Antidepressants: More Toxic to Liver Than Previously Thought?

Antidepressant medications, which all carry a risk of liver damage, may be more toxic to the liver than past research has suggested.

January 6, 2014

A group of French researchers has argued that antidepressant medications, which all carry a risk of liver damage, are more toxic to the liver than past research has suggested, Medscape reports. This is of particular relevance to people with hepatitis C virus (HCV), because hep C is a progressive disease of the liver. Publishing their findings in the American Journal of Psychiatry, investigators analyzed data regarding liver injury resulting from antidepressants, culling their information from 158 reports, including 88 case reports, 38 articles and 32 literature reviews.

According to the researchers' calculations, 0.5 percent to 3 percent of those taking antidepressants may develop asymptomatic mild elevation of serum alanine aminotransferase (ALT) levels—an indication of liver damage. They found liver damage hard to predict; its development was not typically related to a drug's dosage, for example. Ultimately, they declared that there was not enough evidence to assess either the prevalence or severity of liver damage among people taking such medications.

There are cases where antidepressant-related liver damage can be irreversible, so the researchers advocated early detection and the discontinuation of the drug in question if necessary. Damage may take place within days or up to six months after beginning an antidepressant.

The antidepressants that pose the highest risk of liver damage, the investigators concluded, include monoamine oxidase (MAO) inhibitors, tricyclic/tetracyclic antidepressants, nefazodone, bupropion, duloxetine and agomelatine. Drugs whose risks are apparently lower include citalopram, escitalopram, paroxetine and fluvoxamine.

To read the Medscape article, click here.

To read the study abstract, click here.
