North Nottinghamshire Prescribing Strategy Group

Risperidone

Information sheet for GPs

Risperidone is indicated for the treatment of acute and chronic schizophrenic psychoses, and other psychotic conditions in which positive and/or negative symptoms are prominent. Risperidone also alleviates affective symptoms associated with schizophrenia. It is available as 1mg, 2mg, 3mg, 4mg and 6mg tablets and liquid containing 1mg per ml.

Dose Regimen

- Risperidone may be administered once or twice a day
- Patients should be titrated to 6mg per day gradually over 3 days, starting at 2mg daily on day 1, 4mg daily on day 2 and 6mg daily on day 3.
- Some patients may benefit from a slower rate of titration. The usual effective dose is 4 to 8mg a day, but may be lower in some patients.
- Doses above 10mg may not increase therapeutic benefit and may result in extrapyramidal side effects and doses above 16mg have not been evaluated.
- A lower starting dose of 500micrograms twice daily is recommended in the elderly and in patients with renal and hepatic disease, increasing by 500micrograms twice daily to 1mg or 2mg twice daily.
- Risperidone liquid may be diluted with mineral water, black coffee or orange juice but not tea. It should be taken immediately after dilution.
- If switching medication, other psychotics should gradually be discontinued whilst risperidone is initiated.

Monitoring

Baseline (carried out by consultant):

- Blood pressure
- U&Es
- FBC
- LFTs
- Weight
- (prolactin)

Continuation monitoring (carried out by GP / consultant):

- Blood pressure – frequently during initiation
- U&Es – 3-6 monthly
- FBC- 3-6 monthly
- LFTs – 3-6 monthly
- Weight – as needed
- Prolactin – if symptomatic
- Creatinine phosphokinase – if Neuroleptic Malignant Syndrome suspected.

Side Effects	*Action*
• Extrapyramidal symptoms *(dose-related, incidence higher in doses above 8mg / day)*	Consider reducing the dose and/ or adding an antimuscarinic drug e.g. procyclidine.
• Tardive Dyskinesia	Refer to consultant. A reduction in dose, discontinuation or change to an alternative (atypical) antipsychotic maybe required. Review use of anticholinergics in patient – may worsen symptoms.

Please consult the manufacturer's Data Sheet or Summary of Product Characteristics for further information

Side Effects	*Action*
• Insomnia, agitation, anxiety, headache *(common)*	
• Somnolence / dizziness	Restrict dose to night-time only. Patients should be advised not to drive or operate machinery.
• Orthostatic hypotension –during initial titration, dizziness	Reduce dose. Thereafter titrate dose upwards gradually over several weeks. Advise patient to take time to stand up.
• Dyspepsia, nausea, vomiting, abdominal pain	Advise patient to take with food. Do not titrate dose up too quickly.
• Constipation	Recommend a high fibre diet. Consider adding a bulk-forming and /or stimulant laxative.
• Weight gain	Encourage a healthy balanced diet and regular exercise. Refer to a dietician if appropriate.
• Increase in plasma prolactin (dose-related, sustained rise in prolactin with doses above 6mg /day)	Refer to consultant. A change to an alternative atypical antipsychotic e.g. quetiapine may be required
• Increase in hepatic enzymes	Refer to consultant
• Priapism; erectile, orgasmic and ejaculatory dysfunction	Refer to consultant.
• Tachycardia and hypertension	Reduce dose in conjunction with consultant.

OTHERS
Impaired concentration, body temperature deregulation, fall in neutrophil and/ or thrombocyte count, seizures, water intoxication

Ask about side effects at every consultation

Contraindications

- Patients with a known hypersensitivity to the product.
- Breastfeeding

Cautions

- Patients with cardiovascular disease.
- Patients with Parkinson's disease.
- Patients with epilepsy (incidence 0.3% in trials)
- Pregnancy

Drug Interactions

- Limited information
- Caution with other CNS drugs
- Risperidone may antagonise levodopa and other dopamine agonists
- Carbamazepine may reduce the plasma levels of risperidone. The dose of risperidone may need to be increased on induction and reduced on withdrawal of carbamazepine.

Reference
Summary of product characteristics 1999-2000
BNF 40

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