

Trifluoperazine (pron. try-flew-o-pair-a-zeen)

What is trifluoperazine used for?

Trifluoperazine (sometimes known by its old trade name Stelazine[®]) is usually used to help treat psychosis, which can be a symptom of many conditions e.g. schizophrenia and bipolar mania. It can also be used to help the symptoms of ADHD, psychotic depression, agitation and OCD, as well as anxiety, tension and agitation. It is one of a group of medicines known as antipsychotics or neuroleptics. It is made as tablets and a liquid.

What is the usual dose of trifluoperazine?

The usual dose of trifluoperazine is around 5-15mg a day, but this depends on what it is being used for.

How should I take trifluoperazine?

Swallow the tablets with at least half a glass of water whilst sitting or standing. This is to make sure that they reach the stomach and do not stick in your throat. For the liquid, use a medicine spoon or oral syringe.

When should I take trifluoperazine?

Take your trifluoperazine as directed on the medicine label. Try to take it at regular times each day. Taking it at mealtimes may make it easier to remember as there is no problem about taking it with or after food. If the label says to take it once a day this is usually best at bedtime as it may make you drowsy at first.

What are the alternatives to trifluoperazine?

This will depend on what you are taking it for. There are many other antipsychotics and medicines, therapies and treatments for psychosis and agitation. See our "Handy charts" to help you compare the medicines, how they work and their side effects.

How long will trifluoperazine take to work?

Usually there will be some effect within a few days, with the effect building over 3-4 weeks. However, this will depend on what you are taking it for. Please look at one of the "Handy charts" for more help and advice on how long you might need to take it for before it works.

How long will I need to keep taking trifluoperazine for?

This will really depend on what you are taking it for. Please look at one of the "Handy charts" for more help and advice on how long you might need to take it for.

Is trifluoperazine addictive?

Trifluoperazine is not addictive as such. If you have taken them for a long time you may get some effects if you stop them suddenly. So-called "cholinergic rebound" can occur with trifluoperazine if stopped suddenly e.g. feeling sick, tiredness, sweating, anxiety and insomnia. It is usually mild and only last a few days. It is best to stop trifluoperazine slowly to let your brain get used to the change.

Can I stop taking trifluoperazine suddenly?

It is unwise to stop taking it suddenly, even if you feel better. Your symptoms can return if treatment is stopped too early. This may occur some weeks or even months after trifluoperazine has been stopped. When the time comes, you should withdraw trifluoperazine by a gradual reduction in the dose over several weeks or longer. You should discuss this fully with your doctor, nurse or pharmacist.

What should I do if I forget to take a dose of trifluoperazine?

Take the missed dose as soon as you remember unless it is within about 4-6 hours of your next dose. If you remember after this just take the next dose as normal. Do not try to catch up by taking two doses at once as you may get more side-effects. If you have problems remembering your doses (as very many people do) ask your pharmacist, doctor or nurse about this. There are some special packs, boxes and devices that can be used to help you remember.

Can I drink alcohol while I am taking trifluoperazine?

If you drink alcohol while taking trifluoperazine it may make you feel more sleepy. This is particularly important if you need to drive or operate machinery and you must seek advice on this.

Will trifluoperazine affect my other medication?

Trifluoperazine has a few interactions with other medicines. Trifluoperazine has many side effects. If it is taken with other medicines with the same side effects, then a combined effect can occur.

- Trifluoperazine can have more side effects (such as dry mouth, blurred vision, constipation and difficulty passing urine) if taken with tricyclics (e.g. dosulepin/dothiepin, imipramine) or anticholinergics (e.g. orphenadrine)
- Antipsychotics can also affect the heart (so be careful with amiodarone, disopyramide, clarithromycin)
- Beta-blockers, fluoxetine, itraconazole or venlafaxine can increase the effects of trifluoperazine
- Trifluoperazine can be quite sedative, so be careful with sleeping tablets, tricyclics (e.g. dosulepin, imipramine, lofepramine), older antihistamines (e.g. promethazine), benzodiazepines (e.g. diazepam, lorazepam, temazepam), phenobarbital, melatonin or alcohol.

- Antacids (sometimes), carbamazepine, rifampicin or smoking can decrease the effect of trifluoperazine
- You should have no problems with "The Contraceptive Pill" and trifluoperazine

Not all of these interactions happen in everyone. Some of these medicines can still be used together but you will need to follow your doctor's instructions carefully. There are many other possible drug interactions.

What sort of side-effects might occur if I am taking trifluoperazine?

The table below will show you some of the main side effects you might get from trifluoperazine.

Side effect	What happens	What to do about it
COMMON (<i>more than about 1 in 10 people might get these</i>)		
Sleepiness	Feeling sleepy or sluggish after taking a dose.	Do not drive or use machinery. It may be possible to change your dose or medicine.
Movement disorders (extra-pyramidal side effects)	Having shaky hands. Your eyes and tongue may move on their own. You may feel very restless, or stiff.	It is not usually dangerous but is a well known side effect. If it is distressing or worries you, tell your doctor. He or she may be able to give you something for it e.g. an anticholinergic medicine.
Constipation	When you want to poop but can't (the opposite of diarrhoea). You can't pass a motion.	Make sure you eat enough fibre, cereal or fruit and drink enough fluid. Keep active and get some exercise e.g. walking. If this does not help, ask your doctor or pharmacist for a mild laxative.
Dry mouth	Not enough saliva or spit.	Suck sugar-free boiled sweets. This should wear off after a few weeks. You may be able to get a mouth spray.
Blurred vision	Things look fuzzy and you can't focus properly.	Do not drive with blurred vision. This may wear off after a few weeks. See your doctor about this if it does not.
Weight gain	Eating more and putting on weight.	A diet full of vegetables and fibre may help prevent weight gain.
FAIRLY COMMON (<i>less than about 1 in 10 people might get these</i>)		
Raised prolactin (hyper-prolactinaemia)	It can affect breasts (including milk being leaked) and periods in women, or cause impotence and chest changes in men.	It can be very distressing. Discuss with your doctor when you next see him or her as it may possibly even affect your bones if prolactin is raised for a long time.
Hypotension	Low blood pressure. You may feel faint when you stand up.	Try not to stand up too quickly. If you feel dizzy, don't drive. Discuss with your doctor when you next see him or her.
Palpitations	A fast heart beat.	It is not usually dangerous. It can easily be treated if it lasts a long time.
Sexual dysfunction	Finding it hard to have an orgasm. No desire for sex.	Discuss with your doctor.
UNCOMMON (<i>less than about 1 in 100 people might get these</i>)		
Photosensitivity	Going blotchy in the sun or getting sunburnt easily.	Avoid direct sunlight or sun-lamps. Use a high factor sun block cream.
Skin rashes	Rash seen anywhere.	Stop taking the trifluoperazine and see your doctor now.

Do not be worried by this list of side effects. Some people get no side effects at all and others may get some effects that are not listed in this table. If you think you might have a side effect to your medicine, you should ask your doctor, nurse or pharmacist. If you want to know more, go to our website for links to other websites with more information.

Will I need a blood test if I am taking trifluoperazine?

Some people who need to take higher doses occasionally need a blood test e.g. to check on some possible side effects such as prolactin levels, blood sugar etc. You might also need your blood pressure tested.

Can I drive while I am taking trifluoperazine?

You may feel sleepy and have slower reactions at first when taking trifluoperazine. It may slow down your reaction times. Until this wears off, or you know how trifluoperazine affects you, do not drive or operate machinery.

Prepared for you by Choice and Medication

This leaflet is to help you understand about your medicine. It is not a manufacturer's Patient Information Leaflet. You may find lots more on the internet but beware as internet-based information is not always accurate. The "Handy charts" will help you compare the main medicines for each condition, how they work and their side effects.