Pipotiazine Palmitate
(pronounced pippo-thi-a-zine)

Why has pipotiazine palmitate been prescribed?
Pipotiazine palmitate is an antipsychotic used to treat schizophrenia and other similar conditions.

What are the benefits of taking pipotiazine palmitate?
It has been in use for more than 30 years. Antipsychotics are effective in reducing the symptoms of psychosis. They also shorten the time to recovery and help prevent relapses. The main advantage of a long-acting injection (or depot) is that there is no need to remember to take tablets daily. There is also less fluctuation in the amount of the drug in the body and as such side effects may be less than with the tablets or oral formulations.

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

a) If you are allergic to sesame oil (as this is an ingredient of the injection)
b) if you suffer from liver, heart, kidney or prostate problems or if you suffer glaucoma.
c) if you are taking any other medication, especially anticonvulsants, antibiotics, blood pressure tablets and medicines 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.
d) if you are pregnant, breast feeding, or wish to become pregnant.

What is the usual dose of pipotiazine palmitate?
The usual dose can vary from 50mg to 100mg. Pipotiazine palmitate is usually given every four weeks, but sometimes can be given every two or three weeks. It may take a few months to get to the dose that is most suitable.

How should pipotiazine palmitate be taken?
A small dose of 25mg is injected to test how your body responds. You will then be given a regular intramuscular injection which is administered by deep intramuscular injection into the muscle in the thigh or bottom. This will usually be given to you by a nurse on a ward, clinic or GP surgery.

What form does pipotiazine palmitate come in?
Pipotiazine palmitate is available as 50mg per ml in 1ml and 2ml ampoule sizes.

What should be done if a dose is missed?
The next injection should be given as soon as possible. This may mean making an extra appointment at the clinic or hospital.

What will happen when pipotiazine palmitate is first taken?
Pipotiazine palmitate like many medicines, does not work straight away. For example, it may take several days or even weeks for some symptoms to improve. You may remain on antipsychotic tablets for some weeks after the injection is first given. This is because the injection is released slowly into your body and takes some weeks to be effective. 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 0808 100 3352 or go to www.mhra.gov.uk.

Is pipotiazine palmitate addictive?
No, pipotiazine palmitate is not addictive. However, if you stop receiving the medicine suddenly, you may experience unpleasant physical feelings.
What about alcohol?
It is recommended that people receiving pipotiazine palmitate 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 receiving 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 receiving medication. Never drink any alcohol and drive. Discuss any concerns you may have with your doctor, pharmacist or nurse.

Is it OK to stop taking pipotiazine palmitate when symptoms go away?
No. If you stop receiving pipotiazine palmitate your original symptoms are very likely to return. Most people need to be on pipotiazine palmitate 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 pipotiazine palmitate?
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

<table>
<thead>
<tr>
<th>Side effect</th>
<th>Side effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Menstrual changes - Common (women) – periods may stop</td>
<td>Postural hypotension – Common (low blood pressure)</td>
</tr>
<tr>
<td>What can be done about it?</td>
<td>What can be done about it?</td>
</tr>
<tr>
<td>Any changes should be reported to the prescriber. Treatment may be switched to another medicine which does not cause this side effect.</td>
<td>Try not to stand up too quickly. If you feel dizzy do not drive. This dizziness is not dangerous and should wear off after a few days.</td>
</tr>
</tbody>
</table>

(Other less common) side effects

<table>
<thead>
<tr>
<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>
</tr>
<tr>
<td>Breast growth and milk production (men &amp; women)</td>
</tr>
<tr>
<td>Agitation and anxiety (also known as akathisia)</td>
</tr>
<tr>
<td>Movement disorders – trembling, muscle spasms</td>
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<tr>
<td>Drowsiness</td>
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<tr>
<td>Constipation</td>
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<tr>
<td>Dry mouth</td>
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<tr>
<td>Abnormal movements (also known as tardive dyskinesia)</td>
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</tbody>
</table>

Very common = almost everyone affected
Common = many people affected
Uncommon = some people affected
Rare = few people affected
Very rare = very few or no one affected