



Overview

There are many different traditional antipsychotics available in Canada. Some examples of these medications include:

- **Chlorpromazine (Largactil[®])**
- **Haloperidol (Haldol[®], Haldol LA[®])**
- **Loxapine (Loxapac[®])**
- **Methotrimeprazine (Nozinan[®])**
- **Zuclopenthixol (Clopixol[®], Clopixol Acuphase[®], Clopixol Depot[®])**

What are *traditional antipsychotics* used for?

Traditional antipsychotics are medications used to treat several medical and psychiatric conditions such as:

- schizophrenia and other thought disorders
- bipolar disorder
- tic disorders such as Tourette syndrome
- pervasive developmental disorders (like autism and Asperger's syndrome)
- conduct disorder and severe behavioral problems

These medications may also be used to help treat symptoms associated with other disorders such as some types of anxiety disorders as well as some sleep disorders. They are sometimes used as a short term sedative and to help with impulsive or aggressive behaviors.

Your doctor may be using this medication for another reason. If you are unclear why this medication is being prescribed, please ask your doctor.



How do *traditional antipsychotics* work?

Traditional antipsychotics affect the levels of certain chemicals in the brain like dopamine. It is believed that some chemicals, such as dopamine, are imbalanced in people with disorders like schizophrenia and tic disorders. The exact way that antipsychotics improve the symptoms of schizophrenia and other conditions is not fully known.

How well do *traditional antipsychotics* work in children and adolescents?



Several traditional antipsychotics have been studied in children and adolescents diagnosed with schizophrenia, bipolar disorder and Tourette syndrome. Some traditional antipsychotics has been shown in studies to be better than placebo (an inactive pill that looks like the medication) in treating schizophrenia. In bipolar disorder, there is evidence that symptoms of mood disturbance are reduced to a greater degree by a traditional antipsychotic compared to a placebo. There is also evidence supporting the use of certain traditional antipsychotics, such as haloperidol and pimozide, in children and adolescents for treatment of Tourette syndrome.

How should *traditional antipsychotic* medication be taken?

Depending on the medication prescribed, it may be taken once daily or several times a day with or without food. These medications should be taken as directed by your doctor. Try to connect it with something you do each day (like eating breakfast or brushing your teeth) so that you don't forget. Try to avoid alcohol while taking traditional antipsychotics. Usually, your doctor will start with a low dose and slowly increase the dose over several days or weeks based on how you respond to it.

Various traditional antipsychotics are available as tablets, liquid, fast-acting injections (to help control symptoms quickly) and long-acting (depot) injections (that can be given by a nurse every 1 – 4 weeks). These long-acting medications are good options if you have difficulty taking medications on a daily basis or if you have difficulty swallowing medications.

Do not take the liquid form of these medications with coffee or tea, since the liquid form may form clusters (precipitate) which may make the medication not work properly.

When will *traditional antipsychotics* start working?

This depends on what you are using it for. When treating the symptoms of schizophrenia (such as hallucinations or delusions), it usually takes 3 to 6 weeks or longer before the benefits of traditional antipsychotics are noticeable. When traditional antipsychotics are working well, you may notice that your thoughts are clearer and more organized. Agitation may be decreased and hearing voices or seeing things no one else sees (hallucinations) may stop completely or happen much less. Your mood may be more settled and you may see a reduction of intense fears and worries. It is important that you continue taking traditional antipsychotics regularly even if you are feeling well, as it can prevent symptoms from returning. If you are taking this medication to help with symptoms of mood disturbance, you may notice some changes in the first 1 to 2 weeks.

Traditional antipsychotics do not work for everyone. If you are not feeling better within 6 weeks, your doctor may recommend switching you to a different medication.



How long do I have to take *traditional antipsychotics*?

This depends on the symptoms you have, how frequently they occur and how long you have had them. Most people with schizophrenia or tic disorders need to take this medication for several months. This allows time for your symptoms to stabilize and for you to regain your functioning. Your doctor will discuss the benefits and risks of taking a traditional antipsychotic with you. At this time, you can also discuss how long you might need to take this medication.

Do not increase, decrease, or stop taking this medication without discussing it with your doctor. If you stop taking this medication suddenly, it is possible that your symptoms may return or you may have a bad reaction.

Are *traditional antipsychotics* addictive?

No, these medications are not addictive and you will not have “cravings” for these medications like you might with nicotine or street drugs. If you and your doctor decide it is best to stop using a traditional antipsychotic, your doctor will explain how to safely come off this medication so you don't feel negative effects as your body adjusts to being without it.

What are the side effects of *traditional antipsychotics* and what should I do if I get them?

As with most medications, side effects may occur when taking traditional antipsychotics. However, most side effects are temporary. Sometimes the side effects may occur before any of the beneficial effects. It is also possible for some individuals to experience side effects that they feel are serious or long lasting. If this occurs, speak to your doctor about ways to manage them. On the next page are some of the more common side effects of taking traditional antipsychotics. In brackets are suggested ways to lessen these effects.

Common side effects

Side effects are usually more common when starting a medication or after a dose increase. If any of these side effects is too troublesome for you, please discuss them with your doctor, nurse or pharmacist.

- Agitation and feelings of restlessness (*avoid caffeine from energy drinks, colas and coffee*)
- Blurred vision (*usually disappears in 1-2 weeks; use bright lights or a magnifying glass when reading*)
- Constipation (*increase exercise, fluids, vegetables, fruits and fiber*)
- Dizziness (*try getting up slowly from a sitting or lying down position*)
- Drowsiness (*try taking the dose at bedtime*)
- Dry mouth (*try chewing sugarless gum, sour candies, ice chips, or popsicles*)
- Headache (*try using a pain reliever like acetaminophen (plain Tylenol®)*)
- Increase in hunger (*avoid high calorie foods*)
- Muscle spasms or stiff muscles (*there is a medication to relieve this, talk to your doctor*)
- Stomach ache (*try taking the medication with food*)
- Weight gain (*monitor your food intake, increase your exercise*)

Uncommon side effects (e.g., those that occur in less than 5% of patients)

Contact your doctor **IMMEDIATELY** if you have any of these side effects:

- Breast tenderness or discharge
- Confusion
- Fainting, feeling lightheaded or difficulties with balance
- Fast or irregular heart beat
- Feelings of restlessness
- Rash
- Seizures
- Shaking, stiffness or difficulty moving, muscle spasm or stiffness in your throat or tongue



Traditional antipsychotics are sometimes associated with a very rare side effect called “neuroleptic malignant syndrome”. The symptoms may include severe muscle stiffness, high fever, increased heart rate and blood pressure, irregular heartbeat (pulse) and sweating. Contact your doctor right away if this occurs.

Traditional antipsychotic medications have been associated with a serious side effect called “tardive dyskinesia”. This is a side effect that can occur in patients who take antipsychotics for several years and can potentially become permanent. It involves involuntary movements of some muscles in the body like the lips, tongue, hands and neck. Gradually reducing and stopping the medication with your doctor's help (at the first signs of these movements occurring) or switching to a “second generation” antipsychotic medication can decrease the chance of having this side effect continue.

What precautions should my doctor and I be aware of when taking *traditional antipsychotics*?

Tell your doctor or pharmacist if you:

- Have any allergies or have experienced a reaction to a medication.
- Are taking or plan to start taking any other prescription or non-prescription medications (including herbal products). Some medications can interact with traditional antipsychotics. Your doctor may need to change the doses of your medications or monitor you carefully for side effects if you are taking medications that interact with traditional antipsychotics.
- Have a history of heart disease, epilepsy or have ever had a seizure, kidney or liver disease, a bowel obstruction, diabetes (or a family history of diabetes) or glaucoma.
- Miss a period, are pregnant (or are planning to become pregnant) or are breast-feeding.
- Are currently using alcohol or street drugs. These substances can decrease how well this medication works for you and/or make you feel drowsy.



Tip: When taking this medication, your body may have difficulty regulating your temperature. Make sure you drink lots of fluids and water to avoid becoming dehydrated. You should avoid doing a lot of physical activities on hot days.

Tip: Traditional antipsychotics can make some individuals feel drowsy, dizzy or slowed down. If you experience these temporary side effects, it is important to avoid operating heavy machinery or driving a car.

What special instructions should I follow while using *traditional antipsychotics*?

- Keep all appointments with your doctor and the laboratory. Your doctor may order certain lab tests to check how you are responding to this medication, and to monitor for side effects.
- Try to keep a healthy and well-balanced diet along with regular exercise.
- Do not allow anyone else to use your medication.
- You may be more sensitive to the sun than usual while taking a traditional antipsychotic. Wear sunscreen (minimum SPF of 30) and sunglasses when you first begin to take this medication.



Tip: Use the ***Antipsychotic Monitoring Form for Children and Adolescents*** to help measure your progress on this medication.

What should I do if I forget to take a dose of *traditional antipsychotic medication*?

If you take this medication only at bedtime and you forget to take it, skip the missed dose and continue with your schedule the next day. Do NOT double your next dose. If you take it more than once a day, take the missed dose as soon as possible. However, if it is almost time for your next dose (e.g., within 4 hours), skip the missed dose and continue with your regular schedule. Do NOT double your next dose.



What storage conditions are needed for *traditional antipsychotics*?

- Keep this medication in the original container, stored at room temperature away from moisture and heat (e.g., not in the bathroom or kitchen).
- Keep this medication out of reach and sight of children.

You may wish to share this information with your family members to help them to understand your treatment options. Since every person's needs are different, it is important that you follow the advice provided to you by your own doctor, nurse and/or pharmacist and speak to them if you have any questions about this medication.

Developed by the health care professionals of Child & Adolescent Mental Health Program and reviewed by the staff of the Kelty Mental Health Resource Centre.