

Just a Good Night's Sleep

This below is one drug being given to someone I know for 'seizures' which *'only happen when the patient is asleep.'*

The dose is now at 400mg HS

A local psychiatrist, the one who labelled me in eleven cost effective minutes and told my employer I was 'non compliant with no prospect of recovery', has, according to some of his patients, told those patients,

"None of these drugs we give you will ever do you any kind of harm whatsoever.'

NOTE: I do not mean to imply though that this one psychiatrist is markedly 'different' from any of the others though he is a bit faster in his 'diagnosing' than some. This likely makes him **MORE** efficient to the bio psych people, rather than less.

This is reality and this is **admitted** to, though not generally spoken of openly, by those who prescribe and manufacture these drugs. I want to point out that this drugging is more often done by force, than by choice, and often the patient will be escorted to the hospital by the police, sometimes in handcuffs for his/her 'medication.' I want all of you to **think** about this and to try imagining what it is like to be called 'ill' in this and to have that 'illness' **justify** the 'treatment.'

I want to make something else clear also.

If you are one of the people who is absolutely delighted and willing to swallow these drugs, then that is your choice. I am not speaking for you or about you. I have the same kind of attitude towards you, as I now do towards anyone, who swallows anything, to change the way he or she **feels** about it. If what you do is done **with fully informed choice, and 'choice' is the key word in that**, that is your business and I would not try to stop you. BUT, and that's my big but, do **not** ridicule me for speaking for myself or on behalf of those who are made ill, or who sometimes **die** because of these drugs, and who are **FORCED** to take them, often by **forced** injection. There but for the grace of God am I, and whether you understand it or not, there but for the grace of God are **YOU** too.

Chlorpromazine

Generic Name: chlorpromazine (oral) (klor PROE ma zeen)

Brand names: Thorazine, Ormazine

What is chlorpromazine?

Chlorpromazine is an anti-psychotic medication in a group of drugs called phenothiazines (FEEN-oh-THYE-a-zeens). It works by changing the actions of chemicals in your brain.

Chlorpromazine is used to treat **psychotic disorders** such as schizophrenia or manic-depression, and **severe behavioral problems in children**. It is also used to treat **nausea and vomiting, anxiety before surgery, chronic hiccups, acute intermittent porphyria, and symptoms of tetanus**.

Chlorpromazine may also be used for other purposes not listed in this medication guide.

What is the most important information I should know about chlorpromazine?

Stop using this medication and call your doctor at once if you have **twitching or uncontrollable movements of your eyes, lips, tongue, face, arms, or legs. These could be early signs of dangerous side effects**. Chlorpromazine is not for use in psychotic conditions related to dementia. **Chlorpromazine may cause heart failure, sudden death, or pneumonia in older adults with dementia-related conditions. Do not use chlorpromazine if you have brain damage, bone marrow depression, or are also using large amounts of alcohol or medicines that make you sleepy. Do not use if you are allergic to chlorpromazine or other phenothiazines.**

Before you take chlorpromazine, tell your doctor if you have liver or kidney disease, heart disease or high blood pressure, glaucoma, severe breathing problems, past or present breast cancer, low levels of calcium in your blood, adrenal gland tumor, enlarged prostate or urination problems, a history of seizures, Parkinson's disease, or if you have ever had a serious side effect while using chlorpromazine or similar medicines.

Before taking chlorpromazine, tell your doctor about all other medications you use.

What should I discuss with my healthcare provider before taking chlorpromazine?

Chlorpromazine is not for use in psychotic conditions related to dementia. Chlorpromazine may cause **heart failure, sudden death, or pneumonia in older adults with dementia-related conditions. Do not use chlorpromazine if you have brain damage, bone marrow depression, or are also using large amounts of alcohol or medicines that make you sleepy. Do not use if you are allergic to chlorpromazine or other phenothiazines such as fluphenazine (Permitil), perphenazine (Trilafon), prochlorperazine (Compazine, Compro), promethazine (Adgan, Pentazine, Phenergan), thioridazine (Mellaril), or trifluoperazine (Stelazine).**

If you have certain conditions, you may need a dose adjustment or special tests to safely use this medication. Before you take chlorpromazine, tell your doctor if you have:

liver or kidney disease;

heart disease or high blood pressure;

severe asthma, emphysema, or other breathing problem;

glaucoma;

past or present breast cancer;

low levels of calcium in your blood (hypocalcemia);

adrenal gland tumor (pheochromocytoma);

an enlarged prostate or urination problems;

a history of seizures;

Parkinson's disease; or

if you have ever had a serious side effect while using chlorpromazine or any other phenothiazine.

Tell your doctor if you will be exposed to extreme heat or cold, or to insecticide poisons while you are taking chlorpromazine.

It is not known whether chlorpromazine will harm an unborn baby.

Chlorpromazine may cause side effects in a newborn if the mother takes the medication during pregnancy. Do not take this medication without first talking to your doctor if you are pregnant. Tell your doctor if you become pregnant while taking chlorpromazine. Chlorpromazine can pass into breast milk and **may harm a nursing baby**. Do not use this medication without telling your doctor if you are breast-feeding a baby.

Talk with your doctor before giving this medication to a child who has been ill with a fever or flu symptoms.

How should I take chlorpromazine?

Take this medication exactly as prescribed by your doctor. Do not take it in larger amounts or for longer than recommended. Follow the directions on your prescription label. Your doctor may occasionally change your dose to make sure you get the best results from this medication.

This medication can cause you to have unusual results with certain medical tests. Tell any doctor who treats you that you are using chlorpromazine.

If you need to have any type of x-ray scan or MRI of your spinal cord, tell the doctor ahead of time that you are using chlorpromazine. You may need to stop using the medicine for a short time. **Do not stop using chlorpromazine suddenly after long-term use, or you could have unpleasant withdrawal symptoms such as nausea, vomiting, dizziness, or feeling shaky.**¹ Talk to your doctor about how to avoid withdrawal symptoms when you stop using chlorpromazine. Store chlorpromazine at room temperature away from moisture and heat.

What happens if I miss a dose?

Take the missed dose as soon as you remember. If it is almost time for your next dose, wait until then to take the medicine and skip the missed dose. Do not take extra medicine to make up the missed dose.

What happens if I overdose?

¹ Not to mention psychosis PL

Seek emergency medical attention if you think you have used too much of this medicine. **Overdose symptoms may include dry mouth, constipation, bloating or stomach cramps, feeling restless or agitated, fever, seizure, muscle stiffness, jerky muscle movements, changes in heart rate, extreme drowsiness, and fainting.**

What should I avoid while taking chlorpromazine?

Chlorpromazine can cause side effects that **may impair your thinking or reactions**. Be careful if you drive or do anything that requires you to be awake and alert. **Avoid getting up too fast from a sitting or lying position, or you may feel dizzy.** Get up slowly and steady yourself to prevent a fall. Avoid drinking alcohol. It can increase some of the side effects of chlorpromazine. Avoid exposure to sunlight or tanning beds. Chlorpromazine can make your skin more sensitive to sunlight, and a sunburn may result. Wear sunscreen (SPF 15 or higher) and protective clothing if you must be outdoors.

Chlorpromazine side effects

Get emergency medical help if you have any of these signs of an allergic reaction: **hives; difficulty breathing; swelling of your face, lips, tongue, or throat.** Stop taking chlorpromazine and call your doctor at once if you have a serious side effect such as:

twitching or uncontrollable movements of your eyes, lips, tongue, face, arms, or legs;

tremor (uncontrolled shaking), drooling, trouble swallowing, problems with balance or walking;

feeling restless, jittery, or agitated;

feeling like you might pass out;

seizure (black-out or convulsions);

nausea and stomach pain, skin rash, and jaundice (yellowing of the skin or eyes);

pale skin, easy bruising or bleeding, fever, sore throat, flu symptoms;

high fever, stiff muscles, confusion, sweating, fast or uneven heartbeats, rapid breathing;

unusual thoughts or behavior;

decreased night vision, tunnel vision, watery eyes, increased sensitivity to light;

urinating less than usual or not at all;

**joint pain or swelling with fever, swollen glands, muscle aches, chest pain, vomiting, unusual thoughts or behavior, and patchy skin color;
or**

slow heart rate, weak pulse, fainting, slow breathing (breathing may stop).

Less serious side effects may include:

dizziness, drowsiness, anxiety, sleep problems (insomnia);

breast swelling or discharge;

changes in menstrual periods;

weight gain, swelling in your hands or feet;

dry mouth or stuffy nose, blurred vision;

constipation; or

impotence, trouble having an orgasm.²

This is not a complete list of side effects and others may occur. Tell your doctor about any unusual or bothersome side effect. You may report side effects to FDA at 1-800-FDA-1088.

Older adults may be more likely to have side effects from this medication.

² Of course if death occurs, as a side effect, there is no need to call your doctor.

Chlorpromazine Dosing Information

Usual Adult Dose for Psychosis:

IM: Initial Dose 25 to 50 mg. The dose may be repeated in one hour. Subsequent doses may be increased and given every 2 to 4 hours as needed.

Oral: Initial Dose: 10 to 25 mg orally 3 times a day. Total daily doses should be increased in 20 to 50 mg increments every 3 or 4 days until symptoms are controlled.

Usual Maintenance Dose: 200 mg/day orally

Some patients require higher dosages (e.g., 800 mg daily is not uncommon in discharged mental patients). Increase dosage gradually until symptoms are controlled. Maximum improvement may not be seen for weeks or even months. Continue optimum dosage for 2 weeks, then gradually reduce dosage to the lowest effective maintenance level.

Usual Adult Dose for Mania:

Oral: 10 mg orally 3 to 4 times a day or 25 mg orally 2 to 3 times a day. More severe cases: 25 mg orally 3 times a day.

After 1 to 2 days, dose may be increased by 20 to 50 mg/day at semiweekly intervals.

Prompt control of severe symptoms: 25 mg IM one time.

If necessary, repeat in 1 hour. Subsequent doses should be oral, 25 to 50 mg three times a day.

IM: 25 mg injection one time. If necessary, may give additional 25 to 50 mg injection in 1 hour.

Increase subsequent doses gradually over several days up to 400 mg every 4 to 6 hours in exceptionally severe cases.

Usually patient becomes quiet and cooperative within 24 to 48 hours and oral doses may be substituted.

Oral: 500 mg/day is generally sufficient. Gradual increases to 2000 mg/day or more may be necessary.

There is usually little therapeutic gain to be achieved by exceeding 1000 mg/day for extended periods.

Less acutely disturbed Oral: 25 mg three times a day.

May increase gradually until effective dose is reached, usually 400 mg/day.

Usual Adult Dose for Nausea/Vomiting:

Oral: 10 to 25 mg every 4 to 6 hours as needed. May increase, if necessary.

IM: 25 mg one time. If no hypotension occurs, give 25 to 50 mg every 3 to 4 hours as needed, then switch to oral dosage.

Rectal: One 100 mg suppository every 6 to 8 hours as needed. In some patients, half this dose will do.

Nausea/Vomiting During Surgery:

IM: 12.5 mg one time. May repeat in 30 minutes if necessary and if no hypotension occurs.

IV: 2 mg at 2 minute intervals. Do not exceed 25 mg. Dilute to 1 mg/mL.

Usual Adult Dose for Light Sedation:

For light sedation prior to a medical or surgical procedure:

Oral: 25 to 50 mg, 2 to 3 hours before the operation.

IM: 12.5 to 25 mg, 1 to 2 hours before operation.

Usual Adult Dose for Hiccups:

Oral: 25 to 50 mg 3 to 4 times a day.

IM: If symptoms persist for 2 to 3 days, give 25 to 50 mg IM.

IV infusion: Should symptoms persist, use slow IV infusion: 25 to 50 mg in 500 to 1000 mL of saline.

Usual Adult Dose for Porphyria:

Oral: 25 to 50 mg 3 to 4 times a day.

Can usually be discontinued after several weeks, but maintenance therapy may be necessary for some patients.

IM: 25 mg injection 3 to 4 times a day until patient can take oral therapy.

Usual Adult Dose for Tetanus:

IM: 25 to 50 mg given 3 to 4 times daily, usually in conjunction with barbiturates. Total doses and frequency of administration must be determined by the patient's response, starting with low doses and increasing gradually.

IV: 25 to 50 mg diluted to at least 1 mg/mL and administered at a rate of 1 mg/min.

What other drugs will affect chlorpromazine?

Cold or allergy medicine, sedatives, narcotic pain medicine, sleeping pills, muscle relaxers, and medicine for seizures, depression or anxiety can interact with chlorpromazine and cause medical problems or increase side effects. Tell your doctor if you regularly use any of these medicines, or any other anti-psychotic medications.

Also tell your doctor if you are using any of these:

atropine (Atreza, Sal-Tropine);

lithium (Eskalith, Lithobid);

phenytoin (Dilantin);

an antibiotic;

birth control pills or hormone replacement estrogens;

blood pressure medication;

a blood thinner such as warfarin (Coumadin);

certain asthma medications or bronchodilators;

incontinence medications;

insulin or diabetes medications you take by mouth;

medication for nausea, vomiting, or motion sickness;

medications to treat or prevent malaria;

medications used for general anesthesia;

medicines used to prevent organ transplant rejection;

numbing medicine such as lidocaine or Novocain;

a stimulant or ADHD medication;

ulcer or irritable bowel medications; or

medicines to treat Parkinson's disease, restless leg syndrome, or pituitary gland tumor (prolactinoma).

This list is not complete and there are many other medicines that can interact with chlorpromazine. Tell your doctor about all your prescription and over-the-counter medications, vitamins, minerals, herbal products, and drugs prescribed by other doctors. Do not start a new medication without telling your doctor. Keep a list with you of all the medicines you use and show this list to any doctor or other healthcare provider who treats you.

Where can I get more information?

Your pharmacist can provide more information about chlorpromazine.

You can also 'Google' or 'Bing' your drugs for more information about their harmlessness...