
TMS Therapy and Medication Mgmt Recommendations

- ❖ TMS Therapy is not a “magic bullet” cure for depression, but a treatment when paired with psychotherapy and medication can produce significant results.
- ❖ FDA states after 1 failed AD trial is TMS Therapy appropriate. Most medications permit after 1-4 failed AD trials and a trial of psychotherapy.
- ❖ Chances of remission are much higher when adding TMS Therapy after 1-2 drug failures, than medication alone.
- ❖ When prescribing TMS for Depression, remember these general guidelines:
 - Medications that likely lessen efficacy of TMS
 - GABAergics
 - Anticonvulsants
 - Current Stimulant Abuse
 - Prazosin
 - Benzodiazepines = Ideally Taking <2mg/Day Dose
 - Avoid Med Changes 2-4 Weeks Leading up to TMS MT (Ideally)
 - Avoid Med Changes During the TMS Treatment Course, & Up to 2-4 Weeks Post-TMS for Durability Monitoring (Ideally)
 - Consider TMS Schedule and Med ½ Life. Talk with TCM for Timing Dosages for Optimizing TMS Outcome
 - If Patient is on High Doses of Benzos, Then Increased Likelihood that Patient could have Slow Response. Prepare Expectations.