

Sulpiride

Dogmatil

A practical guide to treatment, side effects and the questions worth asking.

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

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

ORAL TABLETS

TAKE ONLY YOUR PRESCRIBED DOSE

Non-US medicine. This guide uses UK tablet instructions; follow the leaflet supplied with your own medicine.

What it is used for

Sulpiride treats schizophrenia. It can help with experiences such as hearing voices or feeling intensely suspicious.

If it was prescribed for another reason, ask which symptoms it is meant to help and how you will judge the benefit together.

How it works

It blocks some dopamine signals. That can reduce psychotic symptoms, but it can also affect movement and hormone levels.

The small diagram shows drug targets, not a prediction of how you personally will feel.

What to expect over time

EARLY DAYS

Sleep or alertness may change before other symptoms do. Tell your team if you feel more agitated.

OVER SEVERAL WEEKS

Some symptoms may ease in the first week. Fuller improvement can take longer.

ONGOING CARE

Feeling better is a reason to review the plan, not to stop on your own.

Taking your medication

Swallow tablets with water at the times on your label. Do not change the amount yourself.

Take sulpiride at least two hours before antacids or sucralfate. Ask a pharmacist to check the timing.

Avoid alcohol. Do not drive or use machinery if sleepy, dizzy or less alert.

When to get help

Emergency help: fainting with an irregular heartbeat, a seizure, severe breathing trouble or face/throat swelling.

Emergency help: fever with stiffness or confusion, or chest pain with sudden breathlessness. Seek advice before another dose for a serious reaction.

Prompt assessment: fever, sore throat, a painful swollen leg, uncontrolled movements or neck/jaw spasm. Trouble breathing or swallowing is an emergency.

Early side effects

Sleepiness, dizziness, constipation or trouble sleeping may occur. Stand up slowly. Ask for help if side effects are hard to manage.

Other effects to discuss

Report restlessness, tremor, stiffness, weight gain, breast changes, milk production, missed periods or sexual problems. Some movement effects can last.

What to keep track of

Keep follow-up visits for symptoms, weight, blood pressure and movement checks. Kidney and metabolic blood tests may be needed. Your team may also check heart rhythm, blood counts or hormone levels.

Before you start

Tell your prescriber about kidney or heart disease, fainting, seizures, Parkinson disease, dementia, blood clots, low white blood cells, breast or pituitary tumors, porphyria, adrenal tumors, glaucoma, or trouble passing urine. Mention pregnancy plans and breastfeeding. These details can change whether this medicine is suitable.

Medicines & interactions

Parkinson medicines

Levodopa and ropinirole must not be combined with sulpiride under the reviewed UK instructions. Ask before starting treatment.

Heart rhythm and salts

Heart medicines, some antibiotics, other antipsychotics and medicines that lower potassium may increase heart-rhythm risk. Have a pharmacist check the full list.

Alcohol and sedating medicines

Alcohol, opioids, sleep medicines and sedating allergy medicines can increase sleepiness and impairment.

Lithium and blood-pressure drugs

These can add movement problems, other toxicity or dizziness. Do not add or adjust them without a medication review.

Everyday tips

Use a routine or reminder that fits your day. Tell your team about missed doses without worrying about being judged.

Write down one or two changes you hope to see, and any side effects getting in the way.

Ask a trusted person to help spot changes if that feels useful to you.

Bring all prescriptions, over-the-counter medicines and supplements to medication reviews.

Your questions, answered

What if I miss a dose?

Take it when remembered unless the next dose is nearly due. Then skip it. Never double the dose. Ask if you have missed several.

Can I stop if I feel well?

Make a plan with your prescriber. Sudden stopping can bring symptoms back and cause nausea, sweating, sleep trouble or unusual movements.

What about pregnancy or nursing?

Contact your prescriber promptly. Do not stop on your own. A treatment and feeding plan is needed; the drug passes into breast milk.

What if I take too much?

Get urgent medical or poison-service advice immediately, even before symptoms appear. Take the medicine pack with you. Do not drive yourself.

Storage & safety

Store as directed on your own pack, out of children's reach. The reviewed UK tablets require storage below 25 C in the original package, protected from light. Ask a pharmacist about disposal.

A final reminder

Your prescription and local product instructions take priority.

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.medicines.org.uk/emc/product/2430/pil>
 2. <https://www.medicines.org.uk/emc/product/2430/smhc>
 3. <https://base-donnees-publique.medicaments.gouv.fr/medicament/67208161/extrait>
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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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