

# Antipsychotics

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If you experience psychosis as part of your illness, you may be offered antipsychotic medication. Antipsychotics are generally used to treat psychosis, but are also used to treat bipolar disorder. This factsheet explains more about antipsychotic medication.



KEY POINTS

- There are two generations of antipsychotics. The older first generation and newer second generation.
- Antipsychotics affect people differently. If you take antipsychotics then you may get side effects.
- It can take some time to find the right medication.
- If you are taking an antipsychotic which you feel is not working, or if the side effects are difficult to live with, then you should discuss this with your GP or psychiatrist.
- You should not stop taking antipsychotics suddenly.
- Your antipsychotics can interact with other medications. It is important that your doctor is aware of all the medicine you are taking. Including any homeopathic medication.

**This factsheet covers:**

1. [What are antipsychotics?](#)
2. [Are there different types of antipsychotics?](#)
3. [Are there any side effects?](#)
4. [What if I want to stop taking antipsychotics?](#)
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## 1. What are antipsychotics?

Psychosis is a medical term. If you have psychosis, you might see or hear things (hallucinations) that are not there. Or you might have ideas or beliefs that do not match reality (delusions). Some people describe it as a break from reality. Doctors may call these 'psychotic symptoms', a 'psychotic episode' or a 'psychotic experience'.

Psychotic symptoms can be part of conditions such as schizophrenia, schizoaffective disorder, personality disorder and bipolar disorder. But some people can have psychotic symptoms without having any of these conditions.

If you have psychosis, your doctor may offer you antipsychotic medication to help you with your symptoms. Antipsychotics can help to control symptoms of psychosis.<sup>1</sup> This can help you feel more in control of your life, particularly if you are finding the psychotic symptoms distressing.

According to the Royal College of Psychiatrists, 4 out of 5 people who take antipsychotics find they are successful in treating their symptoms.<sup>2</sup> It is not possible to predict which one will work best for you, so you may have to try a few before you find the right one.

Some antipsychotics are used to treat mania (which is a symptom of illnesses such as bipolar disorder) and psychotic symptoms of depression.<sup>3</sup>

### How do antipsychotics work?

Your brain contains chemicals which help to carry messages from one part of the brain to another. One of these chemicals is called dopamine. It is thought that high levels of dopamine may cause the brain to function differently and may cause the symptoms of psychosis.<sup>4</sup> Antipsychotic medications reduce the amount of dopamine in the brain or restore the balance of dopamine with other chemicals in the brain.<sup>5</sup>

You can find more information about:

- Psychosis
- Bipolar disorder
- Depression

at [www.rethink.org/resources](http://www.rethink.org/resources). Or call our General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheets.

## 2. Are there different types of antipsychotics?

Some people talk about two types of antipsychotic medication. Your doctor might call them the following.<sup>6</sup>

- Typical or 'first generation'. These medications have been used since the 1950s.
- Atypical or 'second generation'. These medications have been used since the 1990s.

The main difference between these types is in their side effects. First generation antipsychotics may have more of an effect on your movement than newer ones. Although this does not mean newer generation antipsychotics don't have any side effects on your movement.<sup>7</sup>

This distinction can make it easier to talk about the different medications. But you should think about each antipsychotic individually. This is because everyone reacts differently to medication. You can never be certain how you will be affected by side effects or whether the medication will work for you. This can mean that the first medication you try may not be the right one for you.

If you have been on an antipsychotic for a few weeks and the side effects are too difficult to cope with, you should ask your doctor about trying a different one. You can read more about side effects in [section 3](#).

You can find more information about '**Medication – choice and managing problems**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheet.

Antipsychotic medication can come as tablets, a syrup or as an injection. The injections are called a depot. You may find a depot useful if you struggle to remember to take your medication, or might take too much.<sup>8</sup> Your doctor should take your views into account when prescribing you medication.

We have listed the main types of antipsychotics below.

### **First generation antipsychotics (Typical)**

The first generation of antipsychotics have been prescribed since the 1950s.<sup>9</sup> The following medications are typical antipsychotics. They have been listed by their generic name with the brand name in brackets.

- Benperidol (Anquil)
- Chlorpromazine (Largactil)
- Flupentixol (Depixol)
- Fluphenazine (Modecate)
- Haloperidol (Haldol)
- Levomepromazine (Nozinan)
- Pericyazine

- Perphenazine (Fentazin)
- Pimozide (Orap)
- Promazine
- Sulpiride (Dolmatil, Sulpor)
- Trifluoperazine (Stelazine)
- Zuclopenthixol (Clopixol)

## **Second generation antipsychotics (Atypical)**

The second generation of antipsychotics have been used more since the 1990s.<sup>10</sup> Although some of them were developed before then. They have been listed by their generic name with the brand name in brackets.

- Amisulpride (Solian)
- Aripiprazole (Abilify, Abilify Maintena)
- Clozapine (Clozaril, Denzapine, Zaponex)
- Risperidone (Risperdal & Risperdal Consta)
- Olanzapine (Zyprexa)
- Quetiapine (Seroquel)
- Paliperidone (Invega, Xeplion)

### Clozapine

Clozapine works slightly differently to others. It is sometimes given to people who are treatment resistant.<sup>11</sup> This means other medication hasn't helped their symptoms. The National Institute for Health and Care Excellence (NICE) says that people with schizophrenia should only be offered clozapine after having tried 2 other drugs.<sup>12</sup>

Clozapine can cause your white blood cell numbers to drop. But this is rare.<sup>13</sup> This could mean that you get infections more easily. If you take clozapine, you will need regular blood tests to make sure your white blood cell count is healthy.<sup>14</sup>

If your white blood cell numbers start dropping, you will be asked to stop taking the medication. You will have another blood test after you have stopped clozapine to make sure they are back to normal. Your doctor might decide to change your dose of clozapine or offer you another type of medication.<sup>15</sup>

NICE produce guidelines for the assessment and treatment of mental illnesses, such as psychosis and schizophrenia. Doctors might use these guidelines to decide which medication to offer you. You can find these in the further reading section below.

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### **3. Are there any side effects?**

Your medication should come with a leaflet called a 'patient information leaflet'. This leaflet will tell you what the side effects are and explain what to do if you are experiencing any side effects.

Side effects of antipsychotics can include the following.<sup>16</sup>

- Stiffness and shakiness. This can often be reduced by lowering the dose. But, if a high dose is necessary, the shakiness can be treated with anticholinergic drugs. This is the same kind of medication that is used for Parkinson's disease.<sup>17</sup>
- Uncomfortable restlessness (akathisia).
- Movements of the jaw, lips and tongue (tardive dyskinesia).
- Sexual problems due to hormonal changes.
- Sleepiness and slowness.
- Weight gain.
- A higher risk of getting diabetes.
- Sexual problems due to hormonal changes.
- Constipation.
- Dry mouth.
- Blurred vision.

Not all antipsychotics will have these side effects. Second generation or atypical antipsychotics are less likely to cause movement side effects, but you might still experience them. If you do then your doctor might change your medication.

The table on the next page provides a quick comparison of the type and severity of the side effects of some antipsychotics.

### **Physical health check-up**

Some antipsychotic medications can affect your heart.<sup>18</sup> If you have a heart condition, or you are at risk of having difficulties with your heart, doctors might regularly check your heart. They might want to do this annually, or more regularly.<sup>19</sup>

GP surgeries have a register of people with severe mental illness, such as psychosis or schizophrenia. If you are on the register your GP should offer you an annual physical health check.<sup>20,21</sup> They might check your heart in these appointments.

Speak to your GP or psychiatrist if you want a heart check up before you start taking antipsychotics. Or have any concerns about your heart or blood vessels.

If you have psychosis and schizophrenia your doctor should offer to check your heart before you start antipsychotics if:<sup>22</sup>

- the makers of your medication say you should,
- a physical health check has found you have a higher risk of heart or blood vessel problems, such as high blood pressure,
- you have heart or blood vessel problems or someone in your family has had them, or
- you have to go into hospital.

## Comparative adverse effects of antipsychotics

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Drug	Sedation	Weight gain	Diabetes	Extra-pyramidal symptoms	Anti-cholinergic	Hypotension	Prolactin elevation
Amisulpride	-	+	+	+	-	-	+++
Aripiprazole	-	+/-	-	+/-	-	-	-
Asenapine	+	+	+/-	+/-	-	-	+/-
Benperidol	+	+	+/-	+++	+	+	+++
Chlorpromazine	+++	++	++	++	++	+++	+++
Clozapine	+++	+++	+++	-	+++	+++	-
Flupentixol	+	++	+	++	++	+	+++
Fluphenazine	+	+	+	+++	++	+	+++
Haloperidol	+	+	+/-	+++	+	+	+++
Iloperidone	-	++	+	+	-	+	-
Loxapine	++	+	+	+++	+	++	+++
Olanzapine	++	+++	+++	+/-	+	+	+
Paliperidone	+	++	+	+	+	++	+++
Perphenazine	+	+	+/-	+++	+	+	+++
Pimozide	+	+	-	+	+	+	+++
Pipothiazine	++	++	+	++	++	++	+++
Promazine	+++	++	+	+	++	++	++
Quetiapine	++	++	++	-	+	++	-
Risperidone	+	++	+	+	+	++	+++
Sertindole	-	+	+/-	-	-	+++	+/-
Sulpiride	-	+	+	+	-	-	+++
Trifluoperazine	+	+	+/-	+++	+/-	+	+++
Ziprasidone	+	+/-	-	+/-	-	+	+/-
Zuclopenthixol	++	++	+	++	++	+	+++

+++ high incidence or severity

++ moderate

+ low

- very low

This is only meant to be a rough guide. Some of the medications listed here are not available in the UK.

### Glossary

**Extra-pyramidal symptoms** means side effects associated with movement problems.

**Anticholinergic** side effects can include dry mouth, constipation, blurred vision, decreased sweating, confusion and concentration problems.

**Hypotension** means low blood pressure, which can lead to dizziness and fainting.

**Prolactin elevation** means that levels of the hormone prolactin are increased. This can lead to sexual side effects.

#### **4. What if I want to stop taking antipsychotics?**

If you want to stop taking antipsychotics, you should discuss this with your doctor. Your doctor should help you come off the medication gradually by reducing the dose over a period of time. If you or your family or friends think you are becoming unwell again, you should speak to your doctor.

You may find that stopping your medication can lead to your symptoms returning within 3-6 months.<sup>24</sup> Your doctor may suggest that you keep taking the medication because it is keeping you well. If this is the case you could ask about trying another type of medication.

If you stop antipsychotics suddenly it can cause 'rebound psychosis'. This means that the symptoms of your illness return suddenly and you may become unwell again.<sup>25</sup>

You cannot be forced to take medication unless you are detained under the Mental Health Act or do not have the capacity to make the decision under the Mental Capacity Act.

You can find more information about:

- Mental Health Act
- Mental Capacity Act

at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheets.

#### **5. Do antipsychotics affect other medication?**

There are lots of different interactions between antipsychotics and other medications.<sup>26</sup>

For example some antipsychotics can interact with tricyclic antidepressants. In some cases, this means they should not be prescribed together. Some antipsychotics can cause drowsiness, so doctors should be careful when about prescribing benzodiazepines with them. It could make you feel more drowsy.<sup>27</sup>

You must tell your doctor about all the medicines you are taking. This includes any homeopathic medicine. This will allow your doctor to prescribe the right antipsychotic.

## 6. Does alcohol affect my antipsychotics?

You should tell your doctor if you drink alcohol. Drinking alcohol can make it harder for your body to absorb the medication. This could increase the effects alcohol has on you. For example drinking alcohol with antipsychotics might increase the sedative effects.<sup>28</sup>

This means you might feel very tired. You may find more information about alcohol and your medication in the patient information leaflet.

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## 7. Can I drive when taking antipsychotics?

Antipsychotics can affect your concentration and make you feel drowsy. This could affect how well you are able to drive especially when you first start taking the medication.<sup>29</sup> You should consider stopping driving during this time if you are affected.

You have to tell the DVLA if you suffer from certain mental health conditions including psychosis, paranoid schizophrenia and Bipolar Disorder.<sup>30</sup>

You can find more information about '**Driving and mental illness**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 8. What else should I consider before taking antipsychotics?

### Sex

Sexual problems have been reported as a side effect of all antipsychotics. Evidence shows that many people taking antipsychotics experience sexual problems.<sup>31</sup> But some antipsychotics have less sexual side effects than others.

Some antipsychotics can cause a hormone called 'prolactin' in your body to increase.<sup>32</sup> This seems to be why antipsychotics can cause sexual side effects. Higher levels of prolactin can cause:<sup>33</sup>

- periods to stop,
- a lack of sex drive,
- breast enlargement in both men and women,
- problems getting aroused, and
- erection and ejaculation problems for men.

If you are experiencing any of these problems you should contact your doctor. They may reduce the dose or stop the medication. If you are advised to stay on it, you might be able to take medications to help with these problems.

## Pregnancy

Taking antipsychotics during pregnancy may have certain risks. It is thought that there may be a small risk of complications if you take antipsychotic drugs during pregnancy. Overall, the research is not clear whether first generation or second generation drugs will affect your unborn child.<sup>34</sup>

If you are pregnant or plan on getting pregnant, you should speak to your doctor. If possible, it is best to tell your doctor before you become pregnant so that there is time to plan a change in your medication.<sup>35</sup>

If you have had relapses in the past your doctor might suggest that you stay on your medication during and after pregnancy. This could reduce your baby's exposure to the drug, because if you did relapse you would need a much higher dose.<sup>36</sup>

If you are breast feeding and taking antipsychotics, some antipsychotics could be passed to your child in your breast milk.<sup>37</sup> Many drug manufacturers advise that you should stop breastfeeding while taking an antipsychotic.<sup>38</sup> There is evidence that the presence of some antipsychotics such as clozapine and olanzapine in breast milk can cause harmful effects. You should be monitored regularly and should stop breastfeeding if harmful effects are suspected.<sup>39</sup>

Speak to your doctor about the risks of medication while pregnant or breastfeeding. You could also discuss this with your midwife or health visitor.

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FURTHER  
READING

### **Psychosis and Schizophrenia in adults: prevention and management**

This is the NICE guidance on Schizophrenia and Psychosis.

**Website:** [www.nice.org.uk/guidance/cg178](http://www.nice.org.uk/guidance/cg178)

### **Bipolar Disorder: assessment and management**

This is the NICE guidance on Bipolar disorder.

**Website:** [www.nice.org.uk/guidance/cg185](http://www.nice.org.uk/guidance/cg185)



USEFUL  
CONTACTS

### **Mood Swings Network**

This organisation provides a range of services for people affected by a mood disorder, including their family and friends.

**Telephone:** 0161 832 37 36 (10am - 4pm Monday - Friday)

**Email:** [info@moodswings.org.uk](mailto:info@moodswings.org.uk)

**Website:** [www.moodswings.org.uk](http://www.moodswings.org.uk)

## Bipolar UK

This is a user led charity working to enable people affected by bipolar disorder to take control of their lives

**Telephone:** 0333 323 3880

**Address:** Bipolar UK, 11 Belgrave Road, London, SW1V 1RB

**Email:** [info@bipolaruk.org.uk](mailto:info@bipolaruk.org.uk)

**Website:** [www.bipolaruk.org.uk/](http://www.bipolaruk.org.uk/)

## The Hearing Voices Network

This organization provides support and understanding for those who hear voices or experience other types of hallucination.

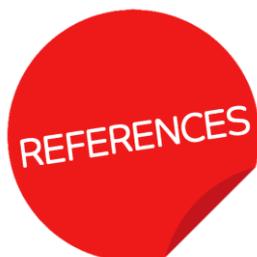
**Telephone:** 0114 271 8210

**Address:** Hearing Voices Network (HVN)

c/o Sheffield Hearing Voices Network, Limbrick Day Service, Limbrick Road, Sheffield, S6 2PE

**Email:** [nhvn@hotmail.co.uk](mailto:nhvn@hotmail.co.uk)

**Website:** [www.hearing-voices.org](http://www.hearing-voices.org)



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<sup>1</sup> Royal College of Psychiatrists. *Antipsychotics*.

<http://www.rcpsych.ac.uk/healthadvice/treatmentwellbeing/antipsychoticmedication.aspx> (accessed 15 February 2017).

<sup>2</sup> Royal College of Psychiatrists: *Schizophrenia – Key Facts*.

<http://www.rcpsych.ac.uk/mentalhealthinfoforall/problems/schizophrenia/schizophreniakeyfacts.aspx> (accessed 15 February 2017).

<sup>3</sup> As note 1.

<sup>4</sup> NHS Choices. *Psychosis – Causes*.

<http://www.nhs.uk/Conditions/Psychosis/Pages/Causes.aspx> (accessed 21 February 2017)

<sup>5</sup> As note 1.

<sup>6</sup> As note 1.

<sup>7</sup> Taylor D, Paton C, Kapur S. *Prescribing Guidelines in Psychiatry*. 12<sup>th</sup> Edition. Chichester: Wiley-Blackwell; 2015. Page 16.

<sup>8</sup> As note 1.

<sup>9</sup> As note 1.

<sup>10</sup> As note 7, at page 15.

<sup>11</sup> As note 7, at page 51.

<sup>12</sup> National Institute for Health and Clinical Excellence. *Psychosis and Schizophrenia in adults: prevention and management*. Clinical Guidance 178. London: National Institute for Health and Care Excellence; 2014. Para 1.5.7.2.

<sup>13</sup> British National Formulary. *Clozapine*.

<https://www.evidence.nhs.uk/formulary/bnf/current/4-central-nervous-system/42-drugs-used-in-psychoses-and-related-disorders/421-antipsychotic-drugs/second-generation-antipsychotic-drugs/clozapine> (accessed 21 February 2017)

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- <sup>14</sup> As note 1.
- <sup>15</sup> As note 1.
- <sup>16</sup> British National Formulary. *4.2.1 Antipsychotic Drugs*.  
<https://www.evidence.nhs.uk/formulary/bnf/current/4-central-nervous-system/42-drugs-used-in-psychoses-and-related-disorders/421-antipsychotic-drugs> (accessed 17 February 2017).
- <sup>17</sup> As note 1.
- <sup>18</sup> As note 16.
- <sup>19</sup> As note 7, at page 110.
- <sup>20</sup> As note 12, at para 1.5.3.1.
- <sup>21</sup> National Institute for Health and Care Excellence. *Bipolar Disorder: assessment and management*. Clinical Guidance 185. London: National Institute for Health and Care Excellence; 2014. para 1.2.10.
- <sup>22</sup> As note 12, at para 1.3.6.2.
- <sup>23</sup> Taylor, D., Paton C., & Kapur, S. *Prescribing Guidelines in Psychiatry*. 11th ed. Chichester: Wiley-Blackwell; 2012. Page 151 – original version © David Taylor
- <sup>24</sup> As note 1.
- <sup>25</sup> Livingston M. Guide to when and how to safely withdraw antipsychotics. *Prescriber* 2012; 23(20): 37-40. DOI: 10.1002/psb.976 (accessed 17 February 2017).
- <sup>26</sup> British National Formulary. *Antipsychotics*.  
<https://www.evidence.nhs.uk/formulary/bnf/current/a1-interactions/list-of-drug-interactions/antipsychotics> (accessed 17 February 2017).
- <sup>27</sup> As note 26
- <sup>28</sup> Tanaka E. Toxicological interactions involving psychiatric drugs and alcohol: an update. *Journal of Clinical Pharmacy and Therapeutics* 2003; 28(2): 81-95. Page 84.
- <sup>29</sup> As note 16.
- <sup>30</sup> Gov.uk. *Check if a health condition affects your driving*.  
<https://www.gov.uk/health-conditions-and-driving> (accessed 17 February 2017).
- <sup>31</sup> As note 7, at page 138.
- <sup>32</sup> As note 16.
- <sup>33</sup> As note 16.
- <sup>34</sup> As note 7, at page 544-545.
- <sup>35</sup> As note 7, at page 545.
- <sup>36</sup> As note 7, at page 545.
- <sup>37</sup> As note 7, at pages 566-567.
- <sup>38</sup> As note 16.
- <sup>39</sup> As note 7, at pages 566-567.

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## Rethink Mental Illness Advice Service

**Phone 0300 5000 927**

**Monday to Friday, 9:30am to 4pm  
(excluding bank holidays)**

**Email [advice@rethink.org](mailto:advice@rethink.org)**

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### Did this help?

We'd love to know if this information helped you.

**Drop us a line at:** [feedback@rethink.org](mailto:feedback@rethink.org)

**or write to us at Rethink Mental Illness:**

RAIS  
PO Box 17106  
Birmingham B9 9LL

**or call us on 0300 5000 927.**

We're open 9:30am to 4pm  
Monday to Friday (excluding bank holidays)



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quality of life for everyone  
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### Need more help?

Go to **[www.rethink.org](http://www.rethink.org)** for information on symptoms, treatments, money and benefits and your rights.

### Don't have access to the web?

Call us on 0121 522 7007. We are open Monday to Friday, 9am to 5pm, and we will send you the information you need in the post.

### Need to talk to an adviser?

If you need practical advice, call us on 0300 5000 927 between 9:30am to 4pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

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