

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
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Indications

- **ADHD** (ICD-10: F90.0)
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Off-Label Uses

- N/A
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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.
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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
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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.
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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.
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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.
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