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EFFECTIVENESS AND SAFETY OF RAPID CLOZAPINE DOSE TITRATION

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Background: Clinical guidelines recommend slow clozapine dose titration, a procedure introduced in the 1980's to decrease the risk of drug-induced seizures and hypotension. The procedure is considered safe, but may delay adequate control of symptoms.
Objective: To evaluate the effectiveness and safety of rapid clozapine dose titration in schizophrenia patients at high risk of harming themselves or others.
Methods: The rapid clozapine dose titration was used for a consecutive cohort of schizophrenia patients (N=111, mean age 42.1%, 52% males) admitted to a single psychiatric hospital. Clozapine was started with a dose of 12.5-25 mg and additional doses of 25-50 mg where given as needed every 6 hours. The clozapine treatment was intiated on admission for 73 patients who had been treated with clozapine in the past (Group 1). Thirty-eight patients received clozapine after failing to respond to other antipsychotics (Group 2).
Results: Admission PANSS scores were similar in the 2 groups (104.3±2.9 vs. 103.8±5.1, p=0.48). Symptom control was obtained after 4.1± 3.1 days with a maximum dose of 352.7 ±176.1 mg clozapine/day in group 1 and after 7.1 ± 4.8 days (p < 0.001) with a maximum dose of 408.6 ± 187.5 mg clozapine/day (p=0.12) in Group 2. The PANSS scores at discharge indicated similar reduction in symptom severity (60.5±5.4 vs. 59.8±7.4, p=0.539). None of the patients treated had seizures, syncope, neutropenia or other significant adverse events.
Conclusions: Rapid clozapine dose titration appears safe and effective when used in schizophrenia patients with or without prior exposure to the drug.

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