# Antipsychotic Drugs

#### **Antipsychotic Drugs:**

- The first effective drug to be used for the treatment of schizophrenia was chlorpromazine then a wide range of drug with differing potency and side effect profile has been introduced it is better to become familiar with small range of these drugs that will cover differing situations.
- The choice and dose depends on:
  - The severity
  - The required Sedation
  - The patient size
  - His medical condition .

#### **Mechanism Of Action:**

 D2 receptor antagonism which can be found principally in the limbic system.

 Most antipsychotics are non specific in thier site of action

 The new antipsychotics are probably more D2 specific antagonist so it has better side effects profile

#### **Side Effects:**

- Anti dopaminergic (extrapyramidal symptoms) mediated by D1 receptor .
  - Acute dystonia
  - Akathesia
  - Parkinsonism
  - Tardive dyskinesia
  - Amenorrhoea
  - Galactorrhoea

- Antiadrenergic
  - Postural hypotension
  - Sedation
- Anticholinergic
  - Constipation
  - Blurred vision
  - Precipitating glaucoma
  - Urinary retention
  - Dry mouth

- > Other side effects
  - ➤ Weight gain
  - **>** Dysrhythmia
  - Low seizure threshold
  - Chlorpromazin is associated with photosensitivity and cholestatic jaundice and Neotropenia
  - Thioredazine in high doses can cause retinitis pimentosa

#### **Atipical Antipsychotics (New...)**

➤ Are highly selective D2 blockers so cause fewer extrapyramidal symptoms e.g Olanzapine and Clozapine

# **Antianxiety (Anxiolytics)**

- Benzodiazepine act by enhancing the action of GABA
  - Anxiolytics (long half life)
  - > Hypnotics (short half life)

## **Anxiolytic Effects:**

 Reduced pathological anxiety ,agitation and tension but it is addictive

Should not be used more than one month

 Should be avoided in those with personality problems and those with history of substance abuse.

## **Hypnotics Effect:**

 Benzodiazipine inhibit REM sleep and a rebound increase REM is seen when they are discontinued

 Care must be taken not to be used regularly or long time

Avoid prescribing on discharge from hospital.

#### **Side Effects:**

- > Headache
- Confusion
- Ataxia
- Dysartheria
- Blurred vision
- Gl symptoms
- > Jaundice
- paradoxical excitement
- Loss of memory
- Depression
- can cause antero-grade amnesia
- Affecting driving performance
- > In I.V may cause respiratory depression

#### **Good Practice In Using Benzodiazepine:**

> Short term use

- Restrict to severe anxiety
- > To deal with a specific problem or event
- > Intermittent dosing
- > Lowest effective dose

# Thank You