacist.

How long will lithium take to work?

 Generally, lithium may take several weeks to start to work. The effect then builds over the next few months.

How long will I need to keep taking it for?

- If you are taking it for bipolar disorder, you should take it for at least two years (better for at least three years)
- Many people do well taking lithium for many years or decades.

Is lithium addictive and can I stop taking it suddenly?

- Lithium is not addictive, but it is **very unwise** to stop taking it suddenly, even if you feel better
- When the time comes, you should come off lithium by a gradual drop in the dose over at least 4 weeks, if not 3 months

If you stop lithium quicker than over 4 weeks (including running out of tablets) this will make your symptoms **much** more likely to return.

Obviously if you have got a very high level you may need to miss a few doses, but with medical help.

- Even just running out of tablets can make this happen so always have an emergency supply
- You should discuss this fully with your doctor, case manager or pharmacist.

See our handy fact sheet on 'Coming off Medicines'

What should I do if I forget to take a dose of lithium at the right time?

- Take the missed dose as soon as you remember unless it is within 10 hours of your next dose (or 5 hours if you take the liquid twice a day)
- If you remember after this time, just take the next dose as normal
- Do not try to catch up by taking two doses at once as you may get more side-effects.

If you have problems remembering your doses (many people do) ask your pharmacist, doctor or case manager about this.

Webster, other packs and Apps can help you.

Can I drink alcohol while I am taking lithium?

- If you drink alcohol while taking lithium it may make you feel more sleepy
- This is important if you need to drive or operate machines and you must seek advice on this.

Will lithium affect my other medication?

Lithium has many important interactions with other medicines. The main ones include:

- The effects of lithium can be increased by ACE inhibitors (e.g. enalapril, lisinopril, ramipril), some diuretics or water tablets
- Lithium levels can be increased by NSAIDs or COX-2 inhibitors (used for arthritis or pain, e.g. ibuprofen, naproxen, diclofenac, celecoxib)
- Paracetamol and usual doses of aspirin are OK
- Make sure your doctor, pharmacist or nurse knows about your lithium.

You must see the Consumer Medicine Information (CMI) leaflet for the full list of interactions. Some of these medicines can still be used together but you must follow your doctor's instructions carefully.



Can I drive, cycle or operate a boat while I am taking lithium?

- You may feel a bit sleepy at first when taking it so be careful as it may slow down your reactions
- Until this wears off, or you know how lithium affects you, do not drive or operate machines.

Will I need any blood or other tests if I am taking lithium?

- You will need regular blood tests while taking it
- Once you are on a steady dose, you should have a blood test every 3 months to check your lithium blood or plasma levels

- Every six months you should also have a test on your thyroid and kidney to make sure they are not being affected by the lithium
- This can be using the regular blood sample.

What about pregnancy and lithium?

- You must get expert help if you want to be, or find you are, pregnant
- Stopping lithium suddenly can be dangerous for you and the baby and your dose may need to be changed
- See our two fact sheets (a general one plus one just for lithium).

What sort of side-effects might I get if I am taking lithium?

This table shows some of the most common side effects and any you might need to take action on. You **must** also see the Consumer Information Leaflet (CMI) for the full list of possible side effects but do not be worried by this. Some people get no side effects at all. Others may get some that are not listed. Some side effects are the brain getting used to a medicine and these usually wear off in a few days or weeks. Starting slower may help. If you think you might have a side effect to this medicine, you should ask your doctor, pharmacist or case manager.

Side effect	What happens	What to do about it
VERY COMMON (more than about 1 in 10 people might get these)		
Tremor	Fine shaking of the hands	This is not dangerous. If it annoys you, your doctor may be able to give you something for it (e.g. propranolol). If it gets worse and spreads to your legs or jaw, see your doctor straight away.
Stomach upset	This includes feeling and being sick and getting diarrhoea	If mild, see your pharmacist. If it lasts for more than a day, see your doctor.
Polyuria	Passing a lot of urine.	Don't drink too much alcohol. Drink enough water. Tell your doctor about it as some blood/urine tests may be needed.
Metallic taste	Your mouth tastes as if has had metal or something bitter in it.	This should wear off in a few weeks. If it does not, tell your doctor next time. A change in dose may help. Don't chew the tablets.
Polydipsia	Feeling very thirsty. Your mouth is dry and there may be a metallic taste.	Drink water or low calorie drinks in moderation. Suck sugar-free lollies or gum. You should have regular tests to make sure your kidneys are working well (see blood tests above).
COMMON (fewer than about 1 in 10 people might get these)		
Fluid retention (oedema)	Puffy legs, eating and drinking more and putting on weight.	A diet full of vegetables, cereal and fruit may help prevent weight gain. Seek help from a dietician.
Hypothyroidism	Low thyroid activity - this makes you feel tired.	This is generally mild and fairly easily treated, although if your thyroid gets very low this can be serious. Tell your doctor – you will need a blood test and possibly thyroid replacement tablets.
RARE but important (can be serious if not dealt with quickly)		
Kidney or thyroid problems	Making more urine than usual or slowing up	See your doctor in the next week or two and make sure you have a blood test to check on your kidney and thyroid.
Blurred vision	Things look out of focus.	If this is unexpected, unusual or worse than usual, your lithium level may be too high. Other symptoms of lithium toxicity can include a hand tremor, slurred speech, diarrhoea, feeling or being sick, thirst, agitation, muscle weakness and strong reflexes. Do not take any more doses of lithium and see to your doctor straight away.
Sleepiness	Feeling extra sleepy and sluggish.	
Confusion	Your mind is all mixed up.	
Palpitations	A fast heart beat.	

Elifeline provides 24hr telephone crisis support on 13 11 14 or visit www.lifeline.org.au for information & downloads

The small print: This leaflet is to help you understand more about lithium. You **must** also read the manufacturer's Consumer Medicine Information (CMI) Leaflet. You may find more on the internet but beware as internet-based information is not always accurate. Do not share medicines with anyone else.