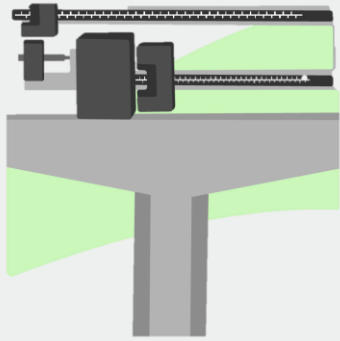


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What is antipsychotic induced weight gain?

Antipsychotics are used to treat several mental health conditions including schizophrenia, bipolar disorder, and psychosis. Treatment is usually with a newer class of antipsychotics, called second-generation antipsychotics. These medications can have less side effects but can lead to weight gain. Both adults and children taking these medications can experience this.

What are the risks of antipsychotic induced weight gain?^{1,2}

Individuals treated with antipsychotics are at increased risk of developing other diseases. These include diabetes, heart disease, and metabolic syndrome. Metabolic syndrome includes three or more of the following: high blood pressure, high blood sugar, low HDL cholesterol, high triglycerides, and enlarged waistline. Metabolic syndrome increases the risk of heart disease, type 2 diabetes, and stroke. Lastly, individuals who gain weight might not want to take their medication and could stop the medication without talking to a provider.

Who is at risk of antipsychotic induced weight gain?^{2,3,4}

Studies have shown that about 80% of patients gain more than 7% of their baseline weight within the first years of treatment.³ Anyone taking an antipsychotic is at risk of weight gain. However, studies have shown children may be at more risk. It is also important to think of family history. Individuals who have a significant family history of diabetes, high cholesterol, and high blood pressure are at increased risk of weight gain. People who are not very active are also at increased risk. Lastly, risk differs based on the antipsychotic used. See the table below.

Medication:	Ability to cause weight gain:
Clozapine, Olanzapine	High
Chlorpromazine, Iloperidone, Quetiapine, Risperidone, Paliperidone	Moderate
Aripiprazole, Amisulpride, Asenapine, Brexpiprazole, Cariprazine, Fluphenazine, Haloperidol, Lumateperone, Lurasidone, Ziprasidone	Low

How is antipsychotic induced weight gain monitored?⁵

Before starting an antipsychotic, the following tests should be done:

- Height and weight
- Waist measurement
- Blood pressure
- Fasting blood sugar
- Fasting cholesterol

An abnormal value would not mean an individual could not use an antipsychotic. However, if an individual has an abnormal value, treatment and/or closer monitoring can be considered.

Repeat these tests again 4, 8, and 12 weeks after starting the medication. If a person gains more than 5% of their weight, a change in medication or dose might be needed.

How can people lower the risk of antipsychotic induced weight gain without medication?²

- Mindful eating which includes making healthier food choices
- Increased physical activity, like walking
- Cognitive therapy which explores eating behaviors and overall well-being
- Behavioral therapy including goal setting, social support, and monitoring exercise

What medications can treat antipsychotic induced weight gain?^{6,7,8,9,10}

There are medications that have been studied for antipsychotic induced weight gain. They can be used to treat other diseases. However, they have also been shown to be helpful in weight gain associated with antipsychotics.

Medication	Typical Dose	Primary Side Effects
Metformin ⁶ (Glucophage [®])	Immediate release: <ul style="list-style-type: none"> • Initial: 250-500 mg by mouth twice daily • Maintenance: 750-2000 mg by mouth daily in divided doses Extended release: <ul style="list-style-type: none"> • Initial: 500-1000 mg by mouth once daily • Maintenance: 1000-2000 mg by mouth daily 	Common: nausea, vomiting Rare but serious: lactic acidosis, hypoglycemia
Topiramate ⁷ (Topamax [®])	<ul style="list-style-type: none"> • Initial: 50 mg by mouth once daily • Maintenance: up to 200 mg by mouth once or twice daily 	Common: drowsiness, dizziness, decreased appetite, confusion
GLP-1 Agonists: Semaglutide ^{8,9} (Wegovy [®] , Rybelsus [®]) Liraglutide ¹⁰ (Saxenda [®])	Semaglutide (Wegovy [®]): <ul style="list-style-type: none"> • Initial: 0.25 mg injection once weekly • Maintenance: up to 2.4 mg injection once weekly Liraglutide (Saxenda [®]): <ul style="list-style-type: none"> • Initial: 0.6 mg injection daily • Maintenance: up to 3 mg injection daily Semaglutide (Rybelsus [®]): <ul style="list-style-type: none"> • Not yet FDA approved for weight loss • Oral doses up to 50 mg have shown benefit in weight loss Terzepatide ^{11,12} (Mounjaro [®]), (Zebound [®]): <ul style="list-style-type: none"> • Mounjaro: Dose range from 2.5mg to 15mg weekly injections • Zebound: Weight loss in clinical trials ranged from 15-20% from 5mg, 10mg to 15mg doses 	Common: nausea, vomiting, flatulence, bloating, injection site reactions Rare but serious: increased risk of pancreatitis, gastroparesis, and bowel obstruction

How do I know if a medication would be helpful for me?

Metformin, topiramate, and semaglutide have been shown to help with antipsychotic induced weight gain. These are not the only medications that might be used. If a person wishes to start a medication for antipsychotic induced weight gain they should first talk to their doctor and pharmacist. The individual and provider should work together to find the right medication for the individual.



Go online to find more information and to view the references for this toolkit.

aapp.org/591673

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