**Clozapine**

**PET scan of the temporal lobe of a hallucinating patient with schizophrenia**

**Generic and proprietary names**
- Clozapine.
- Clozaril.
- Denzapine.
- Zaponex.

**Action**
- Interferes with dopamine receptor binding.

**Classification**
- Atypical antipsychotic.

**Indications**
- Schizophrenia.
- Psychosis in Parkinson’s.
- Intolerance/unresponsiveness to conventional antipsychotics.

**Contraindications**
- Severe cardiac disorders.
- Active liver disease.
- Severe renal impairment.
- History of agranulocytosis or neutropenia.
- Bone marrow disorders.
- Paralytic ileus.
- Alcoholic and toxic psychoses.
- History of circulatory collapse.
- Drug intoxication.
- Coma or CNS depression.
- Uncontrolled epilepsy.
- Pregnancy or breastfeeding.

**Cautions**
- Other drugs that increase the QT interval.
- Cardiovascular disease.
- Older patients.
- Neutropenia and potentially fatal agranulocytosis.
- Avoid drugs that depress leucopoiesis.

**Common side-effects**
- Hypersalivation.
- Constipation, nausea, vomiting.
- Tachycardia, changes in ECG.
- Hypertension.
- Drowsiness, headache, blurred vision.
- Tremor, rigidity, convulsions.
- Extrapyramidal symptoms.
- Leucopenia, leucocytosis, agranulocytosis, eosinophilia.
- Temperature fluctuation/fever.
- Fatigue.
- Cholestatic jaundice, hepatitis, pancreatitis.
- Urinary incontinence/retention.
- Circulatory collapse, arrhythmias, myocarditis, pericarditis.
- Thromboembolism.
- Confusion, agitation, delirium.
- Restlessness.
- Diabetes mellitus.

**Rare side-effects**
- Intestinal obstruction.
- Dysphagia.
- Enlarged parotid gland.
- Fulminant hepatic necrosis.
- Hypercholesterolaemia, hypertriglyceridaemia.
- Thrombocytopenia, thrombocythaemia.
- Cardiac arrest, cardiomyopathy.
- Respiratory arrest.
- Interstitial nephritis.
- Priapism.
- Skin reactions.

**Administration**
- Tablets.

**Nursing considerations**
- Differential blood counts must be normal on commencement and monitored regularly.
- Due to potential for myocarditis and cardiomyopathy, patients should have:
  - Full physical examination and medical history;
  - Specialist examination if there are any cardiac problems;
  - Investigations for myocarditis or cardiomyopathy in the presence of tachycardia.
- Stop taking if cardiomyopathy or myocarditis is suspected.
- Use with caution in conjunction with drugs causing constipation.
- Withdraw drug over 14 days to prevent rebound psychosis.

**Patient teaching**
- Patients must immediately report symptoms of infection, especially flu-like symptoms.
- Avoid hot baths or showers as hypotension can occur.
- Oral hygiene is important to avoid oral candidiasis.
- Avoid overexposure to the sun as heatstroke can occur.

**References**

Nurses should refer to manufacturer’s summary of product characteristics and to appropriate local guidelines.