

## ANTIPSYCHOTIC AGENTS

### TYPICAL ANTIPSYCHOTICS:

- **LOW POTENCY:**
  - **Chlorpromazine (Thorazine)**
  - **Thioridazine (Mellaril)**
  - **SIDE EFFECTS:**
    - Anticholinergic side effects
    - Orthostasis
    - Photosensitivity
    - Cholestasis
    - Highly sedating
    - EPSE usually not prominent
    - Potential for delirium in elderly patients
- **MID-POTENCY:**
  - **Trifluoperazine (Stelazine)**
  - **Perphenazine (Trilafon)**
  - **SIDE EFFECTS:**
    - Fewer anticholinergic side effects
    - Fewer EPSE than with higher potency agents
    - Moderately sedating
  - Well tolerated by most patients
- **HIGH POTENCY:**
  - **Haloperidol (Haldol)**
  - **Fluphenazine (Prolixin)**
  - **Thiothixene (Navane)**
  - **SIDE EFFECTS:**
    - No anticholinergic side effects
    - EPSE often prominent

### ATYPICAL ANTIPSYCHOTICS (NOVEL AGENTS):

- **Clozapine (Clozaril):**
  - **SIDE EFFECTS:**
    - **AGRANULOCYTOSIS (1%)**
    - Weight gain
    - Seizures
    - Drooling
    - Hyperthermia
    - Moderately sedating
  - Requires weekly WBC (monitoring for neutropenia, agranulocytosis)
- **Risperidone (Risperdal):**
  - **SIDE EFFECTS:**
    - Orthostasis
  - Requires slow titration

- EPSE observed with high doses (i.e. greater than 6mg)
- **Olanzapine (Zyprexa):**
  - Generally well tolerated
  - Weight gain
  - Moderately sedating
- **Quetiapine (Seroquel):**
  - **SIDE EFFECTS:**
    - Sedation (high)
    - Weight gain
    - Anxiety