

The mild anticholinergic effect of Chlorpromazine HCl (Laractyl) may be enhanced by other anticholinergic drugs possibly leading to constipation, heat stroke, etc.

The action of some drugs may be opposed by Chlorpromazine HCl (Laractyl): these include amphetamine, levodopa, clonidine, guanethidine, adrenaline.

Anticholinergic agents may reduce the antipsychotic effect of Chlorpromazine HCl (Laractyl).

Some drugs interfere with absorption of neuroleptic agents: antacids, anti-Parkinson, lithium. Increases or decreases in the plasma concentration of a number of drugs, e.g. propranolol, phenobarbitone have been observed but were not of clinical significance.

High doses of Chlorpromazine HCl (Laractyl) reduce the response to hypoglycemic agents the dosage of which might have been raised.

Documented adverse clinically significant interactions occur with alcohol, guanethidine and hypoglycaemic agents. Adrenaline must not be used in patients overdose with Chlorpromazine HCl (Laractyl).

Simultaneous administration of desferrioxamine and prochlorperazine has been observed to induce a transient metabolic encephalopathy characterized by loss of consciousness for 48-72 hours. It is possible that this may occur with Chlorpromazine HCl (Laractyl) since it shares many of the pharmacological activities of prochlorperazine.

Minor side effects: Nasal stuffiness, dry mouth, insomnia, agitation.

Adverse effects: Liver function: Jaundice, usually transient, occurs in a very small percentage of patients taking Chlorpromazine HCl (Laractyl). A premonitory sign may be a sudden onset of fever after one to three weeks of treatment followed by the development of jaundice. Chlorpromazine HCl (Laractyl) jaundice has the biochemical and other characteristics of obstructive jaundice and is associated with obstructions of the canaliculi by bile thrombi; the frequent presence of an accompanying eosinophilia indicates the allergic nature of this phenomenon. Treatment should be withheld on the development of jaundice.

Cardio-respiratory: Hypotension, usually postural, commonly occurs. Elderly or volume depleted subjects are particularly susceptible; it is more likely to occur after intramuscular administration.

Cardiac arrhythmias, including atrial arrhythmia, A-V block, ventricular tachycardia and fibrillation have been reported during neurologic therapy, possibly related to dosage. Pre-existing cardiac disease, old age, hypokalaemia and concurrent tricyclic antidepressants may

predispose. ECG changes, usually benign, include widened QT interval, ST depression, U-waves and T-waves changes.

Respiratory depression is possible in susceptible patients.

Blood picture: A mild leucopenia occurs in up to 30% of patients on prolonged high dosage. Agranulocytosis may occur rarely; it is not dose related. The occurrence of unexplained infections or fever requires immediate haematological investigation.

Extrapyramidal: Acute dystonias or dyskinesias, usually transitory are more common in children and young adults, and usually occur within the first 4 days of treatment or after dosage increases.

Akathisia characteristically occurs after large initial doses.

Parkinsonism is more common in adults and the elderly. It usually develops after weeks or months of treatment. One or more of the following may be seen: tremor, rigidity, akinesia or other features of Parkinsonism. Commonly just tremor.

Tardive dyskinesia. If this occurs it is usually, but not necessarily, after prolonged or high dosage. It can even occur after treatment has been stopped. Dosage should therefore be kept low whenever possible.

Skin and eyes: Contact skin sensitisation is a serious but rare complication in those frequently handling preparations of Chlorpromazine HCl (Laractyl): the greatest care must be taken to avoid contact of the drug with the skin.

Skin rashes of various kinds may also be seen in patients treated with the drug. Patients on high dosage should be warned that they may develop photosensitivity in sunny weather and should avoid exposure to direct sunlight.

Contraindications, Warnings: There is inadequate evidence of the safety of Chlorpromazine HCl (Laractyl) in human pregnancy but it has been widely used for many years without apparent ill consequence. There is evidence of harmful effects in animals. Like other drugs it should be avoided in pregnancy unless the physician considers it essential.

It may occasionally prolong labour and at such a time should be withheld until the cervix is dilated 3- 4 cm. Possible adverse effect on the neonate include lethargy or paradoxical hyperexcitability, tremor and low Apgar score. Chlorpromazine HCl (Laractyl) being excreted in milk, breastfeeding should be suspended during treatment.

Precautions: Chlorpromazine HCl (Laractyl) should be avoided in patients with liver or renal dysfunction, epilepsy. Parkinson's disease, hypothyroidism, cardiac failure, phaeochromocytoma, myasthenia