A practical guide to slow psychiatric drug withdrawal

Neuroleptics (and lithium)

(for mania, psychosis and hallucinations)

Sedatives and sleeping tablets

(for anxiety and insomnia)

Depression pills

(for anxiety and depression)

Speed-like drugs (for ADHD)

Epilepsy drugs

(for anxiety and bipolar)

A practical guide to withdrawal

Before starting a withdrawal process, you must be prepared for the withdrawal symptoms in the form of physical symptoms and unexpected feelings and thoughts – see the list below.

Withdrawal symptoms are positive because they mean that your body is about to become normal again. In most people, they disappear after some days or weeks.

Withdrawal should always be individualised and slow – this applies to all types of psychiatric drugs.

You must take responsibility for your drug withdrawal.

Discuss withdrawal with your doctor and consider bringing a proposal.

If your doctor disagrees with your wish to withdraw, find yourself another doctor.

Withdraw with the drug you use.

Taper slowly, for example with 10-20% for a start and see how it goes. When you are ready for the next step, then use your experience from the first taper and reduce, for example, the dose by 10-20% of the dose you now take. Continue at your own speed – be aware that the lower the dose becomes, the slower you should probably taper. You must not just halve the dose each time. Perhaps it would work the first time, but it can go seriously wrong already the second time when you come down to one quarter of the starting dose.

Register withdrawal symptoms in a chart or diary, or both.

If the withdrawal symptoms are bad, try to endure them a little longer, or go back to the previous dose and reduce the pace of withdrawal.

You should not take medication for withdrawal symptoms.

Do something good for yourself.

Make sure you have a friend or a family member with whom you can discuss your withdrawal and who can observe you. You might not notice if you have become irritable or restless, which can be symptoms of danger.

Consult the pharmacy about dividing tablets or opening capsules. The pharmacy sells a tablet divider.

List of withdrawal symptoms you may experience during withdrawal

People respond differently to drugs and to withdrawal. Some feel withdrawal symptoms very clearly, others hardly notice them.

When withdrawing, you or your relatives may be surprised that thoughts, feelings and actions may change. This is normal but can be unpleasant.

Withdrawal symptoms are often similar to the condition for which you were treated. Unfortunately, doctors often interpret them as a sign that you are still ill and need the drug. This is rarely the case.

Below are the most important symptoms you may experience. A few of them can be dangerous, if you taper too quickly and get a "cold turkey."

Flu-like symptoms

Joint and muscle pain, fever, cold sweats, running nose, sore eyes.

Headache

Headache, migraine, electric shock sensations/head zaps.

Balance

Dizziness, imbalance, unsteady walking, "hangover" or a feeling of motion sickness.

Joints and muscles

Stiffness, numbness or burning feeling, cramps, twitches, tremor, uncontrollable mouth movements.

Senses

Tingling in the skin, pain, low pain threshold, restless legs, difficulty sitting still (can be dangerous), blurred vision, light and sound hypersensitivity, tension around the eyes, ringing in the ears, tinnitus, slurred speech, taste and smell changes, salivation.

Stomach, gut and appetite

Nausea, vomiting, diarrhoea, abdominal pain, bloating, increased or decreased appetite.

Mood

Mood swings, depression, crying, sense of inadequacy, lack of self-confidence, euphoria or mania.

Anxiety

Anxiety attacks, panic, agitation, chest pain, shallow breathing, sweating, palpitations.

Perception of reality

Feeling of alienation and unreality, being inside a cheese-dish cover, visual and auditory hallucinations, delusions, psychosis.

Irritability and aggression

Irritability, aggression, angry outbursts, impulsiveness, suicidal thoughts, self-harm, thoughts about harming others. Can be dangerous.

Memory and confusion

Confusion, poor concentration, loss of memory.

Sleep

Difficulty falling asleep, insomnia, waking up early, intense dreams, nightmares that are sometimes violent.

Energy

Low energy, restlessness, hyperactivity.

This folder was prepared by Anders Sørensen, Bertel Rüdinger, Peter C Gøtzsche and Birgit Signora Toft. Copenhagen, 27 June 2017; revised 4 January 2020.