DRUG ALERT

Hyperglycaemia and diabetes mellitus associated with atypical antipsychotics

The Medicines Control Council alerts all health care professionals to new safety information regarding the increased risk of hyperglycaemia and diabetes mellitus in patients treated with the atypical antipsychotic medicines, clozapine, olanzepine, quetiapine, risperidone and ziprasidone.

Epidemiological studies have identified an increased risk of treatment-emergent metabolic adverse events associated with the atypical antipsychotic medicines. Lipid abnormalities and weight gain are frequently occurring adverse effects associated with the atypical antipsychotics. Abnormalities in glucose metabolism range from hyperglycaemia in patients with or without previously known diabetes mellitus to cases of ketoacidosis, hyperosmolar coma and death.

The background risk of type 2 diabetes mellitus in schizophrenic patients as well as the increasing incidence of diabetes mellitus in the general population may be confounders. Patients with existing diabetes in whom antipsychotic therapy is initiated should be closely monitored for worsening of diabetic control.

All patients treated with atypical antipsychotic medicines should be monitored for symptoms of hyperglycaemia. Fasting blood glucose testing should be done on all patients who develop symptoms of hyperglycaemia, or who are at risk for type 2 diabetes.

In some cases, hyperglycaemia resolved after discontinuation of the atypical antipsychotic medicine; however, there have been cases in which it has persisted despite stopping therapy, requiring the prescription of anti-diabetic medication.

Please continue reporting all adverse drug reactions associated with atypical antipsychotic medicines and other medicines to the National Adverse Drug Event Monitoring Centre, tel. (021) 447-1618, fax (021) 448-6181.

Medicines Control Council
Cape Town

References

http://www.tga.gov.au/adr/aadrb/aadr0406.htm#4
http://www.fda.gov/medwatch/SAFETY/2004
Melkersson K, Dahl M. Adverse metabolic effects associated with atypical antipsychotics. *Drugs* 2004; **64:** 701-723.