

Clozapine

Clozaril • follow the directions for your exact formulation

An option when other schizophrenia medicines have not helped enough. Close follow-up is part of treatment, not an extra.

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

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

KEEP YOUR BLOOD TESTS

CALL BEFORE RESTARTING AFTER A MISSED DAY

This is general education, not a personal dose or restart plan. Keep your clinic's urgent-contact number handy.

What it is used for

FDA-approved for schizophrenia not adequately helped by other antipsychotics.

Also approved to reduce recurrent suicidal behavior in schizophrenia or schizoaffective disorder. Other uses are off-label and need specialist review.

How it works

Acts on dopamine, serotonin and other receptors. No single action fully explains its benefit.

It can help when other medicines have not, but benefit is not guaranteed. Sleepiness does not measure success.

What to expect over time

STARTING SLOWLY

The dose starts very low and rises cautiously. Dizziness, sleepiness and drooling may appear before benefit. Keep early check-ins.

OVER WEEKS

Symptoms may improve gradually. Heart inflammation is more common early, but heart symptoms need attention at any time.

LONGER TERM

Improvement may continue over months. Keep checking blood counts, bowels, weight and metabolic health even when you feel well.

Taking your medication

Follow your prescribed dose and schedule, with or without food. Ask before switching formulations; instructions differ.

Keep blood tests and a daily bowel record. Agree on a prevention/laxative plan; water or a stool softener alone may not be enough.

Rise slowly; avoid alcohol. No driving or hazardous activities until effects are known. Call before restarting after a missed day; see the "Your questions, answered" section.

When to get help

Call 911: seizure, collapse, breathing trouble, severe chest pain, fever with marked stiffness/confusion, or immediate self-harm danger.

Urgent care: belly pain/swelling, vomiting or trouble passing stool/gas. Do not wait days. Also report chest symptoms, faintness or a racing heart promptly.

Call now: fever, sore throat, infection signs or new suicidal thoughts. At 101.3°F (38.5°C) or higher, hold the next dose pending urgent assessment.

Early side effects

Sleepiness, dizziness, drooling, dry mouth, sweating, nausea and constipation can occur. Report choking at night, unusual sedation, jerking or confusion promptly.

Other effects to discuss

Weight, glucose and cholesterol may rise. Report thirst, frequent urination or abnormal movements. Confusion with vomiting or breathing changes needs emergency care.

What to keep track of

ANC measures infection-fighting cells: usually weekly for 6 months, every 2 weeks for the next 6, then monthly if acceptable. Your team may change this. Also monitor bowels, weight, glucose/lipids, pulse and blood pressure; heart tests and drug levels depend on the situation.

Before you start

Review low blood counts, prior clozapine reactions, seizures, heart problems/fainting, bowel or urinary trouble, glaucoma, diabetes and liver/kidney illness. Mention smoking, caffeine, all medicines, pregnancy and breastfeeding. Not approved for dementia-related psychosis; antipsychotics increase death risk in this group. Children's safety and effectiveness are not established.

Medicines & interactions

Smoking, caffeine and illness

Tell your team about starting/stopping smoking, major caffeine changes or infection. Tobacco smoke—not nicotine itself—changes drug breakdown. Stopping smoking or becoming ill can raise clozapine levels.

Fluvoxamine, ciprofloxacin and other drugs

Some medicines greatly raise exposure and require a planned dose adjustment. Check all new prescriptions, OTC products and supplements; do not adjust clozapine yourself.

Bowel, sedation and seizure risks

Avoid alcohol. Check opioids, sleep medicines, benzodiazepines, bupropion and tramadol. Diphenhydramine and other anticholinergics can worsen constipation, confusion and urinary problems.

Blood counts, rhythm and blood pressure

Carbamazepine and other marrow-suppressing drugs need special review. Rhythm-affecting and blood-pressure medicines can add risk. Check before starting or stopping any medicine.

Everyday tips

Write down doses, missed doses, bowel movements and symptoms. Share the record at visits.

Keep a current medicine list and an urgent-contact plan with someone you trust.

Ask for practical help with food, activity, drooling or sedation. Side effects deserve treatment.

Keep blood-test appointments. The US REMS dispensing program ended in 2025; blood monitoring did not.

Your questions, answered

What if I miss a dose or a day?

Never double. Ask your pharmacist about a single missed dose. If a whole day or more is missed, call your prescriber before taking more. Restarting the usual dose can dangerously lower blood pressure; a lower restart dose is needed.

Can I stop when I feel better?

Plan changes with your team. Sudden stopping can cause sweating, nausea, diarrhea and return of psychosis. Serious reactions may require urgent stopping; follow the assessing clinician's instructions.

Pregnancy or breastfeeding?

Discuss plans early; do not stop suddenly just because pregnancy is recognized. Newborn effects can occur with late exposure. Clozapine enters milk and may harm an infant; arrange specialist feeding advice.

What if I take too much?

Call Poison Help (1-800-222-1222) or seek emergency care immediately. Do not wait for symptoms. Call 911 for collapse, seizure, breathing trouble or inability to wake.

Storage & safety

Keep securely in the labeled container, away from children and pets. Follow product storage directions, never share, and use a pharmacy take-back service for leftovers.

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=883b5d43-0339-7dc1-f775-93791fb9b978>
 2. <https://www.fda.gov/drugs/drug-safety-communications/fda-removes-risk-evaluation-and-mitigation-strategy-rems-program-antipsychotic-drug-clozapine>
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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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