



# Medicines that increase risk of suicidal ideation

## **Background**

Suicide is a leading cause of death worldwide. There are several drugs where increased risk of suicidal ideation is listed as a side effect.

### **Medicines**

There is awareness of medicines that directly affect the Central Nervous System such as antidepressants, analgesics (particularly opiates), medicines used for smoking cessation and many non-prescribed substances such as cannabis. However, there are several other medicines that have this as a potential side effect.

#### These include: -

- Antibiotics incl. quinolones (ciprofloxacin, moxifloxacin, levofloxacin and ofloxacin), cephalosporins, penicillins and tetracyclines
- GLP-1 receptor agonists (semaglutide, liraglutide exenatide lixisenatide albiglutide, and dulaglutide)
- Antimalarials e.g., Chloroquine and mefloquine
- Glucocorticosteroids e.g., betamethasone, prednisolone and prednisone
- Testosterone
- Some chemotherapy agents (see SPCs for further information)
- Interferons
- Isotretinoin

A wide range of factors complicated diagnosis (and recognition) of psychiatric effects of medicines. Physical illness (and prognosis), co-prescribed medicines, non-prescribed agents, pre-existing or previous history of mental illness may all influence the clinical presentation and outcome.

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## Before prescribing consider:-

- Does the person have other risk factors for suicide and suicidal ideation? This
  can include changes in circumstances, changes in physical health or history
  of self-harm or attempted suicide.
- Is there an alternative that can be prescribed?
- Have you explained the risks and what to do if affected?
- Does the person have a "keeping safe plan"?

### References

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EMA statement on ongoing review of GLP-1 receptor agonists | European Medicines Agency (europa.eu)

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