Why has haloperidol been prescribed?
Haloperidol is an antipsychotic used to treat schizophrenia and a number of other conditions.

What are the benefits of taking haloperidol?
Antipsychotics are effective in reducing the symptoms of psychosis. They also shorten the time to recovery and help prevent relapses. Haloperidol has been in clinical use for more than 40 years.

Are there any precautions with haloperidol?
Haloperidol is suitable for most people. As with all medicines, however, there are precautions. Your prescriber will usually check that it is safe to prescribe haloperidol, but let your prescriber know if any of the following apply to you, as extra care may be needed:

a) If you suffer from heart, liver or kidney trouble.
b) If you are taking any other medication, especially medicines used for an irregular heart beat, diuretics or medicines used for Parkinson’s disease. Also, tell your prescriber if you buy any medicine ‘over the counter’ from a pharmacy or supermarket. Please also tell your prescriber if you take any alternative or complementary medicine such as Chinese herbal medicines.
c) If you are pregnant, breast feeding, or wish to become pregnant

What is the usual dose of haloperidol?
The starting dose is usually between 2mg and 10mg a day. This is sometimes increased slowly over a few weeks. The usual dose of haloperidol may be between 2mg and 20mg a day. It may take a few weeks to get to the dose that is most suitable for you.

How should haloperidol be taken?
Haloperidol is usually taken once a day, in the evening. Sometimes, it is taken twice or three times a day.

What form does haloperidol come in?
Haloperidol is available as tablets, capsules, liquid and injectable forms. The tablets are available as 0.5mg, 1.5mg, 5mg and 10mg. The liquid form of haloperidol is 1mg per ml or 2mg per ml. The injection is 5mg per ml. Depot injection is also available.

What should be done if a dose is missed?
If you forget a dose, take it as soon as you remember, as long as it is within a few hours of the usual time. If you miss a whole day’s dose – just carry on as normal with the usual dose the following day. If you miss more than a day’s dose, speak to your prescriber.

What will happen when haloperidol is first taken?
Haloperidol, like many medicines, does not work straight away. For example, it may take several days or even weeks for some symptoms to improve. To begin with, some people find that haloperidol may help them feel more calm and less anxious. Later, (usually in two or three weeks) other symptoms should begin to improve. Many people do not experience any side effects. However some people may experience side effects. We have listed potential side effects in the table below, whether or not they are likely to be short or long-term and
what measures can be taken is also described. There are other possible side effects – we have listed only the most important ones. Ask your doctor, pharmacist or nurse if you are worried about anything else that you think might be a side effect. Further information on side effects is available in the official manufacturer’s leaflet.

**Reporting side effects**
The “Yellow Card” scheme encourages patients to report any side effects that they feel may be caused by their medication. Ask your doctor, pharmacist, or nurse for the forms if you wish to report any side effects. Alternatively, telephone 0808 100 3352 or go to www.mhra.gov.uk.

**Is haloperidol addictive?**
No, haloperidol is not addictive. However, if you stop taking the medicine suddenly, you may experience unpleasant physical feelings.

**What about alcohol?**
It is recommended that people taking haloperidol should not drink alcohol. This is because both antipsychotics and alcohol can cause drowsiness. If the two are taken together, severe drowsiness can result. This can lead to falls and accidents. As well as this, drinking alcohol may make psychosis worse. However, once people are used to taking medication, then very small amounts of alcohol may not be harmful. It pays to be very careful, because alcohol affects people in different ways, especially when they are taking medication. Never drink alcohol and drive. Discuss any concerns you may have with your doctor, pharmacist or nurse.

**Is it OK to stop taking haloperidol when symptoms go away?**
No. If you stop taking haloperidol your original symptoms are very likely to return. Most people need to be on haloperidol for quite a long time, sometimes years. You should always discuss any plans you have to reduce or stop any of your prescribed medicines with your prescriber.

**Are there any alternatives to haloperidol?**
Yes, there are alternatives available. Overall, antipsychotics have broadly similar therapeutic effects, except for clozapine which is effective when other antipsychotics have failed. Antipsychotics differ in their side effects. With the range of medicines now available, a suitable and acceptable antipsychotic can usually be found for everyone.

**Summary of side effects**

- **Movements disorders – Common (trembling, muscle spasms)**
  
  **What can be done about it?**
  
  Another medicine may be prescribed to treat this. Treatment may be switched to another medicine which does not cause this side effect.
### Other (less common) side effects

<table>
<thead>
<tr>
<th>Other (less common) side effects</th>
<th>How common is it and what can be done about it?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impotence (men) – difficulty in getting an erection</td>
<td>Uncommon&lt;br&gt;Any changes should be reported to your prescriber. Treatment may be switched to another medicine which does not cause this side effect.</td>
</tr>
<tr>
<td>Breast growth and milk production (men and women)</td>
<td>Uncommon&lt;br&gt;Any changes should be reported to your prescriber. Treatment may be switched to another medicine which does not cause this side effect.</td>
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<tr>
<td>Drowsiness</td>
<td>Uncommon&lt;br&gt;This tends to wear off over time. If this persists tell your prescriber.</td>
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<tr>
<td>Abnormal movements (also known as tardive dyskinesia)</td>
<td>Uncommon&lt;br&gt;This occurs only after long term treatment. It usually begins with unusual movements of the mouth and tongue. Treatment may be switched to another medicine which is less likely to cause this side effect. Symptoms may go away when switched to another medicine.</td>
</tr>
</tbody>
</table>

Very common = almost everyone affected<br>Common = many people affected<br>Uncommon = some people affected<br>Rare = few people affected<br>Very rare = very few or no one affected
Disclaimer
This leaflet does not replace the official manufacturer’s Patient Information Leaflet.

For more information, visit www.slam.nhs.uk/meds or speak to a health care professional.

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