

Risperidone

Risperdal / formulation-specific injections

Support for steadier thinking or mood, with room to speak up about side effects.

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

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

CHECK YOUR EXACT FORMULATION

KEEP INJECTION AND LAB APPOINTMENTS

Tablets, dissolving tablets, liquid and injections have different instructions. Do not switch them yourself.

What it is used for

Used for schizophrenia and certain bipolar symptoms. Some injections also help prevent bipolar episodes.

In some children it treats severe irritability linked to autism, not autism itself. Other uses need a clear treatment goal.

How it works

It changes dopamine and serotonin signaling involved in thinking, mood and behavior.

Its breakdown product also has effects. The diagram is a simplified guide, not a prediction of how you will feel.

What to expect over time

FIRST DAYS

Sleepiness or dizziness may appear before the main benefit.

OVER THE NEXT WEEKS

Look for changes in symptoms and everyday functioning, not just feeling calmer.

STAYING WELL

Keep the agreed treatment plan even when symptoms improve. Discuss changes together.

Taking your medication

Take oral doses as prescribed, with or without food. Use dry hands for dissolving tablets: peel the foil, place on your tongue, and let dissolve; do not split or chew.

Measure liquid with the supplied device, not a kitchen spoon. It may mix with water, coffee, orange juice or low-fat milk, but not tea or cola.

Missed tablet? Take when remembered unless the next is nearly due; then skip. Never double. After a gap in treatment, or a missed injection, call for a restart plan.

! When to get help

Emergency: breathing trouble, stroke signs, seizure, fever with severe stiffness/confusion, or an erection lasting four hours.

Urgent advice: fainting, irregular heartbeat, fever/sore throat, trouble swallowing, severe restlessness or new uncontrolled movements.

Call promptly: extreme thirst, frequent urination or worsening mood. Seek emergency help for confusion, fast breathing or being unable to stay safe.

Early side effects

Sleepiness, dizziness, constipation, nausea, stiffness or restless legs may occur. Stand slowly and avoid driving until you know the effects. Tell your team about inner restlessness or trouble sitting still; it is not always anxiety.

Other effects to discuss

Weight, blood sugar and cholesterol may rise. Raised prolactin can cause breast changes/discharge, missed periods or sexual changes. Report these and new involuntary movements promptly; do not stop on your own.

What to keep track of

Expect weight, blood-pressure, blood sugar/cholesterol and movement checks. Kidney, hormone and other tests depend on your health. Describe both improvements and difficulties at visits.

Before you start

Mention kidney/liver problems, fainting, heart rhythm issues, seizures, low white blood cells, Parkinson disease, swallowing problems, pregnancy or nursing. Tell your team about PKU before dissolving tablets. This medicine is not approved for dementia-related psychosis; antipsychotics raise death and stroke risks in those older adults.

Medicines & interactions

Antidepressants

Fluoxetine and paroxetine can raise risperidone levels. Check before starting, stopping or changing them.

Seizure medicines and other prescriptions

Carbamazepine can lower levels; stopping it can raise them again. Bring all medicines and supplements for review.

Alcohol, sedatives and blood-pressure drugs

Avoid alcohol. These combinations can increase sleepiness, dizziness or falls. Ask before using sleep or allergy remedies.

Stimulants and Parkinson medicines

Changing methylphenidate or risperidone can trigger movement problems. Parkinson medicines may work less well; coordinate changes with your team.

Everyday tips

Know the injection brand and due date. Some injections need tablets at the start; others do not. Follow your product's plan exactly.

Use reminders and refill early. If you were receiving Perseris, contact the clinic: its availability ended in May 2026.

Ask for help with food choices, activity and weight. Stay hydrated within your medical limits and avoid overheating.

Plan stopping or switching together. Sudden stopping can cause poor sleep, nausea, agitation and a return of symptoms.

Your questions, answered

Will I need it forever?

Duration depends on your condition and relapse history. Review the need regularly; feeling better does not mean it is safe to stop suddenly.

Can hormone side effects be treated?

Often there are options. Report them even if embarrassing. Your clinician may check tests or adjust treatment.

What if I become pregnant?

Contact your team without stopping yourself. Discuss the uncertain risks, relapse prevention and newborn monitoring after late exposure.

Can I breastfeed?

The medicine enters milk. Make an individual plan and watch the baby for unusual sleepiness, poor feeding/growth or abnormal movements.

Storage & safety

Keep oral medicine in its labeled container, away from children and pets. Never share. Extra dose? Call Poison Control: 1-800-222-1222; call 911 for collapse, seizure, breathing trouble or inability to wake.

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=7e117c7e-02fc-4343-92a1-230061dfc5e0>
 2. <https://www.indivior.com/our-products/discontinue-availability-of-perseris.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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