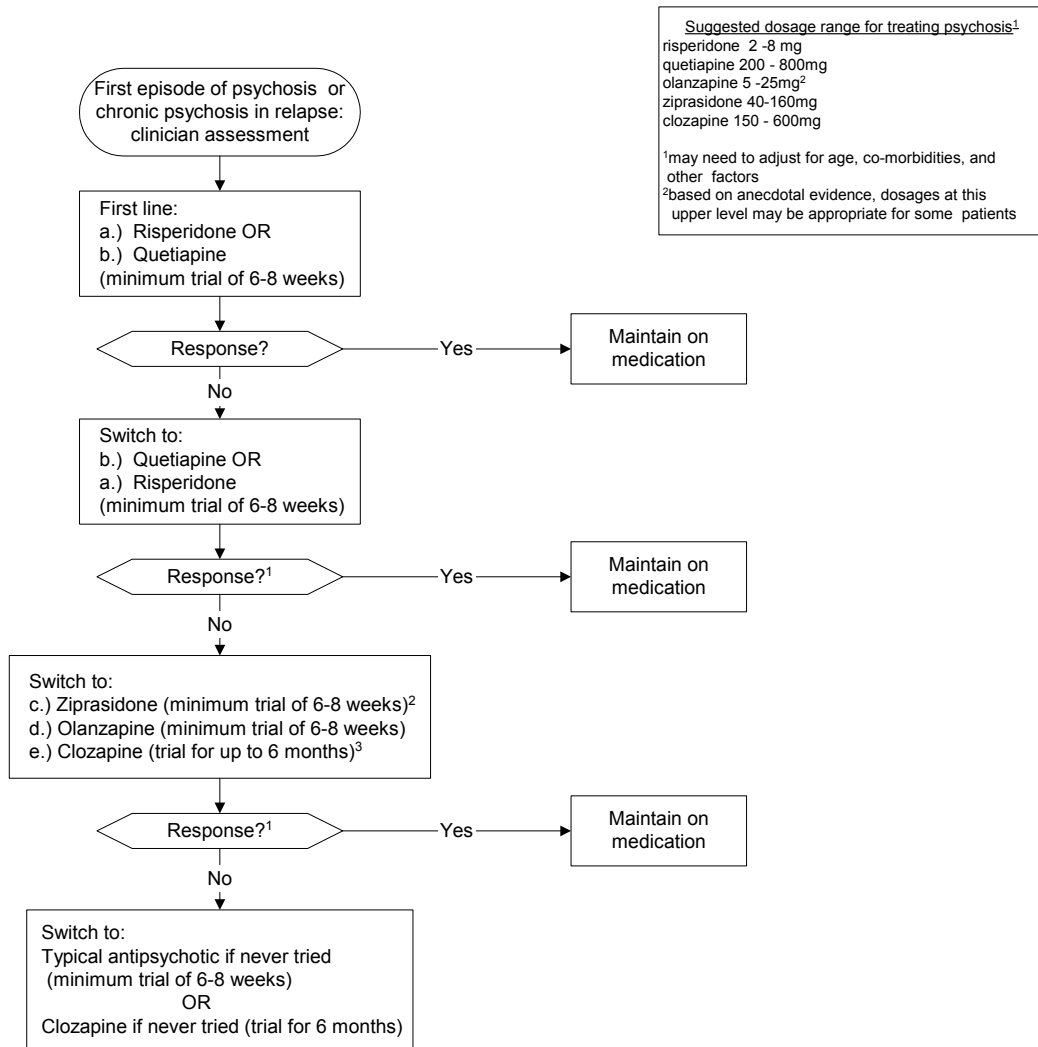


Department of Veterans Affairs Pharmacy Benefits Management, Medical Advisory Panel,  
and Mental Health Strategic Healthcare Group  
Guideline for Atypical Antipsychotic Use

*Selection of therapy for individual patients is ultimately based on physicians' assessment of clinical circumstances and patient needs. At the same time, prudent policy requires appropriate husbanding of resources to VA to meet the needs of all our veteran patients. These guidelines are not intended to interfere with clinical judgment. Rather, they are intended to assist practitioners in providing cost effective, consistent, high quality care. The following recommendations are dynamic and will be revised, as new clinical data become available.*

Consensus Goals:

- 1) Prioritize the use of atypical antipsychotic medication for new antipsychotic medication starts and for patients not responding to or having problematic side effects on typical antipsychotic medication.
- 2) Though differences in the clinical effectiveness and pharmacoeconomic profile of the atypicals have been suggested by some studies, there is no consensus in the literature to support one being globally superior to another; therefore, once the physician determines there are no patient specific issues, begin therapy with an effective, less expensive agent. At the present time, this would lead to the preference of quetiapine and risperidone over olanzapine.
- 3) Utilize current local approaches of clinical assessment to determine response to medication and whether medication changes are indicated. Such assessments should include the presence and severity of positive and negative symptoms, AIMS score, tremor, weight and GAF.
- 4) For patients currently on olanzapine, consider a trial of risperidone or quetiapine in the face of relapse or significant/ problematic weight gain or other side effects.



<sup>1</sup> Consider a trial of haloperidol or fluphenazine decanoate for patients non-adherent to therapy.

<sup>2</sup> Ziprasidone may be considered in patients with significant intolerance or poor response while taking another atypical antipsychotic. See ziprasidone criteria for use at [www.vapbm.org](http://www.vapbm.org) for contraindications to using this drug.

<sup>3</sup> Patient eligible for clozapine trial - suboptimal response or adverse events to 2 or more antipsychotics

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