

Deutetrabenazine

Austedo • Austedo XR

Treatment for certain involuntary movements. The goal is more comfort and better everyday function.

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

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

CHECK IR VERSUS XR

REPORT MOOD CHANGES PROMPTLY

M means active metabolites: forms your body makes from the medicine that act on the VMAT2 transporter.

What it is used for

For adults with tardive dyskinesia, which can cause repeated movements of the face, mouth or other body parts.

Also treats chorea, the unwanted movements associated with Huntington disease. It is not a cure for either condition.

How it works

Changes how brain cells store messengers such as dopamine. This can reduce unwanted movements.

Less movement is not the only goal. Your team also watches whether eating, speaking, walking and daily activities become easier.

What to expect over time

START LOW

Your team chooses the form and beginning dose.

WEEKLY CHECKS

Dose increases are no more frequent than weekly, and only if appropriate.

OVER WEEKS

Benefit may build over two to four weeks. Keep tracking comfort and function.

Taking your medication

Austedo without XR: usually twice daily with food. Austedo XR: once daily, with or without food. Follow your exact prescription.

Swallow tablets whole. Do not cut, crush or chew either form. Ask for help if swallowing is difficult.

Do not take both forms together or switch on your own. Tablets and schedules can differ even when the daily amount is the same.

When to get help

Report immediately: new depression, unusual behavior or thoughts of self-harm. If you cannot stay safe, call 911 or go to an emergency department.

Get emergency help: fever with severe stiffness, sweating and confusion, or fainting with a fast or irregular heartbeat.

Call promptly: new shaking, stiffness, slowed walking, falls or a strong urge to keep moving.

Early side effects

Sleepiness, tiredness, dizziness, dry mouth, diarrhea, constipation or trouble sleeping can occur. Let your team know if they disrupt your day. Do not drive while sleepy or unsteady.

Other effects to discuss

This medicine has a boxed warning about depression and suicidal thoughts or behavior in Huntington disease. Everyone taking it should report new mood changes. Do not start with uncontrolled depression or suicidal thoughts if you have Huntington disease.

What to keep track of

Keep follow-up visits and a brief movement, mood and side-effect log. Your team may use a movement rating scale. Heart testing and blood work depend on your history and other medicines.

Before you start

Share any history of depression, self-harm thoughts, liver or kidney disease, fainting, heart-rhythm problems, low potassium or magnesium, breast cancer, falls or swallowing difficulty. Discuss pregnancy or breastfeeding if relevant. Give your team a complete list of current and recently stopped medicines.

Medicines & interactions

Other movement medicines and MAOIs

Do not combine with tetrabenazine, valbenazine, reserpine or an MAOI. Some require a waiting period after stopping; have the prescriber manage it.

Some antidepressants

Fluoxetine, paroxetine and bupropion can raise drug exposure and require a lower maximum dose. Do not adjust either medicine yourself.

Antipsychotics, alcohol and sedatives

Antipsychotics may add movement side effects. Alcohol and sedating products add sleepiness. Check all combinations, including nonprescription sleep aids.

Everyday tips

Pick a practical goal, such as easier meals or steadier walking.

Ask someone you trust to notice mood changes with you.

Use a dose log, especially during weekly changes.

Keep necessary mental-health treatment in place unless your prescriber changes it.

Your questions, answered

What if I miss a dose?

Take it when remembered unless the next dose is near; never double. After more than a week off, call before restarting because the dose must be built up again. Ask if the gap is uncertain.

Can I stop taking it?

It does not require tapering, but discuss the plan first because movements may return. Serious reactions need urgent care, not a routine follow-up visit.

What is that tablet in my stool?

The empty XR shell may pass in your stool after releasing the medicine. That does not mean you missed the dose; do not take an extra tablet.

What if I take too much?

Call Poison Control now: 1-800-222-1222. Do not wait for symptoms. Call 911 for collapse, seizure, trouble breathing or inability to wake up.

Storage & safety

Keep the bottle tightly closed at room temperature, away from heat, light and moisture. Leave the moisture-absorbing canister inside until the last dose. Store securely away from children and pets; use a medicine take-back service for unused tablets.

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://www.austedo.com/globalassets/austedo/prescribing-information.pdf>
 2. <https://medlineplus.gov/druginfo/meds/a617022.html>
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