



Risperidone for

Behavioural and Psychological Symptoms of Dementia (BPSD)

(Pronounced riss-perri-done)

Why has risperidone been prescribed?

Risperidone is most commonly used to treat conditions such as schizophrenia and other similar conditions. However, it is sometimes used in people with dementia experiencing behavioural or psychological symptoms where other measures have not worked.

What are the benefits of taking risperidone?

Risperidone can be effective in reducing distress and can help you to feel more calm.

Are there any precautions with risperidone?

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

- If you have Parkinson's Disease or suffer from liver or kidney trouble.
- if you are taking any other medication, especially furosemide, antidepressants and anticonvulsants. 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.
- If you have intolerance to lactose the film coated tablets contain lactose however the dispersible tablets and liquid should not cause a problem.

What is the usual dose of risperidone?

The starting dose is usually 0.25mg or 0.5mg a day. This may be slowly increased after a few days or weeks. The usual dose of Risperidone is usually 1mg or 2 mg daily. It may take a few weeks to get to the dose that is most suitable.

How should risperidone be taken?

Risperidone is usually taken once or twice a day.

What form does risperidone come in?

Risperidone is available as tablets, dispersible tablets, liquid and long acting injection. The tablets are available as 0.5mg, 1mg, 2mg, 3mg, 4mg and 6mg, the dispersible tablets as 0.5mg, 1mg, 2mg, 3mg and 4mg. The liquid form is 1mg per 1ml. Long-acting 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 risperidone is first taken?

Risperidone, 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 risperidone makes them feel more calm and relaxed. Many people do not experience any side effects. However, some people may experience some 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 0800 100 3352 or go to www.mhra.gov.uk.

Is risperidone addictive?

No, risperidone 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 risperidone 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 risperidone when symptoms go away?

Risperidone is usually only used for short periods in dementia and should be reviewed regularly. 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 risperidone?

Yes, there are alternatives available. Overall, antipsychotics have broadly similar therapeutic effects but differ in their side effects. With the range of medicines now available, a suitable and acceptable antipsychotic can usually be found for everyone.

Other non-drug treatments that are person-centred can help. Paracetamol for pain can be very beneficial for some people. Reminiscence, music and dance therapy can be effective.

Summary of side effects



Insomnia - Common

What can be done about it?

This tends to wear off. Sometimes, sleeping tablets are prescribed.



Agitation or anxiety – Common (also known as akathisia)

What can be done about it?

This tends to wear off. Sometimes, medication for anxiety is prescribed. Treatment may be switched to another medicine which does not cause this side effect.



Headache - Common

What can be done about it?

This tends to wear off. Take paracetamol if necessary. Report to your prescriber if symptoms persist for more than a few days.

Other (less common) side effects	How common is it and what can be done about it?
Movement disorders – trembling, muscle spasms	Uncommon Another medicine may be prescribed to treat this. Treatment may be switched to another medicine which does not cause this side effect.
Weight gain	Uncommon Some people put on a few pounds Try to eat healthily and take exercise.
Impotence (men) – difficulty in getting an erection	Uncommon Any changes should be reported to the prescriber. Treatment may be switched to another medicine which does not cause this side effect.
Breast growth and milk production (men and women)	Rare Any changes should be reported to the prescriber. Treatment may be switched to another medicine which does not cause this side effect.

Abnormal movements (also known as tardive dyskinesia)	Rare 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.
Diabetes	Very rare It may be necessary to switch to another medicine.
Priapism (persistent and often painful erection which lasts for several hours)	Very rare Priapism is a medical emergency and you should seek medical help immediately.

Very common = almost everyone affected

Rare = few people affected

Common = many people affected

Very rare = very few or no one affected

Uncommon = some people affected

In older people with dementia, there is an increased risk of stroke with antipsychotic drugs. Stroke is a medical emergency. The FAST test can help you recognise the signs.

Facial weakness: Can the person smile? Has their mouth or eye drooped?

Arm weakness: Can the person raise both arms?

Speech problems: Can the person speak clearly and understand what you say?

Time to call 999: if you see any of these signs.

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.

Leaflet supplied by: Medicines Information, Pharmacy Department, Maudsley Hospital, London SE5 8AZ | Telephone: 020 3228 2317

Artwork by: Oscar Millar (www.millarstratton.co.uk)