

Fluphenazine

Prolixin • former U.S. brand

An antipsychotic for psychotic symptoms. Regular movement and bowel checks matter with this medicine.

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

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

Tablets or prescribed oral liquid

Decanoate injection: a separate, long-acting plan

Diagram: not every receptor tab has an established clinical effect; see the companion clinical record.

What it is used for

Treats psychotic disorders, including schizophrenia. It can reduce hallucinations and distressing false beliefs, and help prevent symptoms from returning.

A long-acting injection may suit people who prefer it or find daily doses difficult. It does not replace follow-up. Ask which symptoms your treatment is targeting.

How it works

Fluphenazine blocks dopamine D2 receptors. This contributes to symptom relief, but also to stiffness, restlessness and raised prolactin, a hormone.

High potency means smaller milligram doses, not greater effectiveness than every other antipsychotic. Other receptor actions may add dizziness or sedation.

What to expect over time

FIRST DAYS

Restlessness, stiffness or muscle spasms can start early. Tell your team promptly; severe spasms need urgent care.

OVER WEEKS

Psychotic symptoms may improve gradually. Review benefit, daily functioning and side effects together rather than changing doses yourself.

CONTINUING CARE

Keep taking the prescribed plan when feeling better. Long-acting doses remain in the body for weeks; movement checks continue.

Taking your medication

Take your exact tablet or liquid dose as prescribed. Use a medicine syringe or supplied dropper, never a kitchen spoon. Concentrate needs dilution; see the “Everyday tips” section.

A clinician gives decanoate injections, often every 2-4 weeks on an individualized schedule. Follow the specific tablet-overlap plan, if one is prescribed.

Avoid alcohol. Do not drive until effects are known. Rise slowly, avoid overheating and use sun protection. Report constipation before it becomes severe.

When to get help

Call 911: fever with rigid muscles and confusion; trouble breathing, collapse, seizure or severe allergy. A painful prolonged erection needs emergency care.

Urgent care: jaw or neck spasms, eyes rolling upward, fainting, or severe belly pain with vomiting, swelling or inability to pass gas. Do not just add laxatives.

Call promptly: new face, tongue or body movements; fever, sore throat, yellow skin or eyes, vision changes or trouble urinating. Report marked restlessness too.

Early side effects

Restlessness, stiffness, tremor, slowed movement, dizziness, sleepiness, dry mouth or constipation may occur. Tell your team early so they can review the plan.

Other effects to discuss

Sexual or period changes, breast milk leakage and weight gain can occur. Repetitive movements called tardive dyskinesia may persist even after stopping.

What to keep track of

Keep movement, bowel, weight, blood pressure, glucose, cholesterol, blood count, liver and kidney checks. Heart tracing and hormone tests depend on risks or symptoms. Prior low white cells need closer checks. Death risk is higher in older adults with dementia-related psychosis; this is not an approved use.

Before you start

Tell your team about liver disease, blood-cell disorders, brain injury, Parkinson's disease, prior movement problems, seizures, heart or kidney disease, glaucoma, constipation, urine trouble, pregnancy or breastfeeding. Mention allergies, including sesame oil in the depot, and smoking changes. Pediatric safety is not established; do not use adult instructions for a child. Share all medicines and supplements, including iron, which can worsen constipation.

Medicines & interactions

Alcohol, opioids & sedatives

Avoid alcohol. Sleep, anxiety, allergy and opioid medicines can add sedation, falls or breathing risk. Ask before adding an over-the-counter remedy.

Bowel- or bladder-active medicines

Benzotropine, diphenhydramine and oxybutynin can worsen constipation, confusion and urine retention. Some movement treatments help, but others can worsen tardive dyskinesia.

Heart & blood-pressure medicines

Some combinations add rhythm problems or dizziness on standing. Review your full list with a pharmacist and tell the anesthesia team before surgery.

Fluoxetine, paroxetine & bupropion

These can increase fluphenazine exposure and movement effects. Do not change doses yourself; your prescriber decides whether to adjust the plan.

Lithium & Parkinson's medicines

Lithium combinations need monitoring for confusion, tremor or other nervous-system toxicity. Fluphenazine can oppose levodopa and other dopamine medicines.

Everyday tips

Keep a dose reminder and record injection appointments.

Report feeling flat or slowed; it does not prove the dose is too high.

Track bowel habits, sleep and new movement symptoms.

Keep therapy, practical support and regular follow-up in the plan.

Your questions, answered

What if I miss a dose?

Take a missed oral dose when remembered unless the next is near; then skip it. Never double. Contact the clinic promptly about a missed injection.

How do I take the concentrate?

Measure the prescribed dose and mix in 60 mL of a permitted drink just before taking. Do not use apple juice or caffeinated drinks. Ask the pharmacist to demonstrate your product.

Can I stop when I feel better?

Plan changes with your prescriber. Sudden stopping can bring relapse or new movements. Tablets may need a gradual taper; depot effects persist and cannot be quickly reversed.

What about pregnancy or breastfeeding?

Discuss benefits and risks, rather than stopping yourself. Late-pregnancy exposure can affect a newborn's feeding, breathing or movement. Breastfeeding information is limited; seek individualized advice.

Storage & safety

Store oral medicine tightly closed at room temperature, away from heat and moisture, safely away from children and pets. Never share; use pharmacy take-back. Overdose: Poison Help 1-800-222-1222 promptly, even without symptoms. Collapse, seizure, breathing trouble or inability to wake: 911.

A final reminder

Read your pharmacy's product-specific directions.

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://medlineplus.gov/druginfo/meds/a682172.html>
 2. <https://dailymed.nlm.nih.gov/dailymed/fda/fdaDrugXsl.cfm?setid=f07bb3f1-c68c-441b-9de4-99a219f2500a&type=display>
 3. <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=970e6fde-9cc8-475b-8a9e-bde0579a72a7>
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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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