



## MAO Inhibitors

### MAO-inhibited with caution tape

Patients taking monoamine oxidase (MAO) inhibitors should not take cyclobenzaprine. Since cyclobenzaprine is pharmacologically related to tricyclic antidepressants (TCAs), one of its partial actions is to prevent reuptake of certain neurotransmitters, namely norepinephrine, serotonin, and epinephrine. Taking this in concert with a MAO inhibitor could therefore cause dangerous buildup of these amines at the synapse and even lead to serotonin syndrome.

## Serotonin Syndrome

### Silver-tonic Savage

The most dangerous potential adverse reaction to cyclobenzaprine is serotonin syndrome. This is caused by the partial TCA-like action that cyclobenzaprine has at the neuron synapse, by preventing the re-uptake of the neurotransmitters serotonin, norepinephrine, and epinephrine. Serotonin syndrome is typically seen only in the context of polypharmacy (patients taking multiple medications that affect the release and processing of serotonin and other catecholamines) or overdose.

## Drowsiness

### Sleepy-guy

Drowsiness is one of the most commonly reported side effects of cyclobenzaprine.

## Arrhythmia

### Broken Arrhythmia-drum

A potentially dangerous side effect of cyclobenzaprine is arrhythmia, specifically tachycardia and/or QT prolongation. These are again mediated by the partial TCA-like activity that cyclobenzaprine exhibits.