

# Pimozide

Orap / tablets

A medicine for severe Tourette tics, with a few important safety checks built into the plan.

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

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

TABLETS: 1 mg, 2 mg

TAKE ONLY YOUR PRESCRIBED DOSE

Your dose and schedule are individual. The tablet strength is not a dosing instruction.

## What it is used for

Helps reduce movement and sound tics from Tourette syndrome when standard treatment has not helped enough.

It is reserved for tics that seriously affect daily life. The goal is easier living, not a promise that every tic will disappear.

## How it works

Pimozide blocks some dopamine signals in the brain. This can reduce tics, but can also cause stiffness or restlessness.

The small diagram includes a heart channel called hERG. That shows a heart-rhythm risk, not an extra treatment benefit.

## What to expect over time

### BEFORE THE FIRST DOSE

Review your medicines, have an ECG heart tracing and complete the blood tests your prescriber requests.

### EARLY CHECK-INS

The dose is adjusted carefully. Keep ECG appointments and report new movements, dizziness or troublesome sleepiness.

### ONGOING REVIEW

Track whether daily life is easier. Review the benefit and side effects together; the lowest helpful dose is the aim.

## Taking your medication

Take it at the times on your label. Some people take it once daily; others take divided doses. Do not add doses for a bad tic day.

If you miss a dose, take it when remembered unless it is nearly time for the next. Then skip it. Never double up.

Ask your pharmacist if the missed-dose timing is unclear. Do not change or stop treatment on your own.

## When to get help

Get emergency help: fainting, a fast or irregular heartbeat with dizziness, seizure, or trouble breathing or swallowing.

Emergency care is also needed for high fever with stiff muscles, confusion or heavy sweating.

Contact your prescriber promptly about new mouth, tongue or limb movements, severe restlessness, or fever/sore throat. Call 911 for immediate danger.

## Early side effects

Sleepiness, dizziness, dry mouth, constipation, blurred vision or extra saliva can occur. Avoid driving until you know your response. Rise slowly, and report persistent or worsening effects.

## Other effects to discuss

Stiffness, shaking and an urge to keep moving may be medicine effects, not worsening tics. Weight, sexual function or periods can change. Bring these up; they are part of your care.

## What to keep track of

Keep heart-tracing and blood-test appointments. Tell your team about fainting, palpitations, severe diarrhea or vomiting. These may change your heart-rhythm risk. A genetic test may be needed before higher doses.

## Before you start

Tell your prescriber about heart-rhythm problems, fainting, a family history of long QT or sudden death, low potassium/magnesium, seizures, liver/kidney problems or previous low white blood cells. Discuss pregnancy, plans for pregnancy and breastfeeding.

## Medicines & interactions

### Every new medicine

Ask a pharmacist or prescriber before adding, stopping or changing a medicine, supplement or over-the-counter product. Bring a complete list.

### Antibiotics, antifungals & antivirals

Some are unsafe with pimozone, including clarithromycin, azithromycin, ketoconazole and ritonavir. Tell urgent-care and dental clinicians you take pimozone.

### Antidepressants & heart medicines

Several combinations are prohibited, including citalopram, escitalopram, sertraline, paroxetine and fluoxetine. Other medicines can also affect heart rhythm. Do not switch them yourself.

### Grapefruit & alcohol

Avoid grapefruit and grapefruit juice. Alcohol and sedating medicines can increase sleepiness and other risks; discuss them before use.

## Everyday tips

Keep a short note of tic discomfort, daily activities and side effects. What matters to you belongs in the treatment goal.

Use a reminder and plan refills so you do not run out.

Ask about CBIT, a behavioral treatment that teaches skills for managing tics. It may be an important part of the plan.

Tell your team if anxiety, attention or compulsive symptoms are causing more difficulty than the tics.

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## Your questions, answered

### Is this only an antipsychotic?

That is its medicine class, but pimozide is also prescribed for severe Tourette tics. The class name does not tell you your diagnosis.

### Can I stop when tics improve?

Agree on a plan first. Tics naturally fluctuate, and suddenly stopping can cause new movements or symptom rebound. Your prescriber can plan a gradual reduction.

### What are the long-term concerns?

Some involuntary movements can persist after treatment stops. Heart, hormone and weight effects also need review. Report changes early so the plan can be reassessed.

### What if I take too much?

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

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## Storage & safety

Keep tablets in the labeled container, away from children and pets. Do not share them. Ask your pharmacist about safe disposal.

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## A final reminder

Follow your prescription and pharmacist's instructions.

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### 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.

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## Sources

1. <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=70b079e2-a1f7-4a93-8685-d60a4d7c1280>
  2. <https://medlineplus.gov/druginfo/meds/a686018.html>
  3. <https://www.aan.com/Guidelines/home/GetGuidelineContent/960>
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