

Amitriptyline is one of the most useful medications for managing pelvic pain because it helps several different symptoms at once. Around 1 in every 2 people who try it find it helpful. It doesn't suit everyone, but it often improves pain if you are someone with pain on most days.

Amitriptyline can take time to work, so you won't necessarily feel better straight away, but when taken every day in very small doses, it can help a range of different problems, including:

- a sharp or burning pain
- an overactive bladder
- a pelvis where everything feels sensitive
- painful pelvic muscles or tender points in other muscles like your neck or shoulders
- migraine or other headaches
- an irritable bowel
- poor sleep
- painful vulval skin
- a bloated feeling

Historically, Amitriptyline used to be taken in high doses (around 150mg daily) to treat depression and is still called a tricyclic antidepressant on the packet insert. Today, it is rarely used for depression as there are newer and better medications for this purpose. Amitriptyline is now used in small doses for pain and pain-related symptoms.

For pelvic pain we use  
Amitriptyline in low doses  
(5-25mg daily).  
This dose can be continued  
long term if it suits you.



### What are the side effects?

- feeling sleepy in the mornings
- slightly more constipation (not usually severe in low doses)
- dry eyes and dry mouth (not usually severe, and can be managed with extra water or chewing gum)
- while taking amitriptyline, you may find that alcohol affects you slightly more than usual, so be careful when drinking.
- serotonin syndrome - A rare drug interaction when amitriptyline is taken with some other medications. This is uncommon with low doses

### You should not take amitriptyline if you have:

- an eye condition called glaucoma;
- had a heart attack, irregular heart rate or other heart condition, including a short QT interval, or
- epilepsy (fits).



### Starting Amitriptyline

Each blue tablet contains 10mg of Amitriptyline. It can be divided in half with a pill cutter from your pharmacy. As it can make you feel sleepy in the morning for the first few days, you should start Amitriptyline at a dose of 5mg (half a tablet) the evening before a quiet day when you won't be driving to check that you are not too drowsy on it. This is a very low dose. Take your amitriptyline early in the evening every day, around 3 hours before bed. You should stay on this dose (5mg) until you do not feel sleepy in the mornings (usually a few days), then increase the dose to 1 full tablet (10mg) each evening.

The right dose for each person varies between different people. Some people find that just 5-10mg at night makes a big difference to their pain, and there is no need to try a higher dose. Other people, especially those with an irritable bladder or bad headaches, may be better on a higher dose, up to 25mg in the evening. Whenever you increase or decrease the dose, do so by 5mg each time and do so slowly. It is important that you do not stop the medication suddenly. So, if you want to go off amitriptyline, reduce your dose 5mg at a time slowly over a periods of weeks.

With the guidance of your doctor, you can find the dose that suits you best. It is better to be on a smaller dose you are happy to continue taking than a larger one you stop using due to side effects. If you still feel sleepy, even on a small dose, speak with your doctor. You may find that a similar medication called nortriptyline, used in the same doses, can be taken without feeling sleepy. People who sleep poorly often find that Amitriptyline helps them sleep better at night.

Once you decide to try amitriptyline, remember to take it every evening, not just on the days you have pain, and then ask yourself in a few weeks, "Do I feel better? Is my life easier now? How are my headaches? How is my bladder? If you are feeling generally better, you should continue taking it for a few weeks or longer; it is not addictive and can be taken long-term if needed.

### Stopping Amitriptyline

Do not stop amitriptyline suddenly. Amitriptyline is safe to use long term, but if you decide to stop it, it needs to be stopped slowly. Again, see your general practitioner for guidance with stopping this medication. Once you get down to 10mg or less, you can stop it.

If you stop amitriptyline, it may take weeks or sometimes months for the pain to return. If the pain returns, you should start the amitriptyline again. Some people choose to use low doses of amitriptyline for short periods of a few weeks or so during times when their pain is a problem. Other people stay on the same dose long term.

### Amitriptyline and pregnancy

We have a lot of information available about this medication in pregnancy as the medication has been used for many years. Any risk to the baby is minimal, especially as the doses we use for pain are much lower than those used in the past when it was used in high doses for depression. Despite this, if possible we recommend that you stop this medication if you are trying to get pregnant. We also recommend using contraception while on Amitriptyline if you are sexually active. If you have found Amitriptyline so helpful for your pain that you are unwilling to stop it, you should discuss this further with your doctor.