

# Lithium

Lithobid

A mood stabilizer — the longest-standing, best-proven treatment for bipolar disorder, and the only one shown to lower suicide risk. It works well, but needs regular blood tests to stay safe.

Tablets, ER tablets &amp; liquid

Usually 1–2× daily, with food

Requires regular blood tests

Not habit-forming

Generic available

## 📌 WHAT IT'S FOR

Lithium treats bipolar disorder — calming episodes of mania and, taken long-term, preventing both the highs and the lows from coming back. It's also used to boost an antidepressant that isn't working on its own.

## 🔗 HOW IT WORKS

Lithium is a natural mineral salt. Exactly how it steadies mood isn't fully understood, but it appears to calm overactive signaling between brain cells and protect them over time. Its effect builds gradually over weeks, not hours.

## 🕒 WHAT TO EXPECT — OVER TIME

### FIRST 1–2 WEEKS

Mania starts to settle; early side effects (thirst, mild tremor) show up. Your first blood level is usually checked around now.

### WEEKS 2–6

Your prescriber fine-tunes the dose to your blood level. Mood becomes steadier.

### MONTHS ONWARD

Full benefit is prevention — fewer and milder episodes the longer you stay on it.

## 📖 HOW TO TAKE IT

- Take it with food or milk, at the same times each day.
- Swallow ER (extended-release) tablets whole — don't crush or chew.
- Keep your fluids and salt intake steady — big changes in either move your level.
- Dehydration (heat, hard exercise, vomiting, diarrhea) can raise your level — call your prescriber if you're ill.
- Keep your blood tests on schedule — they guide the dose.

## ⚠️ CALL YOUR DOCTOR OR GO TO THE ER IF...

- **Signs of lithium toxicity** — a worse or coarse tremor, vomiting, diarrhea, unsteady walking, slurred speech, confusion, or drowsiness: hold your next dose and get urgent care
- **Getting dehydrated** — vomiting, diarrhea, fever, or heavy sweating can raise your level fast: call your prescriber
- **Suicidal thoughts** or a sudden worsening of mood
- **Little or no urine**, severe swelling, or a very fast or irregular heartbeat

## ⚡ COMMON SIDE EFFECTS

### EARLY — FIRST DAYS TO WEEKS

- Fine hand tremor
- Increased thirst and urinating more often
- Nausea or loose stools — usually eases, and taking it with food helps

### LONGER-TERM

- Underactive thyroid (tiredness, cold, weight gain) — found on bloodwork, treatable
- Gradual effects on the kidneys over years — why kidney function is monitored
- Weight gain, or acne / worsening psoriasis in some people

*This is not a complete list of side effects. See the FDA-approved label or your pharmacy handout for the full list.*

## 📄 WHAT TO KEEP AN EYE ON

Lithium's helpful dose and toxic dose sit close together — routine labs keep you in the safe zone. This isn't optional.

<b>Lithium blood level</b>	5–7 days after any dose change, then every 3–6 months — drawn ~12 hours after your last dose
<b>Kidney function</b>	Before starting, then every 6–12 months
<b>Thyroid &amp; calcium</b>	Before starting, then every 6–12 months

## ⊗ MEDICINES & SUBSTANCES TO BE CAREFUL WITH

WHAT	MORE INFO	WHAT	MORE INFO
<b>NSAID pain relievers (ibuprofen, naproxen)</b>	Raise your lithium level toward the toxic range — Use <b>acetaminophen (Tylenol)</b> instead; tell your prescriber before regular use	<b>Dehydration — vomiting, diarrhea, fever, heavy sweating</b>	Raises your level, sometimes fast — Sip fluids and call your prescriber if you're ill
<b>Blood-pressure drugs ending in -pril or -sartan (lisinopril, losartan)</b>	Raise your lithium level — Safe together, but your prescriber checks your level more closely	<b>Big changes in salt (crash diets, very low-salt eating)</b>	Less salt drives your lithium level up — Keep your salt intake roughly steady day to day
<b>Water pills / diuretics (hydrochlorothiazide)</b>	Raise your lithium level — Prescriber adjusts the dose and monitors	<b>Big changes in caffeine</b>	Can shift your level up or down — Keep caffeine intake roughly consistent

*This is not every interaction. Always check with your pharmacist or prescriber before starting any new medicine, supplement, or over-the-counter product.*

## 💡 WHAT HELPS IT WORK

- Taking it consistently, every day — steady levels are what prevent episodes.
- Keeping your blood-test and appointment schedule, even when you feel well.
- Drinking water regularly and keeping salt intake steady, especially in heat or hard exercise.
- Tracking your mood and sleep — early changes are easier to catch.
- Telling every doctor, dentist, and pharmacist that you take lithium before starting anything new.

## ❓ QUICK QUESTIONS

### What happens if I miss a dose?

Take it when you remember — but if it's within about 6 hours of your next dose, skip it. Never double up; that can push your level toward toxic. If you've missed doses for more than a day or two, call your prescriber before restarting — your level may need rechecking.

### Will it change my personality?

No. Lithium steadies mood swings — it doesn't flatten who you are. If you feel dull, slowed, or foggy, that's usually a dose or thyroid issue your prescriber can address, not the "real" you.

### What about salt, sports drinks, and hot weather?

Keep your salt and fluids fairly steady. Sweating a lot, crash-dieting, or cutting salt can raise your level; loading salt can lower it. In heat or hard workouts, hydrate steadily and don't overdo salty electrolyte drinks without asking.

### Can I stop once I feel better?

Don't stop on your own — stopping lithium (especially abruptly) sharply raises the odds of another episode. If you and your prescriber decide to stop, it's done as a slow taper.

### Is it safe in pregnancy?

Tell your prescriber early. Lithium carries a small heart risk to the baby, and the decision is a careful balance — don't stop on your own. See [mothertobaby.org](https://mothertobaby.org) for evidence-based information.

**Educational use only.** This sheet is not medical advice, and reading it creates no clinician–patient relationship. Information may be incomplete, outdated, or incorrect and is provided "as is," without warranty of any kind. If you are not a licensed clinician, do not start, stop, or change any medication based on this sheet — talk to your own clinician. To the fullest extent permitted by law, Psychofarm, Prospect Park Psychiatry, PLLC, and its authors disclaim all liability for any loss, injury, or damage arising from use of this content.

© 2026 Psychofarm · Prospect Park Psychiatry, PLLC · all rights reserved

Scan to go deeper →  
[psycho.farm/guides/lithium](https://psycho.farm/guides/lithium)

