



# Clozapine Facts for Patients, Their Families and the Clinicians Who Care for Them

## Clozapine works for some schizophrenias in ways that other medications just can't

Almost every medication approved for the treatment of schizophrenia works by the same mechanism: decreasing dopamine signals. These dopamine-adjusting medications are very effective for about two thirds of the schizophrenias.

However, about a third of schizophrenias have little to do with dopamine over-activity. Clozapine is effective for about 60 percent of people with normal dopamine schizophrenia. The reason clozapine succeeds where other medicines fail is because clozapine addresses other causes of persistent psychosis.

How do you know if someone has a high-dopamine form of schizophrenia? Medication response patterns can be useful guides. If symptoms respond to dopamine-adjusting medications, it is quite likely that the psychosis is of the high-dopamine type. On the other hand, if symptoms have not improved much despite adequately-dosed dopamine-adjusting medications, then patients and their clinicians may want to consider clozapine.

## Clozapine restores lives

When asked how their lives had changed since taking clozapine, patients said:

It is easier to mix with people .....	<b>57%</b>	It allowed me to live independently .....	<b>43%</b>
I now enjoy socializing .....	<b>43%</b>	I have obtained employment .....	<b>7%</b>
It allowed me to leave the hospital .....	<b>53%</b>	My life has not changed .....	<b>11%</b>

Source: Taylor et al., 2000



*Before clozapine, I could read but not study.*

*- Bethany*



*Clozapine has allowed me to lead a productive life. I have a college degree and a paralegal certificate, and have been employed full-time for four years.*

*- Kirk*

## Most people who try clozapine prefer it to other medications

**86.1 percent** of patients surveyed said that clozapine was **better** or **much better** than their previous treatments.

When asked if they would prefer to stay on clozapine or return to a previous treatment, patients responded:

Stay on clozapine .....	<b>88.6%</b>	No response .....	<b>4.9%</b>
Go back to prior treatment .....	<b>6.5%</b>		

Source: Taylor et al., 2000

## Clozapine reduces suicide risk

Clozapine is the only medication recognized by the FDA as effective at reducing suicide risk in schizophrenia. In a study by Reid and collaborators, the suicide rate among patients receiving clozapine dropped to levels comparable with those of individuals without mental illness.

## Possible side effects of clozapine can be reduced, managed or prevented

Many of clozapine's side effects can be prevented by prescribing the lowest effective dose and by discontinuing medications that are not needed once clozapine reaches therapeutic levels. Knowing what to look for allows for early detection of potentially serious side effects and early intervention to prevent harm.

Most people fear the possibility of suppressing the white blood cell count with clozapine. This is why patients who are on clozapine are required to have weekly blood draws to monitor their white cell counts for the first six months, and then, if no drops in counts occur, biweekly blood draws for six months and then monthly blood draws. Because white blood cells are a first line of defense against infection, a drastic reduction in their numbers can lead to very serious infections. Although patients having small dips in white blood cell count while on clozapine is relatively common, most are temporary and insignificant. Having a medically serious white blood cell suppression from clozapine is actually rare (less than 1 percent). Getting an infection from such white cell count suppression is even rarer because the white blood cell count is measured frequently.

Constipation is the most common serious medical complication from clozapine, and in its most severe forms, constipation can lead to a medical emergency. It is important for patients to pay attention to the frequency of bowel movements and to take medications to ensure regular bowel movements if necessary.

Weight gain is a risk with clozapine, but can be minimized or prevented by diet and exercise, possibly combined with medications that promote weight loss.

This resource was developed by the Clozapine Assistance Service of the Best Practices in Schizophrenia Treatment (BeST) Center in the Department of Psychiatry at Northeast Ohio Medical University.

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