

## **ZIPRASIDONE caps:**

**Class:** Atypical antipsychotic Agent

**Indications:** Treatment of schizophrenia; treatment of acute manic or mixed episodes associated with bipolar disorder with or without psychosis; maintenance treatment of bipolar disorder as an adjunct to lithium or valproate; acute agitation in patients with schizophrenia, Psychosis/agitation related to Alzheimer's dementia

**Available dosage form in the hospital:** CAP (40MD, 60MG, 80MG)

### **Dosage:**

**-Bipolar mania (acute):** Oral: Initial: 40 mg twice daily

*Adjustment:* May increase to 60 mg or 80 mg twice daily on second day of treatment; average dose 40-80 mg twice daily.

**-Bipolar disorder (maintenance; as adjunct to lithium or valproate):** Oral: Continue ziprasidone dose at which the patient was initially stabilized; usual dosage range: 40-80 mg twice daily

**-Schizophrenia:** Oral: Initial: 20 mg twice daily (U.S. labeling) or 20-40 mg twice daily (Canadian labeling)

*-Adjustment:* Increases (if indicated) should be made no more frequently than every 2 days; ordinarily patients should be observed for improvement over several weeks before adjusting the dose.

*-Maintenance:* Range: 20-100 mg twice daily; however, dosages >80 mg twice daily are generally not recommended.

**-Acute agitation (schizophrenia):** I.M.: 10 mg every 2 hours **or** 20 mg every 4 hours (maximum: 40 mg daily). Oral therapy should replace I.M. administration as soon as possible.

### **Geriatric**

No dosage adjustment is recommended; consider initiating at a low end of the dosage range, with slower titration.

### **Renal Impairment:**

-Oral: No dosage adjustment is recommended

-I.M.: Cyclodextrin, an excipient in the I.M. formulation, is cleared by renal filtration; use with caution. Ziprasidone is not removed by hemodialysis.

### **Hepatic Impairment:**

\**U.S. labeling:* No dosage adjustment is recommended; however, drug undergoes extensive hepatic metabolism and systemic exposure may be increased. Use with caution.

\**Canadian labeling:* Manufacturer labeling suggests that dose reductions should be considered but does not provide specific dosing recommendations.

### **Common side effect:**

Central nervous system: Extrapyramidal symptoms (2% to 31%), somnolence (8% to 31%), headache (3% to 18%), dizziness (3% to 16%)

Gastrointestinal: Nausea (4% to 12%)

**Pregnancy Risk Factor:** C