Olanzapine Long Acting Injection (O-lan-za-peen)

Patient Information - Hillmorton Hospital Pharmacy

Why have I been prescribed olanzapine?

Olanzapine is used to treat schizophrenia, psychosis and similar conditions. It is also used for bipolar mania and as a mood stabiliser.

When people have schizophrenia, they may 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".



Olanzapine can help to relieve these symptoms. Many people with schizophrenia also experience "negative symptoms". They feel tired, lacking in energy and may become quite inactive and withdrawn. Olanzapine may help relieve these symptoms as well.

Olanzapine is sometimes prescribed for people who have had side effects such as strange movements or tremors or shaking with other types of antipsychotics. Olanzapine does not usually cause these side effects.

Older drugs may also increase levels of a hormone called prolactin which can affect sexual functioning. Olanzapine is less likely to increase prolactin.

What exactly is olanzapine?

Olanzapine belongs to a group of medicines called antipsychotics. These are used to treat schizophrenia and similar disorders. These illnesses are sometimes referred to as psychoses, hence the name "antipsychotic". Olanzapine is a newer antipsychotic and works in a different way to the older antipsychotics.

Olanzapine may help people who have negative symptoms and have not got much better on older antipsychotics.

The brand or trade-name of the long acting olanzapine injection is "Zyprexa Relprevv[™]". Long acting injections like this are also known as "depot injections". They have some advantages: you do not have to remember to take tablets every day and the amount of olanzapine in your blood stream is more constant than if you were taking tablets. Compared with taking tablets, you are more likely to stay well and out of hospital if you are on a long acting injection.



Is olanzapine safe for me?

Olanzapine is usually safe when 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:

- If you have epilepsy, diabetes, Parkinson's disease, glaucoma, suffer from liver, kidney, thyroid, heart, or prostate trouble.
- If you are pregnant, breast feeding or wish to become pregnant.

How is Olanzapine Long Acting Injection given?

Olanzapine long acting injection is an injection given every two to four weeks into the large muscle in the buttocks. The medicine is then released over several weeks.

Avoid massaging or rubbing the area where the injection was administered. Massaging or rubbing the injection site may cause the product to break down and enter the bloodstream too quickly. This may result in the "post injection syndrome". Only a trained nurse or doctor may give olanzapine depot.

What will happen to me when I am given a long acting olanzapine injection?

Antipsychotics do not work straight away. 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 calmer. Later, after one or two weeks, other symptoms should begin to improve.

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.

Post Injection Syndrome

If olanzapine long acting injection enters your bloodstream too quickly, you may experience some of the symptoms below. This is known as the post-injection syndrome. This is a rare reaction that happens about 7 times for every 10,000 injections given. Even though it is considered rare, it is important you are aware of and are monitored for this possible reaction each time you go for your injection. In extreme cases these can lead to unconsciousness. These symptoms will usually disappear within 1 to 3 days.

- Excessive sleepiness
- Confusion
- Irritability
- Dizziness, disorientation
- Anxiety
- Aggression

- Difficulty talking or walking
- Weakness
- Muscle stiffness or shaking
- Increases in blood pressure
- Convulsions

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Post injection syndrome usually occurs within the first two hours after your injection. For this reason, you will need to remain supervised by your healthcare provider for at least two hours after each dose. It is important that you do not drive or operate heavy machinery for the remainder of the day after your injection. If you get these symptoms more than two hours after your injection, contact your doctor or nurse immediately. They will need to assist you until your symptoms go away.

Can I drive?

Do not drive or operate heavy machinery on that day that you are given your olanzapine long acting injection. Olanzapine long acting injection can make you drowsy, even days after your injection. If this happens, contact your doctor or nurse and do not drive or operate heavy machinery until you no longer feel drowsy.

What about alcohol and marijuana?

It is recommended that people taking olanzapine do not drink alcohol, use marijuana or other recreational drugs. These taken with olanzapine can make some people drowsy. They can lessen the effect of olanzapine and add to side effects of clumsiness which can lead to falls or accidents. As well as this, using recreational drugs can make your psychosis worse.

Once you are used to your olanzapine you can sometimes drink alcohol in small amounts without any harm. If you want a drink, try a glass of your normal drink and see how you feel. If it doesn't make you feel drowsy and uncoordinated it is probably okay to drink small amounts.

It pays to be cautious because alcohol affects people in different ways, especially when they are taking medication. It is recognised that many road accidents occur because of mixing alcohol, marijuana or other recreational drugs with these medicines. Don't stop taking olanzapine just because you fancy a joint, a drink or party pill at the weekend.

Are there any medicines I should avoid or take care with?

Always consult with your doctor or pharmacist before starting a new medicine or purchasing medicines over the counter. Olanzapine, when combined with some other medicines, can cause unpleasant side effects. You should avoid sedating antihistamines and cough and cold preparations which contain antihistamines.

When I feel better, can I stop taking olanzapine?

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



What is the metabolic syndrome?

Antipsychotics can occasionally cause something called the metabolic syndrome. This is a combination of weight gain, raised cholesterol and raised blood sugars. Some antipsychotics are more likely to cause the metabolic syndrome than others.

When you start an antipsychotic, your weight, height and waist will be measured. A recording of your heart called an ECG and a number of blood tests will be performed. These will be repeated several times during the first year that you are on an antipsychotic to ensure that you remain healthy. It is important when you start an antipsychotic that you eat a healthy diet and that you do some exercise. Talk to your case manager or doctor for advice about this. They may also offer to refer you to a dietitian.

| SIDE EFFECTS | WHAT IS IT? | WHAT SHOULD I DO IF THIS HAPPENS TO ME? | |
|-----------------------------------|---|---|--|
| Common | | | |
| Drowsiness | Feeling sleepy or sluggish. It can last for a few hours after your dose. | Don't drive or use machinery. Discuss with your doctor if this continues to be an issue. | |
| Feeling hungry and weight gain | Eating more and putting on weight. | Try and avoid putting on weight in the first place. Eat a healthy diet full of vegetables and fibre. Spend time walking or doing other physical activity. Avoid fatty foods like chocolate and crisps and high sugar foods such as cakes, sweets and fizzy drinks. Ask to see a dietician if you need help with food choices. | |
| Constipation | Feeling "bunged up" inside. You can't pass a bowel motion. | Eat more fibre, e.g. bran and vegetables. Do more walking. Make sure you drink plenty of fluid. A mild laxative from a pharmacy might help. | |
| Fairly uncommo | n | | |
| Sexual Dysfunction | Lack of libido. No interest in sex. Inability to maintain an erection or have an orgasm. | Discuss this with your doctor when you next meet. | |



| Uncommon | | |
|-----------------------------------|--|---|
| Dry Mouth | Your mouth will feel dry and you will not produce much saliva (spit). Dry mouth can cause problems with speech, taste, chewing and swallowing. It can also the increase the risk of getting dental decay and infection in your mouth. | To help prevent dental problems sip water regularly to moisten your mouth. Brush your teeth twice a day with fluoride toothpaste. Avoid sugary drinks and snacks between meals. Try sugar free chewing gum to stimulate saliva or discuss using an oral lubricant with your pharmacist or dentist. |
| Peripheral oedema | When your ankles swell up. | Discuss this with your doctor when you next meet. |
| Postural 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. |
| Swelling around injection site | The injection site feels painful and lumpy | Report it to your doctor or nurse. Warm baths and regular exercise like walking can help. Do not rub the injection site. |
| Rare | | |
| Agranulocytosis or neutropenia | Low numbers of white cells in the blood. You may get more infections. | This can be picked up from a blood test. Always tell your doctor or carer if you develop a sore throat, fever, flu like symptoms or feel ill in anyway. |
| Photo sensitivity | Skin goes blotchy in the sun. | Avoid direct sunlight or sunlamps. Use a high factor sun block cream. |
| Hyperthermia or hypothermia | The way your body reacts to temperature changes. You feel too hot in warm environments and too cold in cool ones. | Make sure you keep cool in hot weather and keep warm in cool weather. Take care when exercising strenuously to keep cool and hydrated. |

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

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