

Desipramine, Serum

Overview

Useful For

Monitoring serum concentration of desipramine during therapy

Evaluating potential desipramine toxicity

May aid in evaluating patient compliance

Method Name

Liquid Chromatography Tandem Mass Spectrometry (LC-MS/MS)

NY State Available

Yes

Specimen

Specimen Type

Serum Red

Specimen Required

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

Collection Container/Tube: Red top (Serum gel/SST are not acceptable)

Submission Container/Tube: Plastic vial

Specimen Volume: 1 mL **Collection Instructions:**

- 1. Collect specimen immediately before next scheduled dose (minimum 12 hours after last dose).
- 2. Centrifuge and aliquot serum into a plastic vial. Serum must be separated from cells within 2 hours of collection.

Forms

If not ordering electronically, complete, print, and send a <u>Therapeutics Test Request</u> (T831) with the specimen.

Specimen Minimum Volume

0.25 mL

Reject Due To

| Gross | Reject |
|---------------|--------|
| hemolysis | |
| Gross lipemia | Reject |
| Gross icterus | Reject |



Desipramine, Serum

Specimen Stability Information

| Specimen Type | Temperature | Time | Special Container |
|---------------|--------------------------|---------|-------------------|
| Serum Red | Refrigerated (preferred) | 28 days | |
| | Ambient | 7 days | |
| | Frozen | 28 days | |

Clinical & Interpretive

Clinical Information

Desipramine is a tricyclic antidepressant and a metabolite of imipramine. These drugs have also been employed in the treatment of enuresis (involuntary urination) in childhood and severe obsessive-compulsive neurosis. Desipramine is the antidepressant of choice in patients where maximal stimulation is indicated.

The therapeutic concentration of desipramine is 100 to 300 ng/mL. About 1 to 3 weeks of treatment are required before therapeutic effectiveness becomes apparent.

The most frequent side effects are those attributable to anticholinergic effects: dry mouth, constipation, dizziness, tachycardia, palpitations, blurred vision, and urinary retention. These occur at blood concentrations more than 400 ng/mL, although they may occur at therapeutic concentrations in the early stage of therapy. Cardiac toxicity (first-degree heart block) is usually associated with blood concentrations more than 400 ng/mL.

Reference Values

Therapeutic concentration: 100-300 ng/mL

Note: Therapeutic ranges are for specimens collected at trough (ie, immediately before next scheduled dose). Levels may be elevated in non-trough specimens.

Interpretation

Most individuals display optimal response to desipramine with serum levels of 100 to 300 ng/mL. Some individuals may respond well outside of this range or may display toxicity within the therapeutic range; thus, interpretation should include clinical evaluation. Risk of toxicity is increased with levels above 400 ng/mL.

Cautions

This test cannot be performed on whole blood. Serum must be separated from cells within 2 hours of collection; if serum is not removed within this time, tricyclic antidepressant levels may be falsely elevated due to drug release from red blood cells.

Specimens that are obtained from gel tubes are not acceptable, as the drug can absorb on the gel and lead to falsely decreased concentrations.

Clinical Reference

- 1. Wille SM, Cooreman SG, Neels HM, Lambert WE. Relevant issues in the monitoring and toxicology of antidepressants. Crit Rev Clin Lab Sci. 2008;45(1):25-89
- 2. Thanacoody HK, Thomas SH. Antidepressant poisoning. Clin Med. 2003;3(2):114-118



Desipramine, Serum

- 3. Hiemke C, Bergemann N, Clement HW, et al. Consensus guidelines for therapeutic drug monitoring in neuropsychopharmacology: Update 2017. Pharmacopsychiatry. 2018;51(1-02):9-62
- 4. Milone MC, Shaw LM. Therapeutic drugs and their management. In: Rifai N, Chiu RWK, Young I, Burnham CAD, Wittwer CT, eds. Tietz Textbook of Laboratory Medicine. 7th ed. Elsevier; 2023:420-453.

Performance

Method Description

The tricyclic antidepressants are extracted from serum using a solvent crash to precipitate proteins. The supernatant is remove and analysis is by liquid chromatography tandem mass spectrometry (LC-MS/MS).(Unpublished Mayo method)

PDF Report

No

Day(s) Performed

Monday, Wednesday, Friday

Report Available

3 to 5 days

Specimen Retention Time

14 days

Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Superior Drive

Fees & Codes

Fees

- Authorized users can sign in to <u>Test Prices</u> for detailed fee information.
- Clients without access to Test Prices can contact <u>Customer Service</u> 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact <u>Customer Service</u>.

Test Classification

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

CPT Code Information

80299

LOINC® Information

| Test ID Test Order Name Order LOINC® Value | Test ID | Test Order Name | Order LOINC® Value |
|--|---------|-----------------|--------------------|
|--|---------|-----------------|--------------------|



Desipramine, Serum

| DESPR | Desipramine, S | 3531-1 |
|-----------|------------------|---------------------|
| Result ID | Test Result Name | Result LOINC® Value |
| 37123 | Desipramine, S | 3531-1 |