

Asenapine

Saphris / Secuado

Two ways to take the same medicine. The instructions are different, and they matter.

From Jeffrey Panko, PMHNP-BC's education collection ·

Draft for review · Clinical content has not been revalidated for this website.

UNDER THE TONGUE OR SKIN PATCH

ASK WHICH FORM YOUR PLAN USES

Saphris: usually twice daily. Secuado: one patch every 24 hours.
Do not switch forms or doses yourself.

What it is used for

Saphris treats schizophrenia and bipolar I mania or mixed episodes; it also supports adult bipolar I maintenance.

Secuado patch is approved only for adult schizophrenia.
Neither form is approved for bipolar depression.

How it works

It affects dopamine and serotonin signaling involved in perception and mood. This can reduce psychosis or mania symptoms.

The tablet absorbs through the mouth lining; the patch through skin. Swallowing a tablet greatly reduces absorption.

What to expect over time

FIRST DAYS

Taste changes or brief mouth numbness can occur with tablets. Sleepiness or dizziness may also appear.

OVER WEEKS

Track sleep, distress, thoughts and daily activities. Tell your team about restlessness or limited benefit.

ONGOING CARE

Keep checking weight, blood sugar, movement and how treatment fits your day.

Taking your medication

Tablet: with dry hands, place under the tongue to dissolve. Do not split, crush, chew or swallow it. No food or drink for 10 minutes.

Patch: remove the old one first. Apply one whole patch to clean, dry, intact hip, abdomen, upper arm or upper back skin. Rotate sites daily.

Never cut a patch or put a heating pad over it. Read the full patch instructions. Do not change your dose or stop without a plan.

When to get help

Stop and get emergency help: tongue/throat swelling or breathing trouble, even after the first dose; or fever with severe stiffness and confusion.

Emergency help: collapse, seizure, severe choking, or dangerous confusion with heavy thirst and frequent urination.

Prompt advice: new involuntary movements, severe restlessness, fever/infection, fainting, or a major worsening of mood.

Early side effects

Temporary mouth tingling or altered taste is common with tablets. Report persistent sores or swallowing trouble. Sleepiness, dizziness and patch-site itching can occur.

Other effects to discuss

Discuss weight gain, stiffness, tremor, restlessness, changed periods, milk production or sexual problems. Do not assume these must be tolerated.

What to keep track of

Checks include weight, blood pressure, blood sugar, cholesterol and movement. Heart or blood-count tests depend on your risks. Report skin or mouth problems, excess sleepiness or emotional flatness.

Before you start

Mention severe liver disease, allergies to asenapine or patch ingredients, heart-rhythm problems, fainting, low blood counts, seizures, diabetes, swallowing trouble and pregnancy or nursing. Older adults with dementia have increased risks; this medicine is not approved for dementia-related psychosis.

Medicines & interactions

Fluvoxamine and paroxetine

These can require dose changes by your prescriber. Do not adjust either medicine yourself.

Alcohol, opioids and sleep or allergy aids

These add sleepiness and impairment. Avoid alcohol and check combinations with your team.

Heart-rhythm and blood-pressure medicines

Some raise rhythm or fainting risks. Include every prescription, supplement and nonprescription remedy.

Heat and patch use

Keep hair dryers, heating pads and electric blankets away from the patch; heat increases absorption. Avoid overheating with either form.

Everyday tips

Tablets: set a reminder for the 10-minute food/drink wait. Ask for help if the taste or timing makes doses difficult.

Patch: check adhesion daily. Showering is allowed; avoid baths/swimming. Wash hands after applying; read the supplied instructions.

If a patch falls off, use a new one on a different site, then return to the normal change schedule. Never wear two at once.

Stand up slowly. Avoid driving until you know how alert and steady you feel. Keep follow-up appointments even when doing well.

Your questions, answered

What if I miss a tablet?

Take it when remembered unless the next dose is nearly due; then skip it. Never double. Ask your pharmacist about a missed patch change.

Is mouth numbness an allergy?

Brief tingling can be expected. Swelling, wheezing or breathing trouble is different: stop and get emergency help.

Can I stop or change forms?

Make a plan with your prescriber. Sudden stopping may bring symptoms back. Tablet and patch doses are not interchangeable numbers.

What about pregnancy or nursing?

Discuss benefits, risks and feeding with your team. Do not stop abruptly if pregnancy occurs; contact your prescriber promptly.

Storage & safety

Store at room temperature in the original packaging, away from children and pets. Fold used patches sticky sides together and discard safely; they still contain medicine. For extra doses or patches, call Poison Control (US: 1-800-222-1222); call 911 for severe symptoms.

A final reminder

Keep the manufacturer's patch Instructions for Use. Diagrams are simplified and do not predict individual benefit.

About this information

For general information only; not a substitute for individualized medical advice. This sheet does not cover every risk or interaction. Ask your prescriber or pharmacist before changing how you take this medication.

Sources

1. <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=5429f134-839f-4ffc-9944-55f51238def8>
 2. <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=685eaf44-5944-4f38-afba-0a4fc0b3462b>
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Educational inclusion does not mean this medication or its indications are treated at this practice. Review the guide for your exact product with your prescriber or pharmacist.

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Jeffrey Panko, PMHNP-BC