This information sheet has been produced by the Australian Rheumatology Association to help you understand the medicine that has been prescribed for you. It includes important information about:

- how you should take your medicine
- what are the possible side effects
- what tests you must have to monitor your condition and to detect unwanted effects
- other precautions you should take when you are taking Duloxetine

Please read it carefully and discuss it with your doctor.

**Important things to remember**

- While taking duloxetine you should see your rheumatologist regularly to make sure the treatment is working and to minimise any possible side effects.
- You should have regular blood tests as directed by your rheumatologist.
- If you are concerned about any side effects you should contact your rheumatologist as soon as possible.

For more information about RHEUMATOID ARTHRITIS and other inflammatory conditions see Arthritis Australia’s website: [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au)

**What is Duloxetine?**

Duloxetine can be used to treat different types of chronic pain. Duloxetine belongs to the group of medicines called Serotonin Noradrenergic Reuptake Inhibitors (SNRI) that are also used to treat depression. Duloxetine works by increasing the amount of specific nerve transmitters in the nervous system, this then reduces the pain messages arriving in the brain.

**What benefit can you expect from your treatment?**

Duloxetine is used to reduce neuropathic (nerve) pain. This means it is especially good at reducing sensations such as hot, burning, throbbing, shooting, stabbing, sharp, cramping, aching, tingling, numbness, pins and needles pain and for pain that keeps you awake at night.

You may feel a slight effect after a week but it may take up to two months to feel the full effect. The dose may need to be increased to gain maximum effect; your doctor / specialist nurse will advise you regarding this. Duloxetine does not always work for everyone, however if you do not feel any benefit from this medication, do not stop it suddenly but speak to your doctor first.

**How is Duloxetine taken?**

The tablets should be swallowed whole with water on an empty stomach.

**When should it be taken?**

It is recommended duloxetine is taken once a day, at about the same time each day. Taking it at the same time each day will have the best effect. It will also help you remember when to take it.

**What is the dosage?**

Duloxetine comes in different strength capsules. A typical starting dose is 30 to 60 mg taken once a day.

**Can other medicines be taken with Duloxetine?**

Duloxetine can interact with other medicines, e.g. warfarin, tramadol and herbal products. Always
tell your doctor, nurse or pharmacist which other medicines you are taking or buying, so they can make sure there are no interactions between your medicines.

**How long is the treatment continued?**
Treatment with Duloxetine is continued indefinitely as long as it is effective and as long as no serious side effects occur. If you stop Duloxetine treatment for more than a few weeks there is a risk that your condition may worsen. Continue with your treatment unless advised by your doctor or unless side effects develop.

If you have an illness that makes you unwell enough to change plans for the day (e.g. gastroenteritis or fever), it is reasonable to miss the weekly dose until you have recovered.

**Are there any side effects?**
You might experience side effects with your treatment. Tell your doctor if you are concerned about possible side effects. A reduction in dose may minimise side effects so that you can continue to take the treatment. Your doctor will advise on any dose changes that are necessary.

**Most common possible side effects**
The most common side effect for this medicine is drowsiness, which usually lasts a few days. If the drowsiness occurs, you should not drive or operate machinery, until the drowsiness stops. Other common side effects include dry mouth, diarrhoea and constipation. If you become constipated, tell your doctor/nurse/pharmacist and they will be able to recommend how you can change your diet or which medicine to take to treat your constipation.

If you experience any other side effects (anything unusual for you within a few days of starting the medicine) you should stop taking Duloxetine and inform your doctor.

**Less common or rare possible side effects**
Contact your doctor if you experience one of these

- Blurry vision – Duloxetine can cause blurry vision. Patients should tell their doctor if they have glaucoma before starting this medicine.
- Blood pressure – Duloxetine can rarely cause an increase in blood pressure. Doctors will monitor this. Patients should tell their doctor if they have high blood pressure.
- Increased sweating – Duloxetine can rarely cause an abnormal increase in sweating.
- Headache – Duloxetine can rarely cause a headache.
- Bladder problems – Duloxetine can cause urine retention and difficulty voiding.

- liver failure, yellowing of the skin or whites of the eyes (jaundice)
- serious allergic reaction which causes difficulty in breathing or dizziness with swollen tongue or lips, allergic reactions

**More information about possible side effects**
Information that comes with your Duloxetine medicine describes in detail potential serious side effects that may occur with methotrexate.

Many of those side effects relate to high dose Duloxetine used for the treatment of cancer. These may not be applicable to the much lower doses that are prescribed for the treatment of rheumatoid arthritis. Talk to your doctor if you have concerns about any possible side effects.

**What precautions are necessary?**

**Blood tests**
Patients who take Duloxetine should get occasional blood tests as requested by their doctor. It is important make sure Duloxetine isn’t irritating the liver.

**Use with alcohol**
The combination of Duloxetine and alcohol can cause significant drowsiness if you have just started on this medicine or the dose has recently been increased.

Drinking alcohol while taking Duloxetine is not recommended because it can irritate the liver. Patients are advised to avoid alcohol completely, or at the very least, substantially limit the amount of alcohol that they drink.

**How to store Duloxetine**

Keep your capsules in the pack until it is time to take them. If you take the capsules out of the pack they may not keep well.

Keep your capsules in a cool dry place where the temperature stays below 25°C. Do not store Duloxetine or any other medicine in the bathroom or near a sink. Do not leave it on a windowsill or in the car on hot days. Heat and dampness can destroy some medicines.

Keep it where children cannot reach it. A locked cupboard at least one-and-a-half metres above the ground is a good place to store medicines.

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.
Questions?
If you have any questions or concerns write them down and discuss them with your doctor.

Your doctor's contact details

You should see your rheumatologist regularly to make sure the treatment is working and to minimise any potential side effects.

How to help us help you
Sign up to the ARAD project now!
The Australian Rheumatology Association collects information on how well these drugs work and how often they cause problems.
The best way to get this information is from you!
Contact us in any of the following ways:
Email: ARAD@monash.edu
Telephone: 03 9508 3424
Visit our website: www.ARAD.org.au

The information in this sheet has been obtained from various sources and has been reviewed by the Australian Rheumatology Association. It is intended as an educational aid and does not cover all possible uses, actions, precautions, side effects, or interactions of the medicines mentioned. This information is not intended as medical advice for individual problems nor for making an individual assessment of the risks and benefits of taking a particular medicine. It can be reproduced in its entirety but cannot be altered without permission from the ARA. The NHMRC publication: How to present the evidence for consumers: preparation of consumer publications (2000) was used as a guide in developing this publication.