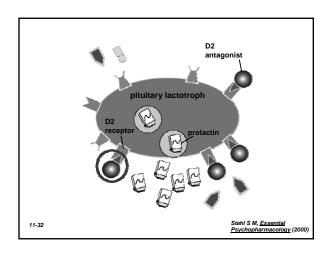
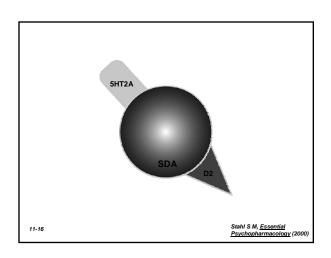
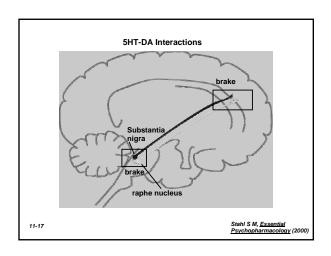


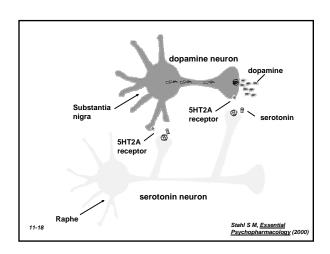
Moto	or and mental features of neuroleptic-
in	duced extrapyramidal side effects
Parkinsonism	Tremor (resting), rigidity, bradykinesia, masklike facies
Akathisia	Restlessness, pacing, fidgeting, shifting from jitteriness, anxiety, irritability, anger, difficulty concentrating
Dystonia	Muscle contractions, tongue protrusion, torticollis, opisthotonos, fear, distress, paranoia
Tardive	Buccolingual-masticatory movements of irregular
dyskinesia	(nonrhythmic) nature; choreiform or athetoid
	(writhing) movements of fingers, extremities, trunk
	Adapted from Avd 1995: Casev 1995

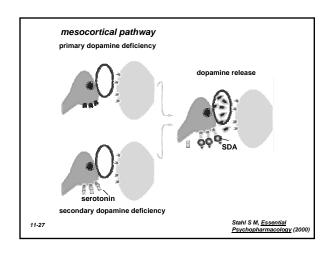


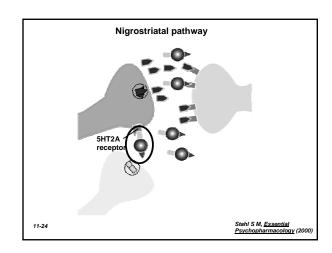
Typical antipsychotic drugs: potencies and side effect profiles										
Drug	Approximate dose (mg)	Sedative effect	Hypotensive effect	Anticholinergio	: Extrapyramida effect					
Phenothiazines										
Chlorpromazine (Thorazi	ne) 100	H	H	M	L					
Piperidines										
Thioridazine (Mellaril)	95	H	H	н	L					
Piperazines										
Fluphenazine (Prolixin)	2	M	L	L	н					
Perphenazine (Trilafon)	8	L	L	L	н					
Trifluoperazine (Stelazine	) 5	M	L	L	H					
Thioxanthene										
Thiothixene (Navane)	5	L	L	L	H					
Butyrophenones										
Haloperidol (Haldol)	2	L	L	L	н					

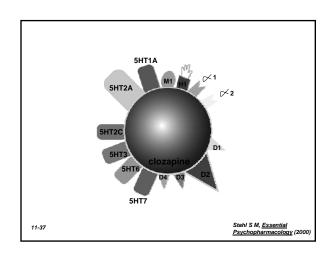


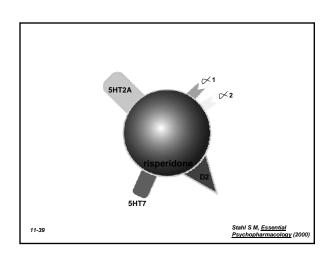


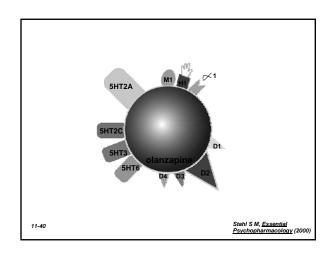


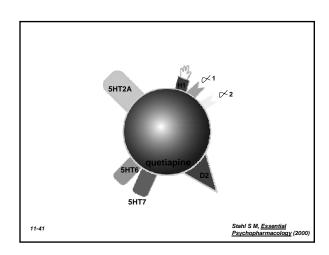


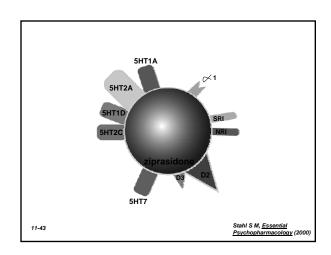












# Side effects of selected atypical agents

Table 4. Selected Side Effects of Commonly Used Antipsychotic Medications<sup>a</sup>

Medication	Extrapyramidal Side Effects/ Tandive Dyskinesia	Prolactin Elevation	Weight Gain	Glucose Abnormalities	Lipid Abnormalities	QTc Prolongation	Sedation	Hypotension	Anticholinergie Side Effects
Thioridazine	+	++	+	+?	+?	+++	++	++	++
Perphenazine	++	++	+	+?	+?	0	+	+	0
Haloperidol	+++	+++	+	0	0	0	++	0	0
Clozapine <sup>b</sup>	0c	0	+++	+++	+++	0	+++	+++	+++
Risperidone	+	+++	++	++	++	+	+	+	0
Olan za pine	0c	0	+++	+++	+++	0	+	+	++
Quetiapine <sup>d</sup>	0c	0	++	++	++	0	++	++	0
Ziprasidone	0c	+	0	0	0	++	0	0	0
Aripiprazole <sup>e</sup>	0c	0	0	0	0	0	+	0	0

V=No risk or rately cases side effects at the expentic dose. -Hild or occasionally cases side effects at the expentic dose. -Hire requests cases side effects at the expentic dose. -Hire requests cases side effects at the expentic dose. -That too limited to rate with confidence. Table adapted from Tables (9) with permission of current before, inc.

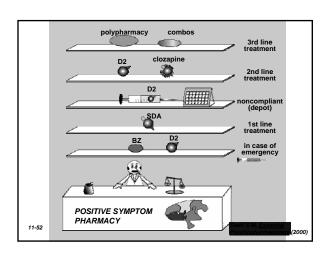
\*Also cases agranulocytosis, estares, and responsible.

\*Also care's warming about potential development of catanads.

\*Also care's warming about potential development of catanads.

\*Also care's warming about potential development of catanads.

\*Also cares warming about potential development of catanads.



# Hierarchy of Treatment Goals in Medical Psychotherapy of Schizophrenia

## • Acute Phase

- Medical/neuropsychiatric assessment
- Rapid symptom reduction
- Reduce impact of episode on friends, family, housing, activities

#### · Convalescent Phase

- Gain trust/alliance with family/caregivers
- Assess and mobilize social supports
- Ensure human service needs are met (food, clothing, housing)
- Ensure safety and predictability of environment

#### · Adaptive Plateau

- Establish therapeutic alliance/supportive treatment routine
   Achieve effective maintenance medication regime

## • Stable plateau

- Psychoeducation: Promote illness self-management strategies, awareness of relationship between stress and symptoms
   Rehabilitation: Teach adaptive competencies