

ZOTEPINE ('Zoleptil')

Zot - a - peen

Why have I been prescribed zotepine?

Zotepine is used to help treat schizophrenia, psychosis and many other similar conditions.

When they have schizophrenia, many people hear voices talking to them or about them. They may also become suspicious or paranoid. Some people also have problems with their thinking and feel that other people can read their thoughts. These are called "positive symptoms". Zotepine can help to relieve these symptoms. Many people with schizophrenia also experience "negative symptoms". They feel tired and lacking in energy and may become quite inactive and withdrawn. Zotepine may help relieve these symptoms as well.

What exactly is zotepine?

Zotepine is an antipsychotic. Schizophrenia and similar disorders are sometimes referred to as psychoses, hence the name given to this group of medicines, which is the "antipsychotics". They are sometimes also called the neuroleptics or (incorrectly) major tranquillisers. Zotepine has been around in the UK since 1999 and has been used in Japan for the last 20 years. The trade or brand name for zotepine is 'Zoleptil'.

Is zotepine safe to take?

It is usually safe to have zotepine regularly as prescribed by your doctor, but it doesn't suit everyone. Let your doctor know if any of the following apply to you, as extra care may be needed:

- a) if you have epilepsy (or a family history of epilepsy), diabetes, urinary retention, acute gout, Parkinson's disease or glaucoma, or suffer from heart, liver, kidney, or prostate trouble;
- b) if you are taking any other medication from any source;
- c) if you are pregnant, breast feeding, or wish to become pregnant.

What is the usual dose of zotepine?

The starting dose of zotepine is 75mg a day. The dose can be increased every four days. The maximum dose of zotepine is 300mg a day.

How should I take my zotepine?

Look at the label on your medicine; it should have all the necessary instructions on it. Follow this advice carefully. If you have any questions, speak to your doctor or pharmacist. Most medicines are now dispensed with an information leaflet for you to read.

What should I do if I miss a dose?

Never change your dose without checking with your doctor. If you forget a dose, take it as soon as you remember, as long as it is within a few hours of the usual time.

What about alcohol?

It is officially recommended that people taking zotepine should not drink alcohol. This is because both zotepine and alcohol can cause drowsiness. If the two are taken at the same time, severe drowsiness can result. This can lead to falls or accidents. As well as this, drinking alcohol often makes psychosis worse. Excessive drinking is especially likely to do this. Once people are used to taking medication, they can sometimes drink alcohol in small amounts without any harm. Avoid alcohol altogether for the first one or two months. After this, if you want a drink, try a glass of your normal drink and see how you feel. If this doesn't make you feel drowsy, then it is probably OK to drink small amounts. It pays to be very cautious because alcohol affects people in different ways, especially when they are taking medication.

Don't stop taking your medication because you fancy a drink. Discuss any concerns you may have with your doctor, pharmacist or nurse. If you do drink alcohol, drink only small amounts. Never drink any alcohol and drive.

What will happen to me when I start taking zotepine?

Antipsychotics do not work straight away. For example, it may take several days or even weeks for some of the symptoms to reduce. To begin with, most people find that this medication will help them feel more relaxed and calm. Later, after one or two weeks, other symptoms should begin to improve.

Unfortunately, you might get some side effects before you start to feel any better. Most side effects should go away after a few weeks. Look at the table over the page. It tells you what to do if you get any of the usual side effects. Not everyone will get the side effects shown. There are many other possible side effects. Ask your pharmacist, doctor or nurse if you are worried about anything else that you think might be a side effect.

Side effect	What is it?	What should I do if it happens to me?
COMMON		
ANTI- CHOLINERGIC EFFECTS	Dry mouth. Not much saliva or spit.	Sugar-free boiled sweets, chewing gum or eating citrus fruits usually helps. If not, your doctor can give you a mouth spray. A change in medicine or dose may be possible.
	Blurred vision	Things look fuzzy and you can't focus properly. See your doctor if you are worried. You won't need glasses.
	Feeling "bunged up" inside. You can't pass a motion or stool.	Eat more fibre e.g. bran, fruit and vegetables. Do more walking. Make sure you drink plenty of fluid. A mild laxative from a pharmacy might help.
	Difficulty in passing urine	Contact your doctor now.
ANXIETY, AGITATION	You feel more on edge.	Try and relax by taking deep breaths. Wear loose clothing. See your doctor if it is bad.
DROWSINESS	Feeling sleepy or sluggish. It can last for a few hours after taking your dose	Don't drive or use machinery. Ask your doctor if you can take your zotepine at different times.
HYPER - SALIVATION	Your mouth gets full of saliva or spit. You may drool – your pillow may be wet in the morning	If it annoys you, your doctor can give you a tablet for it. Some people find propping up pillows at night helps a bit.
HYPOTENSION	A low blood pressure. You may feel faint when you stand up.	Try not to stand up too quickly. If you feel dizzy, don't drive. This dizziness is not dangerous
MOVEMENT DISORDERS	Feeling shaky or having a tremor. Your neck may twist back. Your eyes and tongue may move on their own.	Tell your doctor about this. He/she may be able to do something about it.
SWEATING	You sweat more than usual.	See your doctor if it is bad.
WEIGHT GAIN	Eating more and putting on weight, especially just after you start taking zotepine	Avoid fatty foods like chocolate, crisps and fizzy drinks. A diet full of vegetables and fibre will usually help, as will physical activities such as walking. If it becomes a problem or you are worried, ask to see a dietician.
UNCOMMON		
ALTERED LIVER FUNCTION	Your liver is not working as normal. You should not feel any symptoms. This is only discovered if your doctor does a blood test.	Continue to take your zotepine. Your doctor will probably want to do regular blood tests to make sure your liver is O.K. Serious liver problems don't occur with zotepine, so don't worry too much.
AKATHISIA	You feel restless, unable to feel comfortable unless you are moving.	Tell your doctor about this. It may be possible to change your drug or dose, or give you something to reduce these feelings.
NAUSEA AND VOMITING	Feeling sick or being sick.	Taking each dose with or after food may help. If it is bad, contact your doctor.
RAISED PROLACTIN	Prolactin is a natural chemical we all have. High levels can affect periods in women or cause impotence in men. It may also cause breast tenderness and milk secretion, in men as well as women.	This sometimes wears off in a few weeks, but discuss this with your doctor anyway. It may be that a change in dose or different drug will help.
SEIZURES	Having fits	Stop taking zotepine and contact your doctor now.
TACHYCARDIA	This is a fast heart beat. It may feel like palpitations	It is not usually dangerous. It can be easily treated if it lasts a long time.
VERY RARE		
NMS	Neuroleptic Malignant Syndrome includes a high body temperature, muscle stiffness and being unable to move.	It usually occurs within a few weeks of a dose change. Contact your doctor immediately. Keep cool, with fans or cool water.

When I feel better, can I stop taking zotepine?

No. If you stop taking zotepine, your original symptoms may return, but this may not be for 3 to 6 months after you stop the drug. You and your doctor should decide together when you can come off it. Most people need to be on zotepine for quite a long time, sometimes years. This is not thought to be harmful. Zotepine is not addictive.

Remember, leaflets like this can only describe some of the effects of medication. You may find other books or leaflets also useful. If you have access to the internet you may find a lot of information there as well, but be careful, as internet based information is not always accurate.



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This leaflet is to help you understand about your medicine. It is not an official manufacturer's Patient Information Leaflet. For more information call the UKPPG National Telephone Helpline, 11am to 5pm, Monday to Friday on 020 7919 2999 or visit www.nmhct.nhs.uk/pharmacy

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