

## Navigating the Complexities of Antipsychotic Medications

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## ABOUT THE STUDY

Antipsychotic medications, also known as neuroleptics, are a class of drugs used to treat a wide range of mental illnesses, including schizophrenia, bipolar disorder, and major depressive disorder. These medications work by altering the levels of certain chemicals in the brain, known as neurotransmitters, which are responsible for regulating mood, thinking, and behavior.

Antipsychotic drugs have evolved through first (e.g., haloperidol), second (olanzapine and clozapine) and a possible third (aripiprazole) generation of drugs in an attempt to improve efficacy and tolerability, with minimal side-effects. Despite robust scientific efforts over the past 70 years, there remains a need to develop drugs with greater efficacy, particularly in relation to the negative and cognitive symptoms of schizophrenia, addressing treatment resistance, with a lower side-effects profile compared to existing antipsychotic drugs.

Identifying and investigating novel therapeutic targets remains an important component of future antipsychotic drug discovery; however, mounting evidence demonstrates neurobiological, neuroanatomical and functional heterogeneity in cohorts of individuals with schizophrenia.

While antipsychotic medications have been a mainstay of psychiatric treatment for decades, the use of these drugs is not without its complexities. One of the biggest challenges in prescribing antipsychotics is determining the right dosage and duration of treatment for each individual patient. This is because the efficacy of these medications can vary greatly from person to person, and finding the right balance can be a delicate process.

Another complexity of antipsychotic medications is their potential side effects. These drugs can cause a wide range of adverse reactions, including drowsiness, weight gain, and movement disorders such as Parkinson's-like symptoms. In some cases, these side effects can be so severe that they outweigh the benefits of the medication. Additionally, antipsychotics can also interact with other medications a patient may be taking, further complicating treatment. For example, some antipsychotics may interact with blood thinners, increasing the risk of bleeding.

Despite these complexities, antipsychotics remain an important treatment option for patients with mental illnesses. With proper monitoring and management, these medications can significantly improve patients' quality of life.

One strategy to navigate these complexities is to use a multidisciplinary approach that involves not only psychiatrists but also primary care physicians, nurses, and other healthcare professionals. This approach can provide a more comprehensive assessment of the patient's overall health, including physical, mental and social well-being, that can help in selecting the right medication, and in the right dose.

Another strategy is the use of newer generation antipsychotics, also known as atypical antipsychotics, which have a lower risk of causing Parkinson's-like symptoms and other movement disorders. These newer medications also have a lower risk of causing tardive dyskinesia, a condition characterized by involuntary movements of the face and tongue, which can be a long-term complication of traditional antipsychotics.

It's also important to note that antipsychotics are not the only treatment option available. In some cases, psychotherapy and other non-pharmacological interventions may be more appropriate, depending on the patient's specific needs. For example, Cognitive-Behavioral Therapy (CBT) can be an effective treatment for patients with schizophrenia and other psychosis-related disorders.

In conclusion, while antipsychotic medications can be a valuable tool in the treatment of mental illnesses, the complexities of prescribing these drugs cannot be ignored. A multidisciplinary approach, the use of newer generation antipsychotics, and a combination of medication and psychotherapy can help navigate these complexities, and improve treatment outcomes for patients.

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Received: 31-Dec-2022, Manuscript No. JOP-23-19621; Editor assigned: 03-Jan-2023, PreQC No. JOP-23-19621 (PQ); Reviewed: 17-Jan-2023, QC No. JOP-23-19621; Revised: 24-Jan-2023, Manuscript No. JOP-23-19621 (R); Published: 31-Jan-2023. DOI: 10.35248/2378-5756.23.26.552

Citation: Leung K (2023) Navigating the Complexities of Antipsychotic Medications. J Psychiatry. 26:552.

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