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What is ziprasidone?

Second generation antipsychotics (sometimes referred to as 'atypical' antipsychotics) such as ziprasidone are a newer class of antipsychotic medication than first generation 'typical' antipsychotics. Second generation antipsychotics are effective for the positive symptoms of schizophrenia. It is sometimes claimed that they are more effective than first generation antipsychotics in treating the negative symptoms of schizophrenia, although the evidence for this is weak. Negative symptoms include a lack of ordinary mental activities such as emotional expression, social engagement, thinking and motivation, whereas positive symptoms include the experiences of perceptual abnormalities (hallucinations) and fixed, false, irrational beliefs (delusions). Second generation antipsychotics may also cause less extra-pyramidal side effects. These 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 ziprasidone?

High quality evidence suggests ziprasidone improves mental state more than placebo, although moderate quality evidence suggests ziprasidone causes more drowsiness and use of anti-parkinsonian medication. Ziprasidone results in better study retention than haloperidol (high quality evidence), and moderate quality evidence suggests ziprasidone may be less likely to cause a movement disorder, but may increase the incidence of gastrointestinal symptoms, than haloperidol.

Moderate to low quality evidence suggests ziprasidone had more participants leave the study early due to inefficacy than amisulpride. Moderate to high quality evidence suggests olanzapine improves mental state more than ziprasidone. High quality evidence suggests more people leave the study early for any reason, and there are more hospital readmissions with ziprasidone. Moderate quality evidence suggests ziprasidone had less weight gain than olanzapine and high quality evidence suggests more extrapyramidal symptoms with ziprasidone.

Moderate quality evidence suggests no difference in efficacy between quetiapine and ziprasidone for improving mental state. Moderate quality evidence suggests ziprasidone results in more extrapyramidal symptoms and more prolactin increase, but less weight gain, than quetiapine. Compared to peridone, high quality evidence suggests ziprasidone has lower study retention. Moderate quality evidence suggests ziprasidone is less effective for symptoms than risperidone. High quality evidence suggests ziprasidone should produce less weight gain, and less movement disorders than risperidone. Moderate quality evidence suggests less prolactin increase and less extrapyramidal side effects, but greater cholesterol increase, with ziprasidone 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.