



SHOULD YOU TAKE CLOZAPINE FOR YOUR SYMPTOMS?

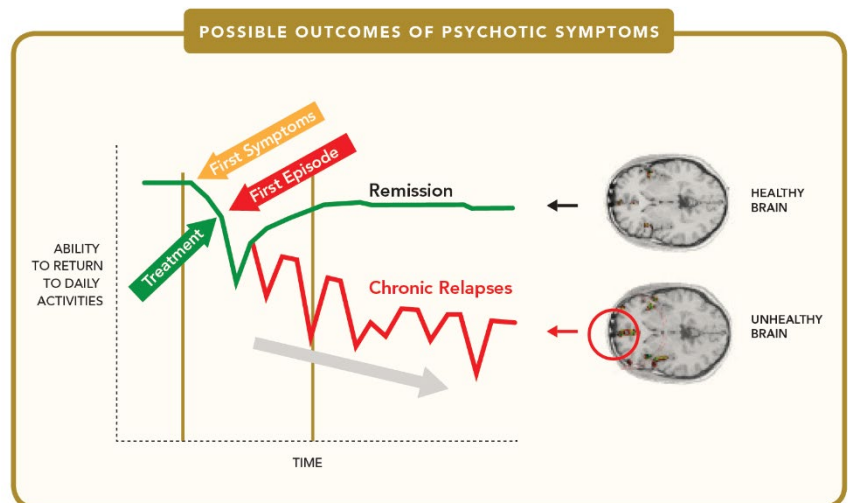
A decision aid for people with psychotic symptoms and their healthcare professionals to discuss antipsychotic medication options.

Why are you being offered clozapine for your symptoms?

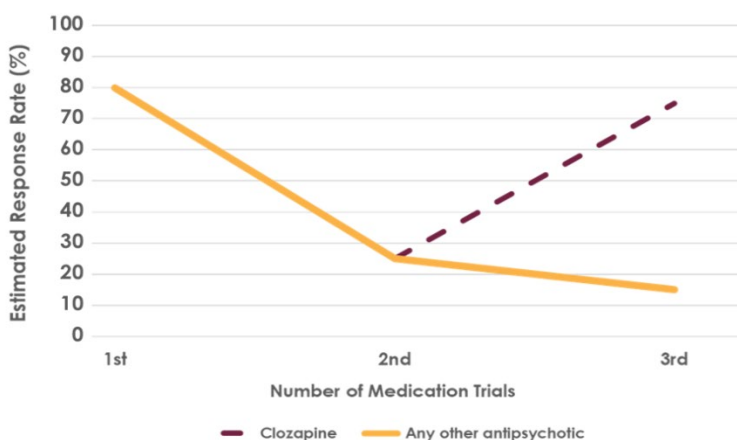
Your psychotic symptoms have not responded to the medications you have taken so far. Your symptoms affect your ability to function well at home, school or work, and in your social life. Medication is a vital part of treating your symptoms and restoring your ability to take part in everyday activities. Clozapine is the gold standard medication for people who have not responded well to two different medications, such as yourself.¹ The main goal of taking medication is to help you stay well so that you can function well, reach your full potential, and, of course, stay out of hospital. Taking medication that can adequately treat your symptoms, such as clozapine, is the best way to accomplish this.

What are the benefits of taking effective medications?

Being well is also called “remission”. If the medication you are taking does not fully treat your symptoms, you cannot function well. You may need to be in the hospital more often, as you will have worsening symptoms (relapses). Having relapses affects your brain health and prevents you from recovering fully, as shown in the graph to the side.



RESPONSE TO CLOZAPINE COMPARED TO ANY OTHER ANTIPSYCHOTIC



Clozapine reduces psychotic symptoms, risk of relapse, length of hospitalization, and mortality for people that have not shown a significant improvement in their symptoms with other antipsychotics.

After you have tried two different medications, trying any medication other than clozapine has a very low chance of making you feel better, roughly 10-20%. This is why we are suggesting that you try clozapine. Clozapine has a high chance of improving your symptoms, with a response rate of 60-77%.²



What you need to know about clozapine:

Common side effects: ^{3,4}

- Sedation (39%)
- Weight gain (31.3%)
- Increased saliva production (31%)
- Constipation (25%)
- Tachycardia (heart palpitations) (25%)

Percentages are approximated based on multiple studies.

Most of these side effects can be managed with a healthy lifestyle or by taking medication.

Rare and serious side effects (<1%):

- Reduction in white blood cells
- Inflammation of the heart muscle

Feel free to ask your treating team about other side effects that may occur.

Laboratory monitoring:

This medication requires regular laboratory monitoring to prevent a serious drop in white blood cells. At first, the blood tests are performed every week for the first 6 months, then every 2 weeks for months 7-12 of treatment. After the first year of treatment, blood tests are only every 4 weeks.

What are your options?

1. Decide to take clozapine.
2. Decide not to take clozapine. Talk to your doctor about other antipsychotic medication options.

¹ Khokhar, Jibrán Y et al. "Unique Effects of Clozapine: A Pharmacological Perspective." *Advances in pharmacology (San Diego, Calif.)* vol. 82 (2018): 137-162. doi:10.1016/bs.apha.2017.09.009

² Agid, Ofer et al. "Early use of clozapine for poorly responding first-episode psychosis." *Journal of clinical psychopharmacology* vol. 27,4 (2007): 369-73. doi:10.1097/jcp.0b013e3180d0a6d4

³ Clozaril product monograph. HLS Therapeutics Inc; Etobicoke, ON. January 23 2020. www.hlstherapeutics.com › monograph_pdf › HLS-Clozaril-PM-E

⁴ Meltzer, H. Y., Alphas, L., Green, A. I., Altamura, A. C., Anand, R., Bertoldi, A., Bourgeois, M., Chouinard, G., Islam, M. Z., Kane, J., Krishnan, R., Lindenmayer, J. P., Potkin, S., & International Suicide Prevention Trial Study Group (2003). Clozapine treatment for suicidality in schizophrenia: International Suicide Prevention Trial (InterSePT). *Archives of general psychiatry*, 60(1), 82-91. <https://doi.org/10.1001/archpsyc.60.1.82>