Definitions	Antipsychotic Drugs =Neuroleptics, Major tranquilizers	HO NH ₂
Psychosis: problems in thought, personality, behavior, bizarre irrational thinking -Mental state involving detachment from the reality -Madness; supernatural power -Diagnosis by exclusion	Signs and symptoms - <u>Positive</u> -Hallucination & delusions -Thought disorders -Abnormal behaviors	HO DOPAMINE A catecholamine neurotransmitter Projections: -Substantia Nigra: Basal Ganglia ->Movement
2 main symptoms characterizing psychosis -Delusion: Describes false bizarre fixed beliefs -Hallucination: Sensory dysfunction	-Negative -Social contacts: They withdraw from social contact -Emotional responses: Depressed most of the time, loss of pleasure	 Ventral tegmental area: Mesolimbic pathway: Reward and cognition Arcuate nucleus: Pituitary gland: Inhibit prolactin secretion
-Illusions?Misperception of stimulus	-Decrease attention and memory -Anxiety and depression -> Suicide	 Receptors: D 1,5 (Excitatory; Metabotropic; GPRC (Gs))
 Genetic? 1% Normal? Environmental (Stress) Medical conditions: Drugs (dopa like) rapid withdrawal of opoid brain tumour Alzheimer and parkinson could manifest psychotic illnesses later Electrolytes imbalance Fetal infections Drugs: Alcohol; Cannabis Cocaine; Amphetamine; MDMA K-opioid receptor agonists NMDA Antagonists: Amphetamine » increase release of dopamine in the brain 	Pathophysiology: Dopamine Hypothesis Pros: D2 agonists and dopamine releasers produce psychotic- like effects. -Amphetamine, bromocriptine Drugs block NDA receptors produce psychotic-like effect. -Ketamine, Phencyclidine Antipsychotics are dopamine (D2) antagonists. -Clozapine, Olanzapine Cons: Antipsychotics are not always effective Therapeutic effect is generally delayed Newer antipsychotics have 5-HT antagonism (Pimavanserin)	-D 2, 3, 4 (Inhibitory; Metabotropic; GPCR (Gi))

Antipsychotic Drugs

Principles

- The exact Pathophysiology is not wel understood.
- Many people do not respond fully to medications or respond partially
- Therapeutic effect may be delayed several weeks
- Significant side effects -> Main reason for incompliance
- More effective against positive-symptoms -> Negative symptoms are only treated by psychological therapy
- Use the minimum effective dose.

Major S/E

- Hyperprolactinemia.
- -Glactorrhoea
- -Gynecomastia
- Sexual dysfunction: loss of libido.
- Neuroleptic malignant syndrome: Life threatening condition characterised by circulatory shock, high fever, seizures
- Tardive dyskinesia : Abnormal repitative movements of facial muscles -> irreversible effects
- Sedation??
- Hyperglycemia and diabetes.
- Weight gain??

Clinical notes

- Most are effective against positive symptoms.
- Smoking increase metabolism of Clozapine
- Change the medication
- Injectable forms:
- -Non-Compliance of the patient
- -Acute psychotic agitation or mania
- Safe during pregnancy

			Lees adverse effects
	Typical (First Generat	ion)	Atypical (Second Generation)
Discovery	Older		Newer
Effectiveness	Partially		Better?
MOA	D2: Antagonis	it	D2: antagonist 5-HT: antagonist (5-HT3c)
Extrapyramidal S/E	++++++		++
	Chlorproma -The first neuroleptic -Associated with sec Haloperic -Antiemetic with can chemotherapy -Amphetamine and LSD overdose	(1952) lation	Clozapine -Decrease risk of suicide -Has major side effects Aripiprazole -Partial agonist at D2 • Olanzapine • Risperidone • Ziprasidone • Amisulpride
Other Antipsychotics Pimavanserin Approved in 2016. No dopamine action. 5-HT inverse agonist (i. e. antagonist) \$\$\$\$\$- Very expensive Parkinson's disease psychosis.		Antipsychotics: Other uses Anxiety Disorders: OCD Huntington Disease Autism Antiemetic	

Lees adverse effects

- Antipsychotics can produce all of the following except:
- A. Hyperglycemia
- B. sedation
- C. Weight loss
- D. Sexual dysfunction
- E. It can produce all of the above

• Examples of typical antipsychotics:

- A. Olanzepine
- B. Haloperidol
- C. Clozapine
- D. Ziprazidone
- E. All of the above

• Dopamine (D1) receptors are:

- A. Ionotropic excitatory
- B. Metabotropic excitatory
- C. Ionotropic Inhibitory
- D. Metabotropic inhibitory
- E. Voltage-gated receptors
- A patient look at a tea cup, and he claims it is a bomb. This is an example of:
- A. Dillusion
- B. Illusion
- C. Hallucination
- D. Schizophrenia
- E. Sounds like normal to me!