

Qelbree

(viloxazine)

[Full Prescribing Information](#)

[DailyMed Drug Information](#)

Forms/Strengths

- **Capsules:** 100 mg, 150 mg, 200 mg

Dosing

- **Age:** ≥ 6 y/o
- **Duration:** ~ 24 hours
- **Considerations:** Bubblegum-flavored; may be taken with or without food. Shake bottle before administering. Store at room temperature.
- **Initial Dose:**
 - 6-11 y/o: 100 mg once daily
 - 12+ y/o: 200 mg once daily
- **Titration:**
 - 6-11 y/o: 100 mg weekly
 - 12+ y/o: 200 mg weekly
- **Max Dose:**
 - 6-17 y/o: 400 mg daily
 - 17+ y/o: 600 mg daily

Quick Facts

- Non-stimulant; modulates norepinephrine (and possibly serotonin) to improve ADHD symptoms
- Enhances focus, attention, and impulse control
- Extended-release capsule for once-daily dosing
- Unique alternative for patients intolerant of stimulants

- Common side effects: decreased appetite, somnolence, fatigue, gastrointestinal discomfort, irritability
-

Indications

- **ADHD** (ICD-10: F90.0)
-

Off-Label Uses

- N/A
-

How to Take

- Take **once daily** at the same time each day.
 - Can be taken **with or without food**.
 - **Swallow the capsule whole**; do not crush, chew, or open.
 - If a **dose is missed**, take it as soon as possible unless it is close to the next dose—do not double up.
 - **Do not abruptly stop** taking; consult a healthcare provider before discontinuation.
-

Side Effects

- Common: Somnolence, decreased appetite, fatigue, nausea, vomiting, insomnia, irritability
 - Serious: Suicidal thoughts and behaviors, blood pressure and heart rate increases, activation of mania or hypomania
-

Monitoring / Labs

- **Cardiovascular**: Baseline and routine monitoring of heart rate and blood pressure.
 - **Growth in Pediatrics**: Regular monitoring of height and weight to detect growth suppression.
 - **Psychiatric Symptoms**: Observe for mood changes, anxiety, or psychosis.
 - **Abuse Potential**: Monitor for misuse or diversion.
-

Education

- **When to Call the Doctor:**

- Severe **mood changes, aggression, or suicidal thoughts**.
- Symptoms of **serotonin syndrome** (e.g., rapid heart rate, hallucinations, severe agitation, muscle rigidity, fever).
- Unusual bruising or bleeding.
- Signs of **liver dysfunction** (e.g., yellowing of the skin/eyes, dark urine, persistent nausea).
- Excessive drowsiness, fainting, or difficulty waking.

- **Safety Tips:**

- **Monitor blood pressure and heart rate**, as Qelbree may cause changes in vital signs.
- Use caution in patients with **history of depression, bipolar disorder, or suicidal thoughts**.
- Avoid **alcohol and sedatives**, as they may increase drowsiness.
- Be cautious when driving or operating heavy machinery until the effects of the medication are known.
- Tapering may be needed if discontinuing after long-term use.

- **Parent Tips for Pediatric Patients:**

- Monitor for **behavioral changes, increased agitation, or suicidal thoughts**, particularly in the first few weeks.
 - May cause **drowsiness or fatigue**—observe how the child responds to the medication.
 - Encourage **hydration and balanced meals** to minimize side effects.
 - If taken for **ADHD**, track progress with teachers and caregivers to assess effectiveness.
-

Additional Information

- **Contraindications:**

- **Hypersensitivity** to viloxazine or formulation components.
- **Use within 14 days of MAOI therapy** (risk of hypertensive crisis).

- **Pregnancy:**

- **Category Not Assigned**; safety in pregnancy has not been fully established.
- Use only if the benefits outweigh the potential risks.

- **Lactation:**

- **Unknown if excreted in breast milk**; use with caution.

- **Drug Interactions:**

- **CYP1A2 and CYP2D6 inhibitors** (e.g., fluvoxamine, paroxetine) may increase viloxazine levels.
- **Serotonergic drugs** (e.g., SSRIs, SNRIs, MAOIs, St. John's Wort) increase **serotonin syndrome risk**.

- **CYP3A4 inducers** (e.g., rifampin, carbamazepine) may reduce efficacy.
 - May increase the effects of **blood pressure medications**, leading to hypotension.
-

Revision #15

Created 21 December 2024 13:56:42 by Josh LeJeune NP

Updated 18 February 2025 02:38:06 by Josh LeJeune NP