

Dr. Georgia Ede's Guide to <sup>+</sup>

# Ketogenic Diets & Psychiatric Medications



# Before You Dive in:

## Why Medical Supervision Is Essential

If you currently take psychiatric medications (or prescription medications of any kind) and you're thinking about starting a ketogenic diet, or if you currently follow a ketogenic diet and hope to reduce the amount of medication you are taking, **please review the information** in this ebook and consult with your prescribing health care provider(s) before changing your diet or medications.

**A ketogenic diet (KD)** is a powerful intervention that causes profound shifts in metabolism throughout the brain and the rest of the body. These metabolic shifts are healthy, but they can change how medications behave in your system, which could lead to uncomfortable or even dangerous side effects unless you have good medical supervision.

Depending on the medications involved, you may need to obtain baseline testing such as blood chemistry panels, drug levels, glucose monitoring, and blood pressure measurements **before you start** a ketogenic diet. Keep in mind that some medication dosages may need to be lowered **as you transition** onto a ketogenic diet—sometimes even as early as the very first day. This is why it is so important to work with your prescriber to design a medication management plan personalized to your unique situation. Good medical supervision minimizes the risk of side effects and greatly improves your chances of successfully, safely, and comfortably achieving your health goals.

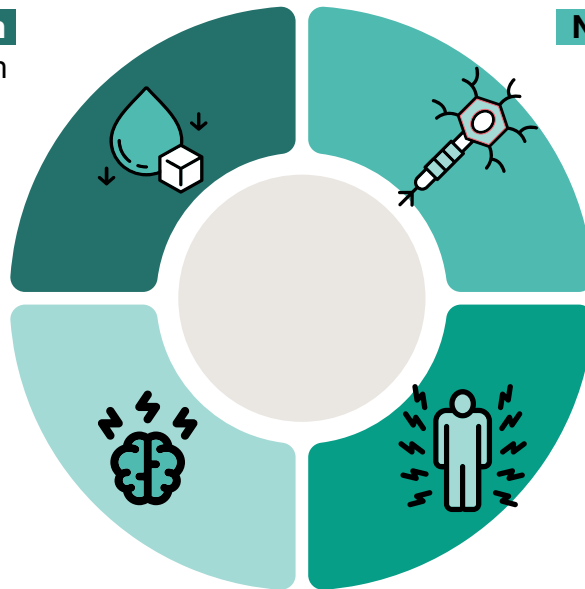
⚠️ *This guide is intended to provide basic information about how ketogenic diets interact with medications to support you in discussions with your health care providers. This is not meant to be (and cannot be) a complete guide, so please do not use this as a standalone resource for medication management decisions.*

# Why Consider A Ketogenic Diet for Mental Health?

Research suggests that many serious mental health disorders, including bipolar disorder, depression, and schizophrenia, share common biological features such as:

## Glucose hypometabolism

impaired ability of the brain to use glucose efficiently



## Neurotransmitter imbalances

problems regulating chemical messengers like GABA and glutamate

## Oxidative stress

increased production of damaging free radicals that harm brain cells

## Chronic inflammation

overactivation of the immune system linked to mood and cognition changes

A ketogenic diet may help address these fundamental challenges by providing the brain with ketones—a supplemental fuel source which burns more cleanly and efficiently than glucose, resulting in less oxidative stress. Ketogenic diets also help reduce inflammation, rebalance neurotransmitter systems, and support mitochondrial function. Many individuals report improved mood and cognition when in ketosis.

🔍 To learn more about the science behind ketogenic therapy for mental health, **explore the following trusted resources:**

- + [Brain Energy](#) by Dr. Chris Palmer
- + [Change Your Diet, Change Your Mind](#) by Dr. Georgia Ede
- + [The Metabolic Mind YouTube Channel](#)
- + [Research Summaries on the Metabolic Mind Website](#)
- + [CME-Accredited Ketogenic Diets for Mental Health Training](#) by Dr. Georgia Ede
- + [The Scientific and Clinical Rationale for the Use of Ketogenic Diets in Psychiatric Disorders](#)

If your health care providers need more information about how to safely incorporate ketogenic diets into mental health care, please refer them to this **2026 expert consensus paper:** [Awareness and Best Practices in Using Ketogenic Therapy to Treat Serious Mental Illness](#)



# Combining a Ketogenic Diet with Psychiatric (and Other) Medications

Most people who start a ketogenic diet hoping to improve their mental health are already taking psychiatric (and other) medications. In fact, most of the clinical research on ketogenic diets published so far has focused on people who add a ketogenic diet to their medication regimen.

These experiences have taught us that combining a ketogenic diet with medications can be safe and lead to many mental and physical benefits, so long as proper medical supervision is provided. There are **two primary potential benefits** of combining a ketogenic diet with psychiatric medications:

## 01

### To reduce the metabolic side effects of certain medications

Some people start a ketogenic diet because they want to feel better and be healthier while still continuing to take psychiatric medication. A ketogenic diet can counteract the metabolic side effects of antipsychotics and certain other psychiatric medications such as weight gain, high blood glucose levels, high insulin levels (and insulin resistance), low energy levels, high appetite, and high triglycerides (levels of fat in the blood).

These metabolic side effects are very common, can occur very quickly, and can lead to very serious health consequences including obesity, type 2 diabetes, and cardiovascular disease. A ketogenic diet has been repeatedly shown to improve multiple markers of poor metabolic health, even in people taking one or more psychiatric medications that come with a high risk of metabolic problems. For example, people who have gained a great deal of weight on antipsychotic medications such as olanzapine (Zyprexa), quetiapine (Seroquel), or risperidone (Risperdal) often lose weight after switching to a ketogenic diet even if they continue to take the same dosage of antipsychotic medication. Many people use a combination of medication and a ketogenic diet to manage mental health symptoms.

## 02

### To reduce the use of psychiatric medications

Some people start a ketogenic diet hoping it will improve their mental health symptoms enough to reduce or eliminate the need for psychiatric medication. Even when psychiatric medications are helpful with problems related to mood, concentration, and productivity, they often have

side effects that can interfere with other aspects of health and happiness such as weight gain, sexual dysfunction, drowsiness, fatigue, brain fog, tremors, and dulled emotions.

Just as with any treatment approach, results vary from person to person, but some people do find that living a ketogenic lifestyle allows them to **reduce the amount of medication** they take or even **successfully taper off all psychiatric medications** without having their mental health symptoms return. It is important to consider, however, that most people do have to continue following a ketogenic diet long-term to remain well and keep symptoms at bay. Since it can be challenging to consistently adhere to the diet over long periods of time, some people may find low doses of certain medications to be helpful on an as-needed basis to manage serious symptoms that may arise when ketosis is interrupted.

A ketogenic diet and medications do not need to be thought of as mutually exclusive tools—they can be used either on their own or together, depending on your personal circumstances, goals, and responses to these strategies. While a ketogenic diet helps many people feel significantly better and often helps people reduce the amount of medication they take, a ketogenic diet alone doesn't always lead to complete recovery from mental health symptoms or the ability to eliminate all psychiatric medications. In some cases, it may not improve mental health symptoms at all. However, even in cases where a ketogenic diet brings little to no relief of mental health symptoms, it is often worth continuing together with other strategies (such as medications, psychotherapy, exercise, etc.) for its many other well-established physical health benefits.



# Special Considerations when Combining the Ketogenic Diet with Psychiatric (and Other) Medications

Starting a ketogenic diet on your own without professional guidance could be uncomfortable or even dangerous, especially if you take certain medications, have certain medical conditions, or have a history of serious mental health symptoms. This is because a ketogenic diet has strong effects on brain and body chemistry that may require careful planning, special laboratory tests, monitoring of physical and mental health symptoms, and personalized medication adjustments to be safe and comfortable.

During the first few weeks of keto-adaptation, some people's mental health symptoms worsen before they get better. Irritability, brain fog, fatigue, depression, mood swings, insomnia, and even excessive energy or manic symptoms may temporarily occur as the brain adjusts to a ketogenic diet. These usually improve within a few weeks, but working closely with a mental health practitioner who is knowledgeable about and experienced with the use of ketogenic diets in the management of mental health conditions will help you safely and more comfortably navigate this transition period.

**Need support with keto adaptation but don't have access to a mental health provider?**

**Read:** [Can patients do ketogenic therapy for a psychiatric condition without the help of a metabolic psychiatrist?](#)

## Examples of high-risk keto-adaptation medication situations



### **Low blood sugar (hypoglycemia):**

A ketogenic diet effectively lowers blood glucose levels. Medications that also lower blood glucose (which many diabetes medications do) can therefore be dangerous in combination with a ketogenic diet if their dosages are not carefully reduced along the way, often beginning the very first day on the diet.

For more information, see C. Murdoch et al's clinical guide: [Adapting Diabetes Medication for Low Carbohydrate Management of Type 2 Diabetes](#)



### **Low blood pressure:**

High-insulin diets cause the body to retain fluid, so as insulin levels fall during the early days of a ketogenic diet, the kidneys release this excess water and salt, which may lower blood pressure. If you take medication to lower your blood pressure, it could be dangerous in combination with a ketogenic diet, so frequent blood pressure monitoring is required, and dosage reductions may be needed along the way.

For more information, see: Dr. Andreas Eenfeldt's article [Adjusting Medications on a Low-Carb Diet](#).




### Change in medication blood levels:

A ketogenic diet changes the balance of fluid and electrolytes in your bloodstream and may improve liver and kidney function, so the blood levels of certain medications may be affected. The amount of protein and fat in your diet can also influence how certain medications are absorbed into circulation and/or cleared from the body. It is therefore very important that you and your prescriber are aware of these possibilities, because the dosage of certain medications may need to be adjusted either upward (to maintain effectiveness and/or prevent acute withdrawal symptoms) or downward (to reduce toxicity).



### Increased medication side effects:




A ketogenic diet duplicates the effects of some medications and changes the way medications are processed by the body, so in some cases, medications may start to feel too strong and side effects may appear or worsen even if their blood level or dosage hasn't gone up. Depending on the medication, emerging side effects could range from minor issues such as trouble falling asleep, nausea, or loss of appetite to potentially dangerous issues such as daytime drowsiness, severe agitation, or seizures.

 To learn more about ketogenic therapy contraindications, check out this [published paper](#). To understand the difference between absolute and relative contraindications, [watch this video](#) from Medical Director Dr. Bret Scher.

## Psychiatric Medication Management During Keto-Adaptation and Beyond

After starting a ketogenic diet, psychiatric medication dosages may need to be carefully adjusted at various points along the way. The timing and nature of these adjustments depends on your unique circumstances, so please consult with your prescriber to create a plan tailored to your situation.

The most common reasons for medication adjustments on a ketogenic diet are:

- 1 Your medication starts to feel **too strong** in combination with a ketogenic diet, so the dosage may need to be reduced. 
- 2 The blood level of your medication has **changed** on a ketogenic diet, so the dosage may need to be adjusted, although symptoms, not blood level, should dictate any adjustments. 
- 3 Your mental health symptoms have **improved** on a ketogenic diet and you would like to explore whether you can reduce the dosage of your medication(s). 

During a keto-adaption period, special adjustments to certain medications may be necessary that are unique to ketogenic therapy, so these adjustments are best managed by prescribers who have been educated about interactions between a ketogenic diet and prescription medications. In some cases, the temporary addition of a medication (such as a medicine to help with insomnia or anxiety) may be considered to support you through a keto-adaptation phase.

Once you're fully fat-adapted and have stabilized on a ketogenic diet (which can take 3 to 6 months), the process of tapering psychiatric medications is the same as it would be for people who are eating a regular diet. That doesn't mean it's easy—it just means that your prescriber doesn't have to have any special knowledge or experience working with people in ketosis to be able to guide you through the tapering process. However, they will need to be well-informed about how to properly taper psychiatric medications, because reducing dosages too quickly can cause uncomfortable, serious, dangerous, or prolonged withdrawal symptoms. Since this principle applies to the vast majority of psychiatric medications, please **never stop any psychiatric medication abruptly**.

## Deciding if Tapering Is Right for You

Just as there can be good reasons to taper off of a medication, there are also times when continuing a medication will be the **best way to support your goals**. If you have experienced clear benefits from a psychiatric medication that make a real difference in your life such as improved sense of well-being, ability to function, or quality of life, then those benefits may well outweigh any risks associated with that medication. Having conversations about the pros and cons with your prescriber and people you trust who know you well can help in the decision-making process.

Good psychotherapy, lifestyle changes, and a thorough medical evaluation to search for potentially reversible root causes of mental health symptoms such as B12 deficiency, iron deficiency, insulin resistance, or hypothyroidism can all go a long way toward improving mental health symptoms and reducing the need for medication. However, mental health symptoms don't always fully respond to these strategies, even in the most disciplined individuals with access to high-quality psychological and medical care.

Serious mental health symptoms such as auditory hallucinations, intense mood swings, severe insomnia, paralyzing fear, extreme lethargy, and suicidal thinking are usually signs of biologically based brain malfunction. We still do not fully

understand all of the root causes of mental illness and therefore we still do not fully understand how to alleviate all symptoms in all individuals. Serious symptoms can significantly interfere with your ability to work, study, care for your family, maintain relationships, and keep yourself safe. It is very important to have **compassion for yourself**. If counseling, lifestyle changes, and medical care don't help enough, you don't have access to all of these options, or you choose not to explore all of these options, there is no shame in using medication support as part of your self-care plan.








**Remember, success is feeling well and functioning well** —and for some people that may mean continuing to use a certain amount of medication either daily or periodically. The keys to success are working with your prescriber to find medications you can tolerate that bring you clear benefits, and using the least amount of that medication possible to minimize side effects.



## Who Should **Not** Attempt a Ketogenic Diet or a Medication Taper Right Now

While ketogenic therapy and/or deprescribing can be powerful tools, they are not appropriate for everyone at every stage. In some situations, it may be safer and more effective to pause, stabilize, and build support before making any major changes.

You may want to delay starting a ketogenic diet if any of the following apply to you:

-  You are currently in crisis or experiencing severe psychiatric symptoms, such as suicidal thoughts, psychosis, or mania
-  You are currently pregnant or planning pregnancy in the next 3-6 months
-  You are currently breastfeeding
-  You are going through a major life stressor, such as a recent loss, relationship breakdown, job transition, or housing insecurity
-  You are currently underweight or malnourished
-  You are taking prescription medication of any kind and lack access to a prescribing clinician willing to monitor and help manage your medication as you transition onto a ketogenic diet
-  You have bulimia or anorexia nervosa

To learn more about ketogenic therapy contraindications, check out this [published paper](#). To understand the difference between absolute and relative contraindications, [watch this video](#) from Medical Director Dr. Bret Scher.

There are some circumstances that make starting a ketogenic diet more complicated and therefore require especially careful medical supervision, usually by a medical specialist or a very experienced general clinician. If any of the following apply to you, please do not attempt a ketogenic diet until you have consulted with a knowledgeable professional.

- Pancreatic disease
- Kidney disease
- Very high LDL cholesterol (>190 mg/dL or >4.9 mmol/L)
- Very high triglycerides (>500 mg/dL or >5.6 mmol/L)
- Children & teens
- Diabetes: type 1 and type 2
- Cancer
- Bariatric surgery (weight loss surgery such as gastric bypass surgery)
- Gallbladder disease / no gallbladder
- Kidney stones
- Heart disease
- Stroke/Traumatic Brain Injury
- Gout / high uric acid level
- Elite athletes

And there are some special medical circumstances that make a ketogenic diet potentially dangerous. In cases such as those listed below, a ketogenic diet is usually not recommended. If any of these apply to you, **please do not attempt a ketogenic diet without first consulting with a specialist** for personalized advice about your particular situation.

- + Certain rare genetic conditions that interfere with the body's ability to burn fat for energy or maintain adequate blood glucose levels (these are usually diagnosed in infancy).
- + Porphyria
- + You are taking an SGLT-2 inhibitor medication. The generic names for all medicines in this family end in “-gliflozin.” These medicines lower blood glucose and are often prescribed for people with type 2 diabetes.

For more detailed information about medical circumstances that can make starting a ketogenic diet more complicated or potentially dangerous, including a helpful list of genetic metabolic disorders, [please see this open access article](#).

### You may want to delay tapering medications if any of the following apply to you:



You lack access to a prescribing clinician willing to supervise a medication taper



You are going through a major life stressor, such as a recent loss, relationship breakdown, job transition, or housing insecurity



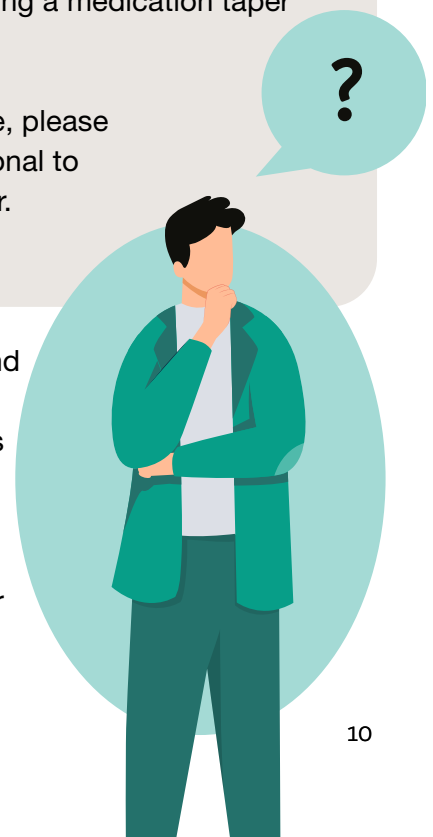
If you are currently in crisis or experiencing severe psychiatric symptoms, such as suicidal thoughts, psychosis, or mania, please consult with a trusted mental health professional who can work with you to weigh the potential risks and benefits of attempting a medication taper under these circumstances.



If you are currently pregnant or planning a pregnancy in the near future, please consult with both a mental health professional and a medical professional to weigh the potential risks and benefits of attempting a medication taper.

Taking time to stabilize and prepare can make a big difference in your success and safety. This is not a race, it's a journey. Prioritizing the right timing, support, and medical oversight increases the likelihood that any dietary or medication changes will be not only effective, but sustainable.

If you're unsure whether now is the right time, or whether these approaches are right for you, talk with your prescriber or a trusted clinician who understands your full health picture. And know that delaying or deciding against a taper or dietary shift is not a failure; **it's a wise and protective choice in many cases.**





## The Art and Science of Psychiatric Medication Tapering

Unfortunately, the **vast majority** of prescribers (including most seasoned psychiatrists) receive no formal training in the fundamentals of safe medication tapering. Psychiatrist Dr. Mark Horowitz, who co-authored The Maudsley Deprescribing Guidelines, explains in [this Metabolic Mind interview with Dr. Bret Scher](#) why most prescribers do not realize how common or how serious psychiatric medication withdrawal symptoms are.

Another interview with psychiatrist and medication tapering expert [Dr. Josef Witt-Doerring](#) explores how psychiatric drug side effects can seriously impair quality of life, and how patient-led tapering protocols can be life-changing for some people. In addition, [Dr. Anders Sørensen](#), a psychologist specializing in the science of psychiatric drug withdrawal, and author of Crossing Zero, highlights how conventional tapering and withdrawal guidelines lack critically important information, often preventing people from tapering successfully.

This is why it's so important for you to learn all you can about the complexities of this topic yourself, have an informed conversation with your prescribing clinician, and refer them to educational resources as needed. This important topic is only now beginning to come to the attention of authoritative medical organizations such as The National Institute for Health and Care Excellence (NICE) in the UK, which published [new general guidelines regarding antidepressant tapering](#) in 2023.

The medication tapering information in this guide was created specifically to support people following a ketogenic diet, but the same general principles apply whether you are following a ketogenic diet or not.



### What if Your Prescriber Doesn't Support a Medication Taper?

If your prescriber doesn't support a medication taper attempt, the first step is to **understand their reasoning** so you can take their views into consideration.

Maybe they don't think this is the right time for you to attempt a taper because you're going through a particularly stressful period, your mental health symptoms have been worse lately, you are dealing with a medical issue, or your condition is affected by seasonality (for instance, spring mania or winter depression.)

Maybe they don't have the time to supervise a taper or to learn the principles of safe medication tapering.

Or maybe they are worried that serious mental health symptoms will come back and that if they do, you may be at risk for serious consequences such as loss of employment, relationship problems, hospitalization, self-injury, or suicide.

Hear them out regarding their concerns and see if you can come to a **shared understanding**. If not, you may wish to consult with a different prescriber to obtain a second opinion or you may wish to consult with a tapering expert.

In fact, much of what we know about safe tapering is sourced from a large community of people with lived experience and hard-earned wisdom who have tapered off psychiatric medications for a wide variety of reasons having nothing to do with a ketogenic diet.

**Examples of reasons for wanting or needing to taper off of psychiatric medications include:**

Medication not helping enough, not helping at all, or making symptoms worse

Medication causing intolerable side effects

Personal choice

Drug interactions with other medications

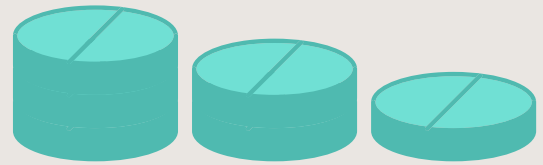
Long-term risks outweigh the benefits

Pregnancy / breastfeeding

Medication too expensive or no longer accessible

Feeling better with time or change in circumstances

Feeling better with other approaches (such as therapeutic ketosis)



## Why Psychiatric Medications Must Be Tapered Slowly

Many medications for physical health issues such as antibiotics, cholesterol-lowering medications, and antacids, can be safely and easily discontinued without tapering, **so why do you need to be so extremely careful with psychiatric medications?**

Because psychiatric medications target brain chemistry and brain chemistry, which are extremely complex, and the brain is uniquely sensitive to changes in its internal environment. All psychiatric medications are trying to change brain chemistry, but the brain doesn't simply passively accept these changes—it instinctively works to return to its previous state. This physiological reflex is called homeostasis. The brain adapts to the presence of the medication by changing its chemistry and anatomy over time.

When you take a medication that is trying to change the balance of chemicals in your brain in one particular direction, the brain tries to resist those changes by changing the balance of chemicals in the opposite direction to try to cancel it out. If you remove the medication too fast, **there won't be enough time for the brain to readjust**, so it can be a huge shock to the brain and cause a wide variety of mental health withdrawal symptoms. And since other organs in the body also use many of the same neurotransmitters targeted by psychiatric medications, physical withdrawal symptoms are also very common.

# Acute (Sudden) Withdrawal Symptoms

Reducing the dose of a psychiatric medication too quickly can cause uncomfortable, serious, prolonged, dangerous, or even life-threatening withdrawal symptoms fairly quickly. Acute withdrawal symptoms typically arise within the first few days after the dosage is reduced or stopped. Dozens of symptoms are possible, and the number, type, severity, and duration of withdrawal symptoms vary depending on the person and on the medication.

**The longer you have been taking psychiatric medication, the more likely it is that you will experience withdrawal when you reduce the dose.**

Reducing the dosage of any psychiatric medication too quickly can cause withdrawal, but the most problematic medication families are listed below, along with a few examples of their possible withdrawal symptoms:



## Benzodiazepines

(such as alprazolam, lorazepam, clonazepam)

## and anticonvulsants

(such as lamotrigine, topiramate, valproate, and carbamazepine):

anxiety, insomnia, agitation, [seizure\\*](#)

## Antipsychotics

(such as olanzapine, risperidone, and aripiprazole):

anxiety, agitation, insomnia, [rebound psychosis\\*](#)

## SRI

(serotonin reuptake inhibitors such as citalopram and sertraline)

## and SNRI

(serotonin-norepinephrine reuptake inhibitors such as venlafaxine and duloxetine):

headache, dizziness,

flu symptoms, agitation,

electric shock sensations such as [“brain zaps”\\*](#)

It can be challenging sometimes to tell the difference between withdrawal and relapse. If you reduce the dosage of a medication and start to feel anxious or unstable a few days later, how do you know whether you are in withdrawal or your original mood disorder symptoms are coming back?

If you're not sure, your prescriber and people close to you can help you tell the difference, but one clue that you may be experiencing withdrawal rather than relapse is that withdrawal symptoms tend to occur very soon and very suddenly after dosage reductions—usually within just a few days, whereas relapse symptoms often take much longer to occur and tend to occur more gradually.

In some cases, withdrawal symptoms can occur on a delayed basis, weeks after a dose reduction. Another clue is that withdrawal often includes clear physical symptoms such as dizziness, nausea, or electrical sensations, which are not symptoms of mental health conditions.

You can read more about the differences between withdrawal and relapse in this article: [“Distinguishing relapse from antidepressant withdrawal.”](#) or [watch this interview with Dr. Sørensen.](#)

If they haven’t been going on for too long, acute withdrawal symptoms can usually be reversed within hours by raising the medication back to its previous dosage. However, if a taper is poorly managed and acute withdrawal symptoms are allowed to continue for too long, a serious situation called **protracted withdrawal** may occur.

## Protracted (Prolonged) Withdrawal

If psychiatric medication is stopped abruptly or is tapered using dosage reductions that are too large or unpredictable for the brain to handle, and the situation isn’t corrected quickly enough, it could be such a traumatic shock to your system that it may take months or even years for your brain to recover.

During this long period of time, people can experience “waves” of withdrawal symptoms lasting hours to many days, separated by “windows” of relative relief.

The brain’s ability to rewire and heal itself by building and strengthening new connections is called **neuroplasticity**.

The greater your brain’s capacity for neuroplasticity, the more resilient your brain will be, and the faster your brain will recover from injuries of all kinds, including medication-related injuries. You can shore up your brain’s capacity for neuroplasticity using the lifestyle strategies listed in the **Lifestyle Strategies to Improve Brain Health and Increase Chance of Success** section below.

Nevertheless, if you find yourself in the unfortunate predicament of protracted withdrawal, the best treatment is the **tincture of time**. Psychiatrists and psychologists who specialize in psychiatric medication withdrawal management report that nearly everyone recovers from protracted withdrawal eventually, but caution that it can take up to one to two years for the brain to regain its equilibrium.

This is why **the best treatment for protracted withdrawal is prevention**: in other words, a properly designed psychiatric medication taper.





# Why Keto May Support a Safe Taper

As we've covered, tapering psychiatric medications can place significant stress on the brain, especially when withdrawal symptoms emerge due to sudden shifts in neurotransmitter activity and energy availability. While ketogenic therapy is not a guaranteed solution, entering and maintaining ketosis may help support a smoother taper by improving the brain's metabolic stability and resilience.

## How Ketosis Supports the Brain

A ketogenic diet generates ketones—a supplemental fuel that can deliver more stable, efficient energy to the brain. This metabolic shift:



Stabilizes brain energy through enhanced mitochondrial function



Regulates neurotransmitters like GABA and glutamate, which are commonly affected during medication changes



Reduces oxidative stress and inflammation, which may be elevated during withdrawal and may contribute to symptom severity

By improving these foundational aspects of brain health, ketosis may help buffer the brain against some of the physiological disruptions that occur during drug dosage reductions.



## What We're Seeing in Real Life

Clinicians and individuals in the metabolic psychiatry community have observed that some people experience fewer and less intense withdrawal symptoms while in ketosis, especially when tapers are done gradually and with proper supervision. While more research is needed, early evidence and case series suggest this approach may offer meaningful support during medication reduction.

# Basic Principles of Safe Psychiatric Medication Tapering

The three guiding principles of safe psychiatric medication tapering are

**PERSONALIZATION,**  
**PROFESSIONAL GUIDANCE,**  
and **PATIENCE.**

## Psychiatric Medication Tapering Should be Personalized

There is no one-size-fits-all medication tapering protocol. For a medication plan to be safe and effective, **it must be tailored to your unique situation.** This is because many different factors must be taken into consideration including the types, dosages, and number of medications you are taking, how long you've been





taking them, why they were initially prescribed, and how they have affected you.

Your age, height, weight, and medical history also influence how medications are managed. Your personal goals and how sensitive you are to medication changes are also very important. For all

of these reasons, working with a prescribing professional who has experience managing psychiatric medications is very important. Ideally, the prescriber already knows you well or has taken a thorough history before discussing your medication tapering plan.

## Psychiatric Medication Tapering Should be Professionally Supervised

Psychiatric medication withdrawal can be an extremely uncomfortable or even dangerous experience, but **working with a prescriber** can minimize your discomfort and maximize your chance of success. Working with your prescriber also allows for:

-  Access to prescriptions/compounding pharmacy orders/tapering strips
-  Medical and mental health symptom monitoring
-  Personalized advice about medication adjustments
-  Access to emergency services or fast-acting medications should a crisis arise

It is also very helpful to involve at least one additional trusted individual such as a family member, partner, therapist, or coach for support and feedback.



## Psychiatric Medication Tapering Takes Patience

How fast your taper can go will depend on many factors including the medication type, current dosage, how long you've been taking it, and how sensitive you are to dosage reductions. Some people tolerate medication reductions relatively easily, whereas for others, it can take months or even years to taper completely off of certain psychiatric medications.

One of the many challenges in tapering psychiatric medications is figuring out how long to wait between dosage reductions and how many milligrams each dosage reduction should be. There is no one-size-fits-all tapering strategy, but this [short video by Dr. Josef Witt-Doerring](#) summarizes some of the more commonly used strategies:

One of the most frustrating (but also most helpful) facts to be aware of is that the closer you get to zero milligrams, the slower you may need to go. Slowing a taper down toward the end by using ever-smaller dosage reductions is called **hyperbolic tapering**. Hyperbolic tapering methods can help to minimize discomfort, reduce the risk of severe withdrawal symptoms, and reduce the risk of relapse of your original mental health symptoms.

It is worth learning more about this important technique and sharing these learning resources with your prescriber if they are not already knowledgeable about the topic.

[In this interview](#) with Dr. Bret Scher, Dr. Mark Horowitz, a leading clinician and researcher in antidepressant withdrawal and de-prescribing, delves into the complex world of tapering antidepressants, in particular.

A common obstacle to hyperbolic and other forms of slow, gradual tapering strategies is that most medications don't come in small enough doses to support a proper taper. Simply cutting pills into smaller sizes isn't always possible (and is not advisable in the case of extended-release medications). In many cases your prescriber will need to work with a quality **compounding pharmacy** to prepare smaller dosages in the form of custom-strength tablets or liquids. In the U.S., look for a compounding pharmacy accredited by a reputable organization such as the [PCAB](#) or the [NABP](#). Depending on the medication, [tapering strips](#) may also be an option.



# Lifestyle Strategies to Improve Brain Health and Increase Your Chance of Success

If your goal is better mental health and less psychiatric medication, improving the health of your brain will greatly increase your chance of success on both fronts. The healthier your brain is, the less likely you are to have mental health symptoms, whether you take medication or not. A healthier brain may also adapt to medication changes more easily and may even recover more quickly from protracted withdrawal injuries.



There are many powerful lifestyle strategies you can use to improve the health of your brain (and the rest of your body). It's never too late to adopt a brain-healthy lifestyle, but the sooner you begin, the better off you'll be. Improving brain health through lifestyle is important for all of us but is particularly important if you have been using medication to manage serious mental health symptoms such as suicidal thinking, self-injury, manic episodes, or psychosis.

If medication has been helpful in suppressing these symptoms to any extent, these symptoms could return in full force once the medication is discontinued, but if you shore up your health through lifestyle before you attempt a medication taper, the taper may proceed more smoothly, and the mental health symptoms that led you to try psychiatric medication in the first place will be less likely to resurface.

The following are some of the **most impactful changes** you can make to support better brain health:

## Substance-Free Living

Strictly avoid mind-altering and potentially habit-forming substances such as alcohol, cannabis, and nicotine. Even caffeine can be problematic for some individuals. Just like prescription medications, these substances change the brain's chemistry and anatomy in ways that can impair its ability to heal and work against your mental health goals.

late at night, avoiding screens at least an hour before bedtime, keeping your sleeping quarters cool and dark, waking up at the same time every morning, and exposing your eyes to sunlight as soon after waking as you can.

## Clean Up Your Diet

Brain inflammation and oxidative stress are two of the major drivers of poor mental health, and your diet plays a big role in both. Eating a whole foods diet and avoiding ingredients that cause inflammation and oxidative stress—particularly refined carbohydrates such as sugars, flours, cereal products, and fruit juices as well as refined vegetable oils such as soybean oil and sunflower oil can go a long way toward improving your mood, energy, and concentration.

## Stress Management

Chronic stress can injure and destabilize the brain. Adopting practices to reduce and manage stress calms the nervous system and supports brain resilience.

## Prioritize Sleep

The brain heals and cleanses itself during sleep, so practice good sleep hygiene by not eating



## Consider a Low-Carbohydrate or Ketogenic Diet

The importance of keeping your blood glucose and insulin levels in a healthy range cannot be overstated, as the metabolic health of every cell in the body—including your brain cells—will otherwise suffer significant damage over time. Ketogenic diets excel at keeping glucose and insulin levels under good control, and furthermore, they generate ketones that reduce inflammation and oxidative stress, help stabilize and energize the brain, and support brain healing. Metabolic Mind was founded to call attention to this critical relationship between metabolic health and mental health, so if you don't already follow a ketogenic diet, please explore the many resources on this site to learn more about how you can leverage the power of ketosis to bolster brain health.



## Exercise

Exercise is essential to optimal metabolic and mental health. Exercise improves brain circulation which improves the delivery of oxygen and nutrients to the brain and the efficient removal of waste products from the brain. Exercise [multiplies the number of mitochondria](#) in the brain and increases the size of existing mitochondria, boosting brain metabolism and energy transformation. Exercise also helps keep glucose and insulin levels lower, improves insulin resistance, and can encourage your body to burn more fat (especially if you are following a low-carbohydrate or ketogenic diet).



## Looking for trustworthy guidance on metabolic strategies for mental health?

**THINK+SMART** is a free, community-driven resource designed to help you explore metabolic therapies like sleep, movement, and more as potential tools for improving psychiatric well-being.

Whether you're just learning or ready to take action, the THINK+SMART guide and email course provide practical, evidence-informed steps to help you get started—always in collaboration with your care team.





## Finding Metabolically Minded Medication Support

Since metabolic psychiatry is a relatively new medical specialty, most prescribing professionals don't yet have experience managing medications with people who are following a ketogenic diet. Prescribers unfamiliar with this special topic who are open to learning more will find links to educational resources at the end of this ebook.

Another option would be for you and/or your current prescriber to consult with or collaborate with an experienced clinician to help guide your care. You can search for consulting clinicians on this free international [Ketogenic Diets for Mental Health Clinician Directory](#).

### Practical Steps to Getting Clinical Support

Whether you're hoping to start a ketogenic diet, explore psychiatric medication tapering, or both, it's important to build a strong, supportive team. The steps below are designed to help you initiate these important conversations and find the right clinical partners for your journey.

### How to Start the Conversation with Your Prescriber



Bringing up a ketogenic diet or the possibility of tapering psychiatric medications can feel intimidating, especially if your clinician isn't familiar with these approaches. When possible, come prepared with reputable information, clarify your goals, and express your willingness to work together.

#### You might begin the conversation like this:

- + "I've been learning about metabolic strategies like ketogenic diets and how they may support mental health. I'd like to explore whether these strategies could be safe and appropriate for me, and if so, how we might approach them together."
- + "I've read that starting a ketogenic diet can affect how psychiatric medications work. If I were to try it, would you be willing to help monitor my medications and adjust them if needed?"
- + "If I start feeling better on a ketogenic diet, I may want to explore the possibility of reducing medications very slowly, with your guidance. Is that something you'd be open to considering?"

If your clinician is unfamiliar with ketogenic therapy for psychiatric disorders, consider downloading [this published expert consensus](#) on how to safely incorporate ketogenic therapy for serious mental illness.

Even if your prescriber isn't familiar with these strategies, many are open to learning more, especially if you approach the conversation with curiosity, mutual respect, and clear goals. You can also offer them credible resources to review (see below).

## Questions to Ask When Looking for a New Prescriber

If your current prescriber isn't open to supporting you, or if you're looking to add someone new to your care team, here are some helpful questions to ask when vetting a potential new clinician:

- + Do you have experience working with patients who use ketogenic or low-carbohydrate diets for mental health?
- + Are you comfortable adjusting psychiatric medications for someone following a ketogenic diet?
- + How do you typically approach medication tapering, and how familiar are you with slow tapering strategies?
- + Are you open to collaborating with other members of my care team, such as a therapist, coach, or metabolic health practitioner?
- + Do you consider patient preferences and lived experience when designing care plans?



### Remember

a good prescriber doesn't have to know everything about keto or tapering. What matters most is a willingness to learn, communicate openly, and personalize your care.

## Involving a Coach, Therapist, or Support Person

Medication decisions are deeply personal and often emotional. Having additional layers of support can help you stay grounded, process decisions, and navigate challenges as they arise.

Consider including one or more of the following:

- + A **therapist** who can help track your emotional well-being, offer coping strategies, and support your self-awareness
- + A **mental health coach** or **metabolic health coach** familiar with ketogenic therapy and behavior change
- + A **trusted friend, family member, or peer** who can support you during challenging moments and celebrate progress with you

Ideally, these individuals are aware of your goals, understand your values, and can communicate respectfully with your medical team if needed.

## What if You Can't Access Care? Can You Still Try Medical Keto?

While we strongly recommend working with trained clinicians when implementing a medical ketogenic diet, we understand that access to metabolic psychiatry care can be limited. If a patient cannot find affordable support, they can still explore medical keto with caution. This approach requires dedication, thorough research, and a willingness to adapt.

For those navigating this path independently, it's crucial to understand that ketogenic therapy is not a universal solution.

Complementary strategies—such as adopting a lower-carb, whole foods diet, eliminating substances like alcohol, and managing sleep—can significantly enhance metabolic health. Resources from Metabolic Mind, including the THINK+SMART framework, offer valuable guidance and community support for individuals embarking on this journey.

For a deeper dive into navigating care challenges and implementing medical keto, [check out our detailed article on this topic.](#)



## Clinical and Community Resources

The selected resources below offer much more detailed information to guide your learning, support constructive conversations with your prescriber, connect with others, and help you find professional care.

Some of the most knowledgeable and pioneering mental health professionals specializing in the field of psychiatric medication tapering today are Dr. Mark Horowitz, Dr. Anders Sørensen, and Dr. Josef Witt-Doerring.



### Dr. Mark Horowitz

Dr. Mark Horowitz is a clinical research fellow in psychiatry in the National Health Service (NHS) in London who holds a PhD in the neurobiology of depression and the pharmacology of antidepressants. He is co-author of the Maudsley Deprescribing Manual and the co-founder of Outro Health, a virtual antidepressant tapering clinic in the U.S.

[🌐 Dr. Mark Horowitz's website](#)

[📄 Outro clinic](#)


[📖 The Maudsley Deprescribing Manual by Mark Horowitz and David Taylor](#)

[📺 YouTube video: Antidepressant withdrawal effects and how to safely stop them](#)



## Dr. Anders Sørensen

Dr. Anders Sørensen is a Danish psychologist with a PhD in psychiatric drug withdrawal. He is also the author of *Crossing Zero: The Art and Science of Coming Off and Staying Off Psychiatric Drugs*.

 Metabolic Mind podcast with Dr Anders Sørensen: “The Truth About Tapering Off Psychiatric Medications”

 [Crossing Zero](#) by Dr Anders Sørensen



## Dr. Josef Witt-Doerring

Dr. Josef Witt-Doerring is a psychiatrist specializing in psychiatric drug side effects and withdrawal. Dr. Witt-Doerring began his career as a medical officer for the U.S. Food and Drug Administration (FDA) reviewing psychiatric medicines and has held clinical research and drug safety positions at several pharmaceutical companies. He is also the founder of [TaperClinic](#), a U.S.-based service that offers personalized psychiatric medication tapering support.



## Dr. Heather Ashton

Dr. Heather Ashton was a British psychopharmacologist and physician whose research was instrumental in identifying the addictive potential of benzodiazepines. She ran a benzodiazepine withdrawal clinic from 1982-1994. Dr. Ashton died in 2019, but her 1999 publication “Benzodiazepines: How They Work and How to Withdraw” which was updated in 2011, has become known as the [Ashton Manual](#).



## Educational Resources for Clinicians

If your prescriber is open to learning more about ketogenic therapy for serious mental illness, the following resources are excellent places to start:

- + Dr. Georgia Ede's CME-accredited [Ketogenic Diets for Mental Health clinician training program](#) includes a one-hour module dedicated to medication management in the context of ketogenic diets.
- + Dr. Josef Witt-Doerring's [free online training in psychiatric medication tapering](#)
- + Dr. Josef Witt-Doerring's video: [Protracted Withdrawal Explained for your Doctor](#)
- + [Peer-Reviewed Expert Consensus on Ketogenic Therapy for Serious Mental Illness](#)

These tools can help your prescriber understand the rationale, risks, and strategies involved in managing medications alongside metabolic therapies and help you build a more informed, collaborative care plan.

## Community Support

Below are selected resources created by individuals and robust grassroots communities who share valuable knowledge and insights gained from lived experience to educate, support, and empower others:

- + [Inner Compass Exchange](#)
- + [Surviving Antidepressants](#)
- + [How to Taper Off Psych Meds](#)
- + [How I Safely Quit Psychiatric Medications in Just 10 Months](#)

## Other Helpful Resources

- + [Psychiatric Medication Withdrawal and a Ketogenic Diet](#), by Nicole Laurent, LMHC
- + [International Institute for Psychiatric Drug Withdrawal](#)
- + [Metabolic Collective](#)

# Before You Begin:

## Checklist and Clinical Considerations

Starting a ketogenic diet or exploring psychiatric medication changes is a meaningful step and preparation matters. Whether your goal is to improve your mental health, reduce side effects, or explore the possibility of tapering medication, these interventions work best when approached with intention, education, and the right support in place.

Use this checklist to ensure you're set up for a safer, more informed experience.

### Create a Tapering and Keto Support Team

While creating an entire support team isn't feasible for everyone, your list may include:

- Prescribing clinician** – someone open to ordering lab tests, adjusting medications, and potentially supervising a medication taper.
- Mental health therapist or coach** – for emotional support, accountability, and practical tools during transition
- Primary care provider** – to coordinate care and address any medical conditions that could affect your plan
- Family member, partner, or trusted friend** – someone who understands your goals and can check in with you regularly
- Metabolically informed consultant** – for additional guidance if your care team lacks ketogenic or tapering experience

### Full medication list

You've gathered all relevant medication information, including:

- Drug names (generic + brand, if applicable)
- Drug formulation (tablet, capsule, liquid, sustained-release, etc.)
- Dosages and how many times per day you take them
- How long you have been taking each drug
- Why each drug was first prescribed and how it has affected you since
- Noted side effects or interactions
- Any past medication changes or withdrawal experiences

## Baseline labs ordered or completed before starting a ketogenic diet

It's essential to gather baseline data to track changes and make informed adjustments. Recommended labs include:

- Comprehensive Metabolic Panel (CMP)
- Fasting total insulin and fasting glucose
- Hemoglobin A1C
- Fasting Lipid panel (triglycerides, HDL, LDL)
- Free carnitine level

This PDF includes a consensus from our clinical advisors as to the most helpful labs to draw before starting keto.

## Health tech and tracking tools

- Track your level of nutritional ketosis using one or more of the following methods:
  - Blood ketone meter (most accurate; measures  $\beta$ -hydroxybutyrate)
  - Breath ketone meter (measures acetone)
  - Urine test strips (helpful early on, may become less reliable over time)
- A CGM (continuous glucose monitor) can offer real-time insight into your blood sugar trends, which is especially helpful if you take medication to control your blood sugar, you're working to improve type 2 diabetes or reverse insulin resistance, or you're tracking mental health symptom changes alongside glucose variability.

⚠ *If you take blood pressure or fluid-regulating medications, daily blood pressure monitoring and close medical supervision is essential. A ketogenic diet can lower blood pressure quickly, and medication adjustments may be needed early on.*

*If you take blood glucose lowering medications, frequent glucose monitoring (ideally with a continuous glucose monitor) along with close medical supervision is essential.*

## RELEASE Toolkit

The University of Queensland's RELEASE Toolkit is a comprehensive free online guide to antidepressant tapering that includes education and training packages for prescribers and a suite of printable resources for consumers co-designed by people with lived experience of long-term antidepressant use and general practitioners. The toolkit includes information brochures (Stopping antidepressants, How family and friends can help), a Decision aid, and Tapering plans for 15 commonly prescribed antidepressants, including 'slower', 'even slower' and 'faster' versions for most antidepressants.

## Final Thoughts

Embarking on a ketogenic diet, exploring medication changes, or both, can feel overwhelming, but you're not alone, and you don't have to do it all at once. This guide is here to help you take thoughtful, well-informed steps toward **better mental and metabolic health**, in partnership with trusted professionals and a support team that understands your goals.

Whether your aim is to reduce medication, feel more stable, or simply learn about new tools for healing, the most important thing is to move forward at a pace that feels safe and sustainable for you. With the right information, preparation, and support, **meaningful change is possible**.

➤ For more education, encouragement, and connection, explore our full library of free videos, articles, and community stories at [MetabolicMind.org](https://www.MetabolicMind.org).



## About Dr. Georgia Ede

Dr. Georgia Ede is an internationally recognized expert in nutritional and metabolic psychiatry. Her 25+ years of clinical experience include 7 years at Harvard University, where she was the first psychiatrist to offer nutrition-based approaches to mental health conditions. Dr. Ede co-authored the first inpatient study of a ketogenic diet for serious mental illness, developed the first medically accredited course in ketogenic diets for mental health, and is a recipient of the Baszucki Metabolic Mind Award. She is the author of the bestselling book *Change Your Diet, Change Your Mind*, recommended by the New York Times Book Review.

