ambetter of North Carolina Inc.

BUPROPION (WELLBUTRIN, FORFIVO, APLENZIN, ZYBAN)
Provider Tip Sheet

DOSING INFORMATION

- Wellbutrin-SR: Week 1: Baseline blood pressure: Start SR: 150 mg every morning. Week 2: Increase to an Initial Target Dose of 150 mg bid, if tolerated.
- Wellbutrin-XL: Week 1: Baseline blood pressure. Start XL: 150 mg every morning. Week 2: Increase to 300 mg every morning, if tolerated. Note: Aplenzin has a different titration. Typical Dosage Range: 300-450 mg/day. Max Dose: 400-450 mg daily. Discontinuation: 25% per week to 25% per month depending on length of treatment in order to minimize risk of relapse.

MONITORING

- Blood pressure. Reports of false-positive urine immunoassay screening tests for amphetamines have been reported in patients taking bupropion, consult lab if needed.

GENERAL INFORMATION

- Wellbutrin has a novel mechanism of action (weak dopamine and NE reuptake inhibitor; stimulant like effect).
- FDA Indications: Major depressive disorder, season affective disorder (prophylaxis), and smoking cessation.
- Off-Label Indications: Second line RX for ADHD.
- Pharmacokinetics: T½ = 21 hr. Common Side effects (XL-MDD): Headache (34%), dry mouth (26%), >5 lb. weight loss (23%), insomnia (20%), nausea (13%), constipation (9%), anxiety (7%), flatulence (6%).
- Black Box Warning: Increased SI in patients < 25 y/o. Increased risk of neuropsychiatric symptoms and suicidality in patients taking bupropion for smoking cessation.
- Contraindications: Seizure disorder, current or prior diagnosis of bulimia or anorexia nervosa, abrupt discontinuation of alcohol or benzodiazepines, use of a MAOI within 14 days of stopping Wellbutrin, concurrent use of a MAOI including drugs with significant MAOI activity (e.g., linezolid), or use of Wellbutrin within 14 days of stopping a MAOI.
- Warnings and Precautions: Clinical worsening and suicide risk, increased risk of seizures, use in patients with a history of traumatic brain injury, potential for hepatotoxicity and hepatic impairment, increased agitation and insomnia, hypertension, decreased appetite and weight, activation of psychosis, potential for renal impairment.
- Pharmacogenetics: Metabolized by 2B6. Significant drug-drug interactions: Inhibitor of 2D6; check all drug-drug interactions before prescribing.
- Dosage Form: Tablet (do not cut, crush or chew). Generic available: IR, SR, XL.

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Support

We are committed to the care and well-being of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

Please view the Provider section of our website at **ambetterofnorthcarolina.com** for additional tools and resources. You may also contact your Provider Engagement Administrator directly, or contact Provider Relations for assistance at **1-833-863-1310**.

This document is an informational resource designed to assist licensed healthcare practitioners in caring for their patients. Healthcare practitioners should use their professional judgment in using the information provided. Amitriptyline (Elavil) measures are not a substitute for the care provided by licensed healthcare practitioners and patients are urged to consult with their healthcare practitioner for appropriate treatment.