

Chlorpromazine

Thorazine • tablets: 10, 25, 50, 100 and 200 mg

An older antipsychotic with several other uses. The goal is symptom relief without burdensome sleepiness or other harms.

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

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

RISE SLOWLY · AVOID ALCOHOL

PROTECT YOUR SKIN FROM SUN

Thorazine is a former US brand. Follow your prescribed formulation and schedule; injection instructions differ.

What it is used for

Uses include schizophrenia, other psychoses, mania, nausea, vomiting and persistent hiccups.

Other labeled uses are specialized. Anxiety or insomnia use is off-label and limited by risks. Ask about your goal.

How it works

Blocks dopamine signals, helping reduce psychotic symptoms and nausea.

Other actions cause sleepiness, low standing BP and dry mouth. Low potency does not mean weak benefit or low risk.

What to expect over time

EARLY DAYS

Sleepiness or dizziness can arrive before symptom relief. Being heavily sedated is not proof that treatment is working.

OVER WEEKS

Psychosis or mania may improve gradually. Review thinking, sleep and daily function, not just whether you feel calmer.

ONGOING CARE

Benefits and harms need regular review. Movement, weight and eye checks remain important; low doses are not risk-free.

Taking your medication

Use only your prescribed schedule. Ask before moving doses to bedtime or using extra doses for sleep. Some prescriptions are as-needed, with specific limits.

Avoid alcohol. Do not drive until you know your response. Rise slowly; ask for help if dizzy. Avoid overheating and use sunscreen, clothing and shade.

Do not abruptly stop long-term treatment. Agree on a taper. Missed-dose advice is on the “Your questions, answered” section; never double doses.

When to get help

Emergency care: fever with stiffness/confusion, seizure, collapse, breathing or swallowing trouble, or severe allergy. Sudden neck, jaw or eye spasms need urgent care.

Urgent assessment: fainting, palpitations, severe constipation/belly pain, inability to urinate, jaundice, severe rash or an erection lasting 4 hours.

Call promptly: fever/sore throat, new involuntary movements or worsening mood. Immediate self-harm danger needs emergency help.

Early side effects

Sleepiness, dry mouth, constipation, blurred vision and dizziness can occur. Dental care, fluids and a bowel plan may help. Report sedation, falls or persistent constipation.

Other effects to discuss

Report weight, sexual or menstrual changes, breast discharge, restlessness or new movements. Prolonged higher doses can affect skin and eyes; report vision changes promptly.

What to keep track of

Check movements, weight, blood sugar, cholesterol and sitting/standing BP. Blood counts, liver tests, ECGs and eye exams depend on risk and symptoms. Prior low white cells need closer checks.

Before you start

Discuss heart disease, fainting, seizures, liver/kidney disease, low white blood cells, breathing problems, constipation, urinary trouble, glaucoma, Parkinson disease or Lewy body dementia. Mention prior phenothiazine reactions, planned surgery and all medicines. It raises death risk in older adults with dementia-related psychosis and is not approved for that use. Children's regimens need a separate specialist plan.

Medicines & interactions

Alcohol and sedating medicines

Avoid alcohol. Opioids, benzodiazepines, sleep aids and sedating antihistamines can worsen drowsiness, falls and breathing risk.

Blood pressure, heart rhythm and bladder medicines

Some combinations increase fainting, rhythm problems, constipation, confusion or urinary trouble. Ask about OTC allergy/cold products too.

Lithium, Parkinson medicines and smoking changes

Lithium needs toxicity monitoring; chlorpromazine can oppose levodopa and related medicines. Starting or stopping smoking may change exposure. Tell your team; do not adjust the dose yourself.

Antacids and any new medicine

Ask a pharmacist to review the full list. Antacids may need more than two hours' separation from chlorpromazine. Keep other prescribed intervals.

Everyday tips

Track target symptoms, sleep, daily activities, bowel function and side effects. Bring the record to visits.

Use sun protection even on mild days; avoid excessive heat. Report new skin discoloration or visual changes.

Report feeling emotionally flat or unable to function. Do not assume it always means the dose is too high; it needs review.

Ask for support with treatment routines and a plan for symptoms returning. Restlessness may be a medicine effect rather than worsening illness.

Your questions, answered

What if I miss a dose?

For scheduled treatment, take it when remembered unless the next dose is near; then skip it. Never double. For as-needed treatment, follow the prescribed reason, interval and maximum.

Can I stop when I feel better?

Plan changes with your clinician. Sudden stopping after regular use may cause nausea, sweating, poor sleep, dizziness, new movements or returning symptoms. Emergency reactions need urgent assessment, not routine tapering.

What about pregnancy or breastfeeding?

Discuss benefits and risks before changes. Late-pregnancy exposure can affect newborn movement, breathing or feeding. The US label advises choosing between breastfeeding and treatment based on maternal need; make an individual plan.

What if I take too much?

Call Poison Help at 1-800-222-1222 immediately, even without symptoms. Call 911 for seizure, collapse, breathing trouble or inability to wake. Do not induce vomiting.

Storage & safety

Store securely in the labeled container, away from children, pets, heat and moisture. Never share. Ask a pharmacy about safe disposal.

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=c2a8b8a3-187f-4000-bde3-b40bb0e5600f>
 2. <https://medlineplus.gov/druginfo/meds/a682040.html>
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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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