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SCHIZOPHRENIA Factsheet

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What is zuclopenthixol?

First generation 'typical' antipsychotics such as zuclopenthixol are an older class of antipsychotic than second generation 'atypical' antipsychotics. They are used primarily to treat positive symptoms including the experiences of perceptual abnormalities (hallucinations) and fixed, false, irrational beliefs (delusions). First generation antipsychotics may cause side effects which can differ depending on which antipsychotic is being administered and on individual differences in reaction to the drug. Reactions may include dyskinesias such as repetitive, involuntary, and purposeless body or facial movements, Parkinsonism (cogwheel muscle rigidity, pill-rolling tremor and reduced or slowed movements), akathisia (motor restlessness, especially in the legs, and resembling agitation) and dystonias such as muscle contractions causing unusual twisting of parts of the body, most often in the neck. These effects are caused by the dopamine receptor antagonist action of these drugs.

What is the evidence for zuclopenthixol?

Moderate to low quality evidence found no difference in study retention compared with placebo. There were fewer injections required with zuclopenthixol acetate than with first generation antipsychotic haloperidol, but no differences in the number of supplementary antipsychotics. Higher quality evidence found more people left the study early for any reason with zuclopenthixol compared to first generation antipsychotic chlorpromazine. Moderate to low quality evidence found more extrapyramidal symptoms with zuclopenthixol than with first generation antipsychotic perphenazine. Compared to second generation antipsychotic risperidone, moderate quality evidence found no differences in mental state or study retention. Moderate to low quality evidence found zuclopenthixol is associated with more parkinsonian symptoms than risperidone.

For more information see the technical table

NeuRA
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NeuRA (Neuroscience Research Australia) is one of the largest independent medical and clinical research institutes in Australia and an international leader in neurological research.

Diseases of the brain and nervous system pose the greatest health, economic and social burden of any disease group because they are chronic, debilitating and have no known cures.

Medical research is the cornerstone of efforts to advance the health and wellbeing of families and the community. Our dedicated scientists are focussed on transforming their research into significant and practical benefits for all patients.

While we hope you find this information useful, it is always important to discuss any questions about schizophrenia or its treatment with your doctor or other health care provider.

HOW YOUR SUPPORT HELPS

We are able to make significant advances due to the generosity of countless people. Your donation allows us to continue to work towards transforming lives. For information on how you can support our research, phone **1300 888 019** or make a secure donation at **neura.edu.au/donate/schizophrenia**.

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