



SHOULD YOU TAKE MONTHLY MEDICATION FOR YOUR SYMPTOMS?

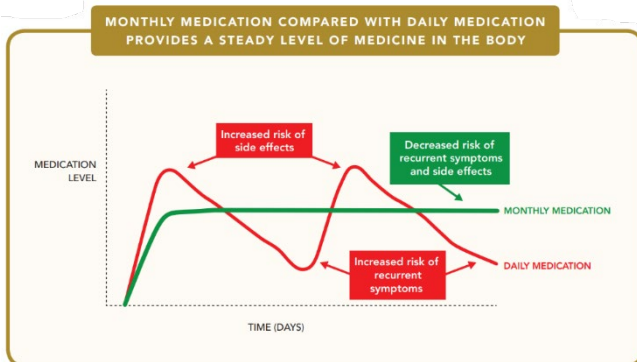
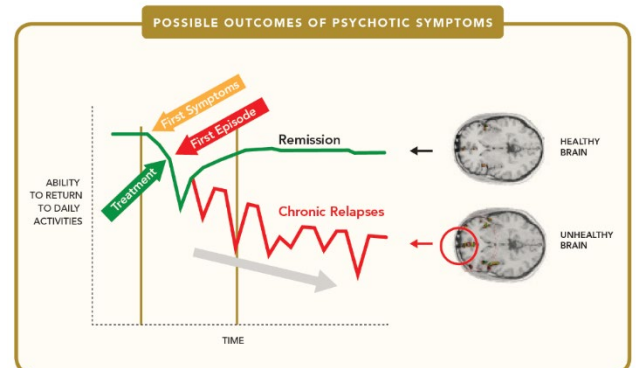
A consult decision aid for people with psychotic symptoms and healthcare professionals to discuss options.

Why are you being offered monthly medication for your symptoms?

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. The main goal of taking medication is to help you stay well so you can stay out of hospital. Starting medication when symptoms first happen is the best way to do this.

Uninterrupted medication helps you stay well.¹

- Being well is known as remission. This is shown in the graph titled "Possible Outcomes of Psychotic Symptoms".
- If you do not take medication for your symptoms, you cannot function well. You may need to be in hospital often, as you will have symptoms (relapses). Having relapses affects your brain and prevents full recovery. This is shown in the graph.



- Taking medication for your symptoms monthly provides steady levels of medication in the body, as shown in the graph titled "Monthly Medication Compared with Daily Medication Provides a Steady Level of Medication in the Body".²
- This way of giving medication may decrease side effects, such as sleepiness and weight gain, compared with daily oral medication.³ Daily medication is shown in the graph.

- Monthly medication may also increase effectiveness, as it decreases the risk of recurrent symptoms, compared with oral medication.
- With monthly medication, you receive less medication than with daily medication.



What are your options?

1. Take medication monthly.
2. Do not take medication monthly. Talk to your doctor about daily oral medication.

¹ Lieberman JA, Koreen AR, Chakos M, et al. Factors influencing treatment response and outcome of first-episode schizophrenia: implications for understanding the pathophysiology of schizophrenia. *J Clin Psychiatry*. 1996;57(Suppl 9):5-9.

² Sheehan JJ, Reilly KR, Fu D-J, Alphs L. Comparison of the peak-to-trough fluctuation in plasma concentration of long-acting injectable antipsychotics and their oral equivalents. *Innov Clin Neurosci*. 2012;9(7-8):17-23

³ Taylor D. Psychopharmacology and adverse effects of antipsychotic long-acting injections: a review. *Br J Psychiatry* 2009;(Suppl 52):S13-9.