

**Patient
Information**

Nortriptyline for the treatment of vulvodynia

Introduction

This leaflet gives you information about the medication nortriptyline which you have been prescribed to reduce the pain of vulvodynia.

Vulvodynia is pain in the vulva (area around the outside of the vagina) that lasts at least 3 months but does not have a specific cause.

Why have I been prescribed this medication?

You have been prescribed nortriptyline as it is used to treat many types of persistent pain. It is good for burning, shooting or stabbing nerve pain, and for pain that keeps you awake at night.

How does nortriptyline work?

Nortriptyline works by altering the way the nerve fibres transmit pain sensation messages to the brain.

Nortriptyline can also be used to treat depression. However, this is not the reason why you have been prescribed this medication.

How do I take nortriptyline

Nortriptyline is started at a low dose, usually 10mg and increased gradually until your pain is controlled. This may be up to 60mg but can sometimes be more.

It can take 6 to 8 weeks before the medication is effective for some patients.

Nortriptyline is best taken 1 hour before bedtime as it can cause drowsiness. You can take this medication with or without food.

Do not stop taking nortriptyline suddenly. It should be gradually reduced over a period of weeks. Please contact your GP who can help you with this.

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Department

Pharmacy

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Possible side effects

Side effects of nortriptyline often settle within the first few weeks and are not usually worsened by increasing the dose.

Common side effects include, tiredness, constipation, dry mouth, dizziness and sweating.

Less common side effects include, fainting, trembling, irregular heartbeat, blurred vision or problems urinating. If you have any side effects that are worrying you, please contact your GP or the doctor who prescribed this medication for advice.

It is recommended that you do not drink alcohol while taking nortriptyline as it can make you drowsy.

If the medication makes you drowsy or dizzy, do not drive or operate machinery.

What if I forget to take a dose?

Take the dose as soon as you remember. However, if you are taking it only at bedtime do not take the medication in the morning. Skip the missed dose and wait until the next night.

Do not take 2 doses together.

Is nortriptyline suitable for everyone?

Nortriptyline is not suitable for everyone, please talk to your hospital doctor if you:

- have any medication allergies.
- are taking any other medicines or herbal medicines and this has not been discussed with the person who prescribed nortriptyline.
- are pregnant or breastfeeding, or plan to become pregnant.
- are using oral contraception.
- have recently had a heart attack or any other heart problems.
- have epilepsy or seizures.
- have any problems with your liver, kidneys or thyroid.
- have diabetes or glaucoma.
- have any psychiatric problems.
- are taking a medication called a monoamine oxidase inhibitor (MAOI).

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Contact information

If you have any further questions, please do not hesitate to contact a member of the dermatology team via the secretary's below:

Nichola Dobson

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85