

Clozapine Fact Sheet for Primary Care Clinicians

- Clozapine is an atypical antipsychotic used for treatment resistant schizophrenia (TRS).
- Brand names are: Clozaril, Denzapine, and Zaponex
- All patients will be registered with mental health services and a clozapine monitoring service
- In Hampshire, clozapine can only be prescribed by psychiatrists and dispensed by hospitals (Royal South Hants & St. Mary's Hospitals). The supply is dependent on a satisfactory FBC.
- **Always inform the mental health team if you become aware of a patient experiencing any of the below:**

Serious Adverse Effects (RED FLAGS):

1. Constipation:

- Constipation is very common (~30% of patients) and can occur rapidly.
- Patients should be actively questioned, referencing the [Bristol Stool Chart](#), to identify constipation.
- Intestinal obstruction, faecal impaction and paralytic ileus are [potentially fatal](#) risks – **abdominal examination is required**
- The risk is exacerbated in patients on other constipating drugs such as hyoscine, procyclidine and opioids, those with a history of lower GI surgery, and in those over 60.
- Symptoms suggestive of bowel obstruction / paralytic ileus must be **urgently** further investigated at the local acute hospital
- In the absence of bowel obstruction and paralytic ileus, treat as constipation – stool softener and stimulants will be required, **do not use bulk-forming agents**
- Patients should be followed up within 48 hours with a view to escalation if constipation unresolved.

2. Neutropenia and agranulocytosis:

- Watch for signs of sore throat, fever, or bruising as clozapine can be associated with neutropenia and agranulocytosis.
- Patients presenting with signs of acute severe infection – urgent FBC indicated and **immediate referral to haematology / acute medical team**

3. Myocarditis and cardiomyopathy:

- There is an increased risk for patients on clozapine.
- Symptoms include hypotension, persistent tachycardia at rest, fever, flu-like symptoms, fatigue, dyspnoea (with increased respiratory rate) and chest pain.
- Symptoms suggestive of (new onset) heart failure or if myocarditis or cardiomyopathy are suspected - stop clozapine - immediate investigation is required at the local acute hospital

Other important information:

1. Unintentional Gaps in Treatment:

- Please do not let this occur without good reason, see obtaining clozapine below.
- If a clozapine patient requires hospital admission for any reason, please encourage them to take their clozapine supply with them.
- **If the patient has a > 48-hour gap in treatment (for whatever reason e.g., lack of supply, refusal, or problems swallowing), they will need to be re-titrated and must not restart at the same dose.**

2. Smoking Habit:

- Any change in smoking habit, **including changing from smoking to vaping, NRT or e-cigarettes (or vice versa)** should be reported to Mental Health Services as this can significantly influence clozapine levels which may require a change in dose.