Table 3

Common antipsychotic drugs: dosages and side effects

Type	Usual starting dose	Usual clinical dose	Notes/notable side effects
First generation			
Chlorpromazine	25-100 mg/day	300-600 mg/day	Sedation, hypotension, anticholinergic, photosensitivity
Haloperidol	5 mg as required	Generally used for inpatient acute tranquilisation	Extrapyramidal side effects, poorly tolerated and rarely used for long-term treatment. Association with QTc prolongation
Sulpiride	400 mg/day	800-1,600 mg/day	Lower propensity to cause sedation and extrapyramidal side effects
Second generation			
Risperidone	1-2 mg a day	2-6 mg a day	Hypotension on initiation, extrapyramidal side effects at higher doses. Lower propensity for metabolic syndrome than olanzapine and quetiapine
Olanzapine	5 mg/day	10-20 mg/day	Sedation, weight gain, impaired glucose tolerance
Quetiapine	300 mg/day (only if modified release)	300-750 mg/day	Hypotension on initiation, sedation, low propensity to cause extrapyramidal side effects
Aripiprazole	10-15 mg/day	15-30 mg/day	Low propensity to weight gain/metabolic syndrome. Extrapyramidal side effects may occur and anxiety on initiation
Clozapine	Only initiated by psychiatrists	200-500 mg/day	Agranulocytosis (FBC monitoring mandatory), sedation, weight gain, glucose intolerance
Depot/long-acting injections			
Zuclopenthixol decanoate	100 mg test dose	200 mg four weekly to 400 mg fortnightly	Extrapyramidal side effects
Paliperidone long-acting injection	150 mg on day 1, then 100 mg on day 8	25-100 mg monthly	Extrapyramidal side effects
Aripiprazole long-acting injection	400 mg	400 mg monthly	Continue oral aripiprazole for first 14 days. Dose reduced to 300 mg monthly in CYP2D6 poor metabolisers