Other Behavior Medicines
(Blood Pressure Medicine, Naltrexone, Over the Counter)
“Project MED” stands for Medication EDucation. The Project MED Group has written a series of eight education booklets about medicines. These booklets will help you if you have learning problems, reading problems, or problems understanding why you are taking medicine. These booklets will also be useful to you if English is not your main language. Parents, guardians, and other care givers might like to read these booklets too.

Our goal was to write the information in plain words. When we cannot avoid using a hard-to-read word, we give you help in pronouncing (pro-NOWN'-sing) the word. We also describe what the hard-to-read word means in parentheses ( ).
Other Behavior

Medicines

(Blood Pressure Medicine, Naltrexone, Over the Counter)

Written by The Project MED Group:
    Michael G. Aman
    Betsey A. Benson
    Kenneth M. Campbell
    Jessica K. Masty
    Andrea N. Rohr

Illustrated by:
    Nikkole Kozlowski

Layout/Design By:
    Michelle Patterson

Recommended Citation:
Aman, M.G., Benson, B.A., Campbell, K.M., Masty, J.K., & Rohr, A.N. (2001). Other behavior medicines (blood pressure medicine, naltrexone, over the counter. Columbus, OH: The Ohio State University.
Project MED is supported by a grant from the U.S. Administration on Developmental Disabilities (Grant No. 90DD0446)

To the Ohio State University Nisonger Center, A University Center for Excellence in Developmental Disabilities.

©1999, 2000, 2010 The Nisonger Center UCEDD
The Ohio State University
Table of Contents

How to Use This Booklet ................................................................. 1
  1. Name(s) .................................................................................... 1
  2. Used for what? ......................................................................... 1
  3. Main side effects ....................................................................... 2
  4. Doses ....................................................................................... 2
  5. Common Interactions ............................................................... 2
  6. How long will I take this? .......................................................... 3

Beta Blockers ................................................................................ 3
  1. Name(s) .................................................................................... 3
  2a. Used for what? ........................................................................ 4
  2b. Other uses .............................................................................. 4
  3. Main side effects ....................................................................... 6
  4. Doses ....................................................................................... 6
  5. Common Interactions ............................................................... 7
  6. How long will I take this? .......................................................... 9

Clonidine (Catapres) and Guanfacine (Tenex) .................................. 9
  1. Name(s) .................................................................................... 9
  2a. Used for what? ........................................................................ 9
  2b. Other uses .............................................................................. 10
  3. Main side effects ...................................................................... 11
  4. Doses ....................................................................................... 12
  5. Common Interactions ............................................................... 12
  6. How long will I take this? .......................................................... 13

St. John’s Wort ............................................................................. 14
  1. Name(s) .................................................................................... 14
  2. Used for what? ........................................................................ 14
<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Main side effects</td>
<td>15</td>
</tr>
<tr>
<td>4. Doses</td>
<td>16</td>
</tr>
<tr>
<td>5. Common Interactions</td>
<td>16</td>
</tr>
<tr>
<td>6. How long will I take this?</td>
<td>17</td>
</tr>
<tr>
<td>Naltrexone</td>
<td>17</td>
</tr>
<tr>
<td>1. Name(s)</td>
<td>17</td>
</tr>
<tr>
<td>2a. Used for what?</td>
<td>18</td>
</tr>
<tr>
<td>2b. Other uses</td>
<td>18</td>
</tr>
<tr>
<td>3. Main side effects</td>
<td>19</td>
</tr>
<tr>
<td>4. Doses</td>
<td>19</td>
</tr>
<tr>
<td>5. Common Interactions</td>
<td>19</td>
</tr>
<tr>
<td>6. How long will I take this?</td>
<td>19</td>
</tr>
<tr>
<td>Melatonin</td>
<td>20</td>
</tr>
<tr>
<td>1. Name(s)</td>
<td>20</td>
</tr>
<tr>
<td>2. Used for what?</td>
<td>20</td>
</tr>
<tr>
<td>3. Main side effects</td>
<td>21</td>
</tr>
<tr>
<td>4. Doses</td>
<td>22</td>
</tr>
<tr>
<td>5. Common Interactions</td>
<td>22</td>
</tr>
<tr>
<td>6. How long will I take this?</td>
<td>22</td>
</tr>
<tr>
<td>Vitamin B6</td>
<td>23</td>
</tr>
<tr>
<td>1. Name(s)</td>
<td>23</td>
</tr>
<tr>
<td>2a. Used for what?</td>
<td>24</td>
</tr>
<tr>
<td>2b. Other uses</td>
<td>24</td>
</tr>
<tr>
<td>3. Main side effects</td>
<td>25</td>
</tr>
<tr>
<td>4. Doses</td>
<td>26</td>
</tr>
<tr>
<td>5. Common Interactions</td>
<td>27</td>
</tr>
<tr>
<td>6. How long will I take this?</td>
<td>27</td>
</tr>
</tbody>
</table>
This booklet talks about 6 different kinds of medicines. Some are used to treat physical (FIS'-ih-kul) problems. But most can be used to treat problems with how people feel or how they act. Lots of different medicines are described here. To make this booklet as short as possible, we talk about each medicine with these 6 topics:

1. Name(s)

_Name(s)_ gives the medicine’s name. Most medicines have two names – a _brand_ name and a _generic_ (je-NAIR'-ik) name. Brand names are names given to the medicines by the company that makes them. A medicine may have more than one brand name. Generic names describe the chemicals (KEM'-i-kuls) used to make the medicine. A medicine can have only one generic name.

![label showing brand and generic names]

2. Used for What?

This tells what the main uses are for the medicine.
If the medicine has both a *physical* use and a *behavioral* use, we give both.

### 3. Main Side Effects

Side effects are unplanned changes that sometimes happen when you take a medicine. Sometimes side effects are a problem. They can make your body feel different. Example: Some medicines can make you feel tired. We list the most common kinds of side effects for each medicine.

### 4. Doses

The dose is the amount of medicine that is given. Usually, doses are given in *mg*, which stands for *milligrams* (MILL'-ih-grams). We give the dose for these medicines so that you will know whether you are taking an amount that is common.

### 5. Common Interactions

“Interaction” means that when you take a medicine or food with another medicine or food, some action of that medicine becomes bigger or smaller. It is important to know about any interactions for the medicines you are taking. This way you can know if the effects of the medicine are bigger or smaller than usual.
6. How Long Will I Take This?

Some problems take longer to treat than others. Sometimes it may not matter how long treatment is given. In this section, we try to tell you how long each type of medicine is usually used.

We will be talking about these medicines: (a) beta blockers (like Inderal), (b) Catapres and Tenex, (c) naltrexone, (d) St. John's Wort, (e) melatonin, and (f) megavitamins (MEG'-uh-VYE'-the-minz) or big amounts of vitamins (VYE'-the-minz). You only need to read the parts about your medicine, but you can read the other parts of this booklet if you want to.

### Beta (BAY'-tu) Blockers

#### 1. Name(s)

There are about 12 different medicines in this group. The most common one is called propranolol (pro-PRAN'-oh-lol). Its brand name is Inderal (INN'-der-all).

<table>
<thead>
<tr>
<th>Generic Name</th>
<th>Brand Name(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>propranolol</td>
<td>Inderal</td>
</tr>
<tr>
<td>nadolol</td>
<td>Corgrad</td>
</tr>
</tbody>
</table>
2a. Used for What?

Many people with heart problems take these medicines. In particular, these may help to lower the blood pressure. Sometimes these medicines also help people with migraine (MY'-grain) headaches.

2b. Other Uses

These medicines are sometimes used to help people with other kinds of problems. These include (a) too much anger, (b) stress, anxiety, worry, and (c) some movement problems.

a) Anger. Some people get mad too easily. They may strike out at other people before stopping to think. They may “blow up” and lose control. Some people even harm themselves. This is called self injury (IN’-jerr-ee). Sometimes the
beta blockers can help to make these kinds of anger less.

**b) Stress, anxiety and worry.** Some people are too worried or too tense. They may get so nervous (NUR’-vus) that they cannot go to school or work, or their work day may become more difficult. Things that should be easy seem hard to do. Sometimes it may feel like your heart is going too fast and that you are sweating too much. If you have these problems, one of the beta blockers may help.

c) **Movement Problems.** Some other medicines can cause movement problems. Medicines called antipsychotics (an-ti-sy-KOT′-iks) can do this in some people (see #3 on back cover). Examples: if you have movement problems, you may have restless legs. You may feel like you have to walk back and forth. You may feel jittery. The beta blockers can help get rid of this feeling.
3. Main Side Effects

If you are taking a beta blocker you may have a side effect from it. Here are some possible side effects:

- slower heart beat
- lower blood pressure (you may feel dizzy or light headed)
- cold hands or feet
- feeling tired or drowsy
- breathing problems, especially if you have asthma (AZZ'-muh)
- not common: feeling sad, “blue,” or depressed.

If you have any of these side effects be sure to tell your doctor.

4. Doses

The amount of beta blocker can be very different for different people. Here are some common dose levels (amounts for one day):
### Medicine

<table>
<thead>
<tr>
<th>Medicine</th>
<th>Dose (mg per day)</th>
</tr>
</thead>
<tbody>
<tr>
<td>propranolol (Inderal)</td>
<td>20 – 500 mg</td>
</tr>
<tr>
<td>nadolol (Corgard, Corzide)</td>
<td>40 – 240 mg</td>
</tr>
<tr>
<td>atenolol (Tenormin)</td>
<td>50 – 100 mg</td>
</tr>
<tr>
<td>metoprolol (Lopressor, Toprol)</td>
<td>100 – 450 mg</td>
</tr>
</tbody>
</table>

### 5. Common Interactions

Beta blockers can interact with lots of other medicines. They can make the effects of some medicines bigger. These are medicines like:

- antipsychotics
- other heart medicines, like Cardizem, Covera, Isoptin, Norvasc, Procardia, Verelan
- catapres (clonidine) and Tenex (guanfacine)
- Dilantin (phenytoin)
- MAOIs (like Marplan, Nardil, Deprenyl, and Parnate)
- thyroid (THY’-roid) medicine (pills, like synthroid, Eltroxin).

Beta blockers can change the effects of some diabetes (dye-eh-BEET’-iss) medicines. They may affect insulin and some pills for diabetes. If you have diabetes, be sure to tell your doctor before starting this medicine.

Moban (molindone) and Tagamet (cimetidine) may make the effects of beta blockers bigger.
Finally, some things can make the effects of beta blocker smaller. They are:

- Smoking tobacco
- Tegretol (carbamazepine)
- Pain medicines for swelling (like Advil, Aleve, Anaprox, Cataflam, Midol, Motrin, Naprosyn, and Nuprin).

Other heart medicines may make the effects of beta blockers bigger. Example: Cardizem, Covera, Isoptin, Norvasc, Procardia, and Verelan. *If you are taking beta blockers and any other medicines, talk you’re your doctor. You may want to ask if they can interact.*
6. How Long Will I Take This?

If you are taking this medicine for anger or for anxiety and worry, you may need to use it as long as the anger or anxiety is a problem. If you are taking it for a movement problem that is caused by antipsychotic medicine, you may need to take it as long as the antipsychotic medicine is at full dose. *If you have questions about how long you need to take this medicine, ask your doctor.*

**Clonidine (Catapres) and Guanfacine (Tenex)**

1. Name(s)

There are only two medicines in this group. One is clonidine (KLON'-ih-deen); its brand name is Catapres (CAT'-uh-press). The other is guanfacine (GWAN'-fuh-seen); its brand name is Tenex (TEN'-ex).

2a. Used for What?

Proven: People with heart problems may take one of these medicines. Both can make blood pressure go down. These medicines may also help people who get migraine (MY'-grain) headaches.
2b. Other Uses

These medicines may help manage some other problems. Here are some:

a) **Tics.** People with tics sometimes make odd sounds *that they don’t want to make*. These might be “barks,” “grunts,” or other noises. Sometimes these people make sudden jerks or movements. These jerks may happen in the hands, the arms, or around the face. Catapres and Tenex may help to make these noises and jerks smaller. They may happen less.

b) **ADHD or hyperactivity (HI ‘per-ak-TIV ‘i-tee).** People with ADHD or hyperactivity often have trouble sitting still. They may move around too much at school or on the job. They may have trouble paying attention (uh-TEN’-shun) for a long time. Their minds may jump from one thing to another too much. Sometimes, Catapres and Tenex may help these people.

*People who have ADHD or hyperactivity may have trouble sitting still and paying attention.*
c) Sleep Problems. Some doctors give Catapres (clonidine) to people who have trouble falling asleep. Sometimes other medicines can make it harder to fall asleep. Example: Some medicines for ADHD can make it hard to fall asleep if you take them late in the day. These medicines are called stimulants (STIM'-yoo-lentz) (see booklet #7, on the back cover). Some doctors give Catapres for this problem.

d) Behavior Problems. These medicines may help people with behavior problems. Sometimes, Clonidine or Tenex are given to people who show inappropriate (in-uh-PRO'-pree-it) (or too much) anger, like getting mad and hitting someone.

3. Main Side Effects

These medicines can make you feel tired and sleepy. Some people can get sad, “blue,” or depressed with the medicine. You might get dizzy or light-headed. Or your hands and feet may get cold too easily. Some people get dry mouth with these medicines. A few people taking Catapres or Tenex may find it hard to have sex. If you are having any of these side effects, be sure to tell your doctor. Never stop these medicines all of a sudden. If you stop too fast, your blood pressure could go up. This could be dangerous (DAIN’-jer-us).
4. Doses

clonidine (Catapres) is often taken three or four times a day. Common doses are:

<table>
<thead>
<tr>
<th>low (small)</th>
<th>Half a 0.1 mg pill</th>
</tr>
</thead>
<tbody>
<tr>
<td>high (big)</td>
<td>0.3 mg</td>
</tr>
</tbody>
</table>

This may be taken between 1 and 4 times a day.

A small dose of guanfacine (Tenex) is 0.5 mg and a big dose is 3 mg. This may be taken once or twice a day.

5. Common Interactions

The effects of Catapres and Tenex can be made bigger or smaller by some other medicines. Here are some of them:

- other sleep medicines
- some medicines for depression [like amitriptyline (Elavil)]
- some medicines for psychosis [like chlorpromazine (Thorazine)]

If you have a sleep problem, exercising in the morning can help.
• beta blockers (see the *Beta Blockers* part of this booklet)
• stimulant medicines (like Ritalin)
• medicines used to make swelling go away (like Aleve and naproxen)

6. How Long Will I Take This?

Tics, ADHD, sleep problems, and behavior problems: if you are taking Catapres (clonidine) or Tenex (guanfacine) for these, you may want to continue the medicine as long as these are problems for you.

If you have had a sleep problem for a long time, it may be best to get help to treat it without medicine. Not taking caffeine (like in coffee, tea, and cola drinks) can help. Exercise (especially early in the day) can help, too. If you have had a sleep problem for a long time, tell your doctor. Or, ask your doctor about going to a sleep clinic.

*Never stop this kind of medication by yourself; always work with a doctor.* If you stop this medicine all of a sudden it could be dangerous; your blood pressure could get too high.
1. Name(s)

St. John’s Wort is an herb taken from a special kind of flower. _Wort_ means “plant” or “herb.” Sometimes this “medicine” is called “hypericin” (hi-pair’-uh-sin), named after the flower that St. John’s Wort comes from. Often, St. John’s Wort is bought from health stores or the herbal sections of drug stores.

2. Used for What?

Some people use St. John’s Wort for depression (dee-PRESH’-en). If you are depressed you might:

- feel very sad or act grouchy
- lack interest in things that used to be fun
- have a big change in your appetite (eat a lot more or less than you used to)
• sleep too much or have trouble sleeping
• feel jittery or nervous
• feel very tired during the day
• feel worthless (like you are not important)
• feel guilty when there is no reason to
• have trouble thinking clearly
• think about hurting yourself.

Some people do not have severe depression (all of the problems listed here), but they may feel bad for a long time. People who have only some of the problems listed above may use St. John’s Wort, too. St. John’s Wort is also used for too much worry, stress, and problems sleeping. Some people feel calmer when they take it. St. John’s Wort is quite a new treatment. Because it is new, it has not been tested much in the U.S.A. or Canada. Doctors and scientists do not really know how well it works for problems like depression. It may work well for mild (small) depression but not for severe (big) depression.

3. Main Side Effects
This treatment may make your heart beat faster. You may get stomach (STUM’-ik) aches. Some people may get sunburn easier with St. John’s Wort. Talk with your doctor if you are having side effects.
4. Doses

The dose used depends on how you take St. John’s Wort. If you take pills by mouth, a common dose for adults is 300 mg, three times a day. If you take it as a liquid (LIK’-wid) or solution (suh-LOO’-shun), common doses are 2 – 4 ml, 3 times a day. Two ml is less than half a teaspoon; 4 ml is most of a teaspoon.

5. Common Interactions

Here are some medicines that St. John’s Wort may interact with:

- stimulant medicines like Ritalin and Adderall
- MAOI medicines like Marplan, Nardil, Deprenyl, Parnate
• “SSRI medicines” like Prozac (fluoxetine), Zoloft (sertraline), Paxil (paroxetine), Luvox (fluvoxamine), Celexa (citalopram)
• other antidepressants, like Elavil (amitriptyline) and Tofranil (imipramine)
• levodopa (Atamet, Larodopa, Sinemet, Dopar)

If you are taking any kind of medicine and St. John’s Wort, be sure to tell your doctor.

6. How Long Will I Take This?

The maker of St. John’s Wort says that it should not be used longer than 8 weeks. **We do not know how safe it is for times longer than this.** If you are taking St. John’s Wort for depression, the depression will probably last longer than 8 weeks. You should talk to your doctor. Together you can decide if it is a good idea to take St. John’s Wort for a longer time. If you are taking St. John’s Wort for too much worry and stress, the worry may go away in 8 weeks. If not, talk with your doctor. If you have severe (big) depression, talk with your doctor.

**Naltrexone (NAL’-trek-sone)**

1. Name(s)

Naltrexone is sold under the brand name ReVia (reh-VEE’-uh).
2a. Used for What?

Sometimes this medicine is used to treat people who have taken opiate (OH’-pee-it) drugs. These are drugs like morphine (MORE’-feen), heroin (HARI’-oh-in), and codeine (KOH’-deen). (Some street names for heroin are “horse” and “smack.”) ReVia can be used to treat overdose [poisoning (POY’-son-ing)] with these drugs. It can also be used to help people who are addicted (uh-DIK’-ted) or hooked on these drugs. They may find it easier to stop and stay off the drugs.

2b. Other Uses

ReVia can also be used to treat heavy drinking. People who drink too much alcohol (like beer, wine, gin) may find it easier to stop if they take this medicine.

Some people harm themselves; this is called self injury. Self injury can take many forms. You might hit yourself with your hand. You might bang your head. You might bite yourself or pick your skin. These are just some kinds of self injury. ReVia (naltrexone) seems to help some people with self injury to stop doing these things.
3. Main Side Effects

Some people get stomach aches with ReVia. Some get a sick feeling in their stomachs. You may feel nervous or have trouble sleeping. ReVia may make you feel tired or like you have no energy. Other possible side effects are headaches, dizziness (you might feel light headed), and joint pain.

4. Doses

Common doses for adults are between 50 mg and 100 mg per day. Young people may need less.

5. Common Interactions

Naltrexone (ReVia) will reduce (make smaller) the effects of certain pain killers. These include: (a) codine (Codiclear, Codimal); (b) propoxyphene (Darvon, Darvocet, Propacet); (c) morphine; and (d) meperdine (Demerol, Mepergan). But other kinds of pain killers will still work. Examples: ibuproprofen (Motrin); ketorolac (Toradol); and naproxen (Aflaxen, Aleve, Anaprox, Naprelan, Naprosyn).

6. How Long Will I Take This?

If you are taking naltrexone (ReVia) because you have a drug or alcohol problem, you may need to take it as long as you have this
problem. If you have a kind of self injury, you may have to take ReVia as long as you hurt yourself.

Melatonin (mel-uh-TOH'-nin)

1. Name(s)

We have melatonin in our bodies. It is a hormone [a natural chemical (KE'-mi-kul) that acts like a messenger in the body] that is made in the brain. When melatonin moves into the blood, it tells the body that it is time to sleep.

Melatonin is also sold by health stores and in the health sections of drug stores. This is man-made melatonin; it does not come from our bodies. Store-bought melatonin is made by many different companies, but it does not have different brand names like most other drugs.

2. Used for What?

Melatonin may make it easier to sleep in people with sleep problems. People who are blind and cannot see light may also sleep better with melatonin. Many people have trouble falling asleep when they fly a long way in an airplane (jet lag). Some people get depressed, “blue,” or sad at times of the year when there is less sun light. It is possible that melatonin may help some of these people, too.
Doctors do not know for a fact that store-bought melatonin helps get rid of sleeping problems or feeling depressed. Scientists have not tested it enough (ee-NUF’) to say that it is safe, or that it is proven to work. It may help some people and not others; or it may not help people at all.

3. Main Side Effects

Some people may feel sleepy during the day with melatonin. Some people who have depression may feel nervous or unhappy. Other side effects: some people may feel silly with melatonin and some may have headaches, a skin rash, or a sick feeling in the stomach.
4. Doses

These seem to depend on why melatonin is being used: (a) for jet lag – 5mg at night for 3 days before flying and 4 days after landing; (b) for a sleep problem – 3 to 5mg, taken before bed time. Children may need less.

5. Common Interactions

We do not know of any interactions with melatonin. But, if you have trouble falling asleep, it would be wise not to take food or drinks with caffeine at night. These include chocolate, coffee, tea, cola drinks, and some other drinks. If you are taking other medicines and melatonin, be sure to tell your doctor that you are also taking melatonin.

6. How Long Will I Take This?

If you use melatonin for jet lag, you only need to take it when flying. If you are taking it for sleep problems, you may want to take it as long as the problem lasts. If you have a sleep problem for a long time, it may be best to get help to treat it without melatonin. Exercise (especially early in the day) may help. Not taking caffeine, like coffee or cola drinks, can help. Controlling your stress can help. If you have a sleep problem for a long time, tell your doctor. Or, ask your doctor about going to a sleep clinic.
This is a place that deals with many kinds of sleep problems.

If you are taking melatonin because you are sad or “blue” in the winter, you can probably stop when the days get longer. But if your sadness does not go away when the days are long, you should talk to your doctor.

**Vitamin B₆**  
**(Sometimes with Magnesium)**

1. **Name(s)**

Vitamin (VYE’-the-min) B₆ is sometimes called pyridoxine (peer-ih-DOX’-een). Our bodies need B₆ in small amounts. Magnesium (mag-NEE’-zee-emm) is a material that can be mined from the earth. Sometimes B₆ is taken alone. Sometimes B₆ is taken with magnesium. B₆ and magnesium are sometimes sold with the brand name Nuthera. But many, many other brands of B₆ are also in stores. Some of these are Beesix, Doxine, Nestrex, Pyri, Rodex, and Vitabee6.
2a. Used for What?

B₆ can be taken as a nutritional (new-TRISH’-en-ul) addition for people who do not get enough B₆ in their diets. B₆ is important for helping to make and break down building blocks in our bodies called proteins (PRO’-teens). It is also needed to make some of the messengers (MESS’-in-jerz) in our brains.

2b. Other Uses

Some doctors think that B₆ (sometimes with magnesium) may help people with autism (AWE’-tiz-im). The doctors think that big amounts of B₆ may help to make some problem behaviors get smaller. Doctors do not know for a fact that B₆ helps people with autism. Some doctors do not think that it helps at all. Some people take B₆ for other problems. These include:

- drinking too much alcohol (like beer, wine, gin)
- some stomach and intestine (in-TEST’-inn) problems
- stress (strain or too much worry)
- problems just before the period in women
- depression. People with depression may

  - feel “blue”
  - have trouble sleeping or sleep too much
  - have thoughts of hurting themselves
  - eat too much or too little.
Doctors do not know for a fact that B<sub>6</sub> works for these problems.

3. Main Side Effects

If you are taking the amount of B<sub>6</sub> that is needed for good health [this is called the “recommended (rek-uh-MEND’-ed) daily allowance” (all-OW’-ens)], there are no side effects with B<sub>6</sub>. If you take a lot more than is needed for good health, then side effects might occur. With very big doses of B<sub>6</sub>, there can be side effects. Big doses may cause stomach ulcers (ULL’-serz) and Seizures. Big doses taken for a long time can cause other problems. Some people may become clumsy (KLUM’-zee). Their hands or feet may get numb (NUMM’) or lose feeling. If you are taking B<sub>6</sub> and this happens, talk with your doctor right away! These last side effects may not go away for a long time.
4. Doses

The normal amount of B₆ that is needed for good health is 1 mg for most children and 2 mg for most adults. Most people get enough B₆ from their regular foods. Bigger doses may be needed for the problems that we talked about before. Experts (EX’-pertz) say we should not take too much B₆ or magnesium. They have learned how much can be too much for most people. These doses are called “upper limits.” Do not take more than the upper limit, unless your doctor says it is OK. The upper limit depends on your age.

<table>
<thead>
<tr>
<th>Vitamin B₆</th>
<th>Age</th>
<th>Upper Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 – 3 years</td>
<td>30 mg</td>
</tr>
<tr>
<td></td>
<td>4 – 8 years</td>
<td>40 mg</td>
</tr>
<tr>
<td></td>
<td>9 – 13 years</td>
<td>60 mg</td>
</tr>
<tr>
<td></td>
<td>14 – 18 years</td>
<td>80 mg</td>
</tr>
<tr>
<td></td>
<td>19 and older</td>
<td>100 mg</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Magnesium</th>
<th>Age</th>
<th>Upper Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 – 3 years</td>
<td>65 mg</td>
</tr>
<tr>
<td></td>
<td>4 – 8 years</td>
<td>110 mg</td>
</tr>
<tr>
<td></td>
<td>9 – 50 years</td>
<td>360 mg</td>
</tr>
</tbody>
</table>
5. Common Interactions

Taking B₆ may stop the medicine levodopa (e.g., brand Larodopa) from working as well as usual.

6. How Long Will I Take This?

If you are taking B₆ because you do not get enough in your diet, you should keep taking it until a better diet gives you enough B₆. If you are taking B₆ for other problems (autism, drinking, too much alcohol, stomach problems, stress, problems before your periods), you may have to keep taking it until these get better. Talk with your doctor about this.
Much of the information in this booklet was taken from the following book:


Information on upper limits for vitamin B6:

Information on upper limits for magnesium:
You can write important facts about your medicine here.
“Project MED” (Medication EDucation for Consumers) was created with funding from the U.S. Administration on Developmental Disabilities. The goal of Project MED is to provide patients with information, in a manner that they can understand, about the medications that they are taking. The booklets are designed for a broad group of people taking medications: people with mental retardation, autism, reading difficulties, severe mental illness, child and adolescent patients, and people whose first language is not English. By providing this information, we hope to increase each patient’s participation in his or her own health care.

The series consists of eight booklets. The booklets were written to provide basic information about patients’ rights and about medications in easily understood words. There are few medical or legal words, and difficult words are defined.

**The eight booklets are:**

1. Patients’ Rights and Responsibilities
2. Anticonvulsant Medicines (Medicines for People With Epilepsy)
3. Antipsychotic Medicines
4. Antidepressant Medicines
5. Antimanic Medicines (Medicines for People With Mood Problems)
6. Antianxiety Medicines
7. Stimulant Medicines
8. Other Medicines (Blood Pressure Medicines, Naltrexone, and Over the Counter).

**For more information, please contact us:**

**Project MED**
The Nisonger Center UCEDD
The Ohio State University
1581 Dodd Drive
Columbus, OH 43210-1296
Telephone: (614) 247-4801
E-mail Address: proj.med@osu.edu

ISBN 0-9658966-8-4