3-308 Side effects of antipsychotics

TIPS Question:

At the facility we use DOS to monitor behaviour onset, effectiveness of sedation. The following day Haldol IM has been used, a resident presents with increased lethargy, unsteady gait, head bent forward, but still occasional physical aggressive outburst. This resident is also on Zyprexa TID, Tegretal OD. Can this combination of meds be the cause of increased side effects?

What are the significant factors you have learned as a result of working through the six-question template?

- Identify possible causes through P.I.E.C.E.S.
- Follow up of behaviour onset through DOS.
- Change of approach.
- Importance of adequate communication to obtain better outcomes.

Response:

Yes, the medication that is most likely to cause these effects is Haldol +/- the others. Zyprexa, Tegretol, and Haldol can all cause problems with sedation and ataxia. Tegretol and Zyprexa are perhaps more sedating. Zyprexa can cause EPS; however the most relevant drug that causes extrapyramidal symptoms such as your head bent forward observation may be more likely due to the Haldol.

It should be noted that we often do not see acutely the effects of drugs, particularly antipsychotics. The side effects only may appear after a period of time. That is why in geriatric mental health we try to use the lowest dose possible and the least toxic medication in the elderly.

In fact, it has been noted with some antipsychotics that the extrapyramidal side effects such as akathisia or the Parkinson's effects may not be seen for days. Indeed, it may only be after a cumulative effect has occurred that we start to see the deleterious effects of medications given many days previously.

Please note: *TIPS information should be used similar to the way you would use information from a text book! TIPS is not intended to serve as an individual consultation service! P.I.E.C.E.S. participants should use this information in context and always work closely with the family physician involved in the care of the resident or client and with other Partners In Care to find solutions to individual resident/client issues.*