Medicines forChildren information for parents and carers

# Olanzapine for schizophrenia, bipolar disorder and mania

This leaflet is about the use of olanzapine for schizophrenia, bipolar disorder and mania.

This leaflet has been written specifically about the use of this medicine in children. The information may differ from that provided by the manufacturer. Please read this leaflet carefully. Keep it somewhere safe so that you can read it again.

> Do not stop giving olanzapine suddenly, as your child is likely to get withdrawal symptoms.

# Name of drug

Olanzapine (oh-LAN-za-peen) Brand names: Zalasta®, Zyprexa®, Zyprexa Velotab®

#### Why is it important for my child to take this medicine?

Olanzapine belongs to the group of medicines called antipsychotics. It works by changing the activity of chemicals in the brain called neurotransmitters and will affect your child's mood and psychological behaviour.

#### What is olanzapine available as?

- Tablets: 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg; these contain small amounts of lactose
- Orodispersible tablets (Velotabs<sup>®</sup>): 5 mg, 10 mg, 15 mg, 20 mg; these may contain small amounts of aspartame and gelatin

If you have any concerns or questions, speak with your child's doctor or pharmacist.

# When should I give olanzapine?

Olanzapine is usually given once each day, usually in the evening. Try to give it at about the same time each day.

# How much should I give?

Your doctor will work out the amount of olanzapine (the dose) that is right for your child. The dose will be shown on the medicine label.

Your child will probably be started on a low dose. Your doctor may then increase the dose if they think this will help.

# It is important that you follow your doctor's instructions about how much to give.

#### How should I give it?



Tablets should be swallowed with a glass of water, milk or juice. Your child should not chew the tablet.

Orodispersible tablets: Make sure your hands are dry. Take the tablet out of the blister pack and put it on your child's tongue straight away. The tablet will dissolve rapidly.

You can also dissolve the orodispersible tablet in a glass of water, fruit juice or milk. Stir it well. Your child should drink it all straight away.

#### When should the medicine start working?

This depends on what your child is being treated for. If your child gets hallucinations (seeing or hearing things that are not there), these should start to get better after a week or so. It may take longer than this for delusions (believing something to be real that is not) to stop. It may take 6-8 weeks before your child's mood and behaviour seem more normal. It is important that you continue to give olanzapine during this time. Contact your doctor if you are worried.

#### What if my child is sick (vomits)?

- If your child is sick less than 30 minutes after having a dose of olanzapine, give them the same dose again.
- If your child is sick more than 30 minutes after having a dose of olanzapine, you do not need to give them another dose. Wait until the next normal dose.

# What if I forget to give it?

If you remember before your child goes to bed, give them the missed dose. You do not need to wake them up, however. You can give the missed dose in the morning, as long as this is at least 12 hours before the next dose is due. If olanzapine makes your child sleepy, it may be better not to give the missed dose in the morning.

#### Never give a double dose of olanzapine.

# What if I give too much?

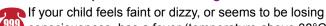
#### It can be dangerous to give too much olanzapine.

If you think you may have given your child too much olanzapine, contact your doctor or local NHS services (111 in England and Scotland; 0845 4647 in Wales) or take your child to hospital. Take the medicine container or packet with you, even if it is empty. This will be useful to the doctor. Have the packet with you if you telephone for advice.

#### Are there any possible side-effects?

We use medicines to make our children better, but sometimes they have other effects that we don't want (side-effects).

#### Side-effects that you must do something about



(1) If your child reeis raint of dizzy, o. consciousness, has a fever (temperature above 38°C), is cold and sweaty, has a weak or rapid heart rate (they may feel as though their heart is racing or fluttering) and stiff muscles, they may be having a rare reaction to olanzapine. Contact your doctor or take your child to hospital or call an ambulance straight away.

Contact your doctor straight away if your child has any of the following:

- muscle spasms (stiffening of the muscles), twitching in the face and body, or uncontrolled movements of the tongue or jaw, or they seem restless and cannot control their movements
- fever, sore throat, rash or mouth ulcers.

#### Other side-effects you need to know about

- Your child may feel sleepy or sluggish (drowsy) for a few hours after giving a dose. It is therefore best to give olanzapine to your child at bedtime.
- If your teenager drives, they need to be aware that their reaction times may be slower while taking olanzapine and that they may feel drowsy.
- Rarely, girls may find their periods become irregular or stop or that they have swelling, soreness or leakage from their breasts. Boys may also feel sore around the breast area. Tell your doctor about these symptoms at your next visit.

Your child may get the following side-effects. If they are still a problem after 2 weeks, contact your doctor for advice.

- They may feel sleepy, tired or weak.
- They may get constipated (have difficulty doing a poo). Make sure they eat food that contains fibre (e.g. bran, wholemeal bread, rice, pasta, fruit and vegetables) and that they drink plenty of fluid.
- They may feel light-headed or dizzy when they stand up, or may faint. This is because olanzapine may lower the blood pressure. They should stand up slowly, and should lie down for a while if they feel dizzy. If this becomes a problem, contact your doctor.
- They may be more hungry than usual (increased appetite). Encourage them to eat fruit and vegetables and low-calorie foods, rather than foods that contain a lot of calories (avoid crisps, cakes, biscuits and sweets), and to have plenty of exercise. Otherwise they may put on weight.
- They may have a dry mouth. Eating citrus fruits (e.g. oranges) and taking sips of water may help.
- Your child's skin will be more sensitive to sunlight. Keep them out of strong sun. When outdoors, they should wear a long-sleeved top, trousers and a hat and should use a high-factor sun screen (at least SPF 30).

There may, sometimes, be other side-effects that are not listed above. If you notice anything unusual and are concerned, contact your doctor. You can report any suspected side-effects to a UK safety scheme at http://yellowcard.mhra.gov.uk.

# Can other medicines be given at the same time as olanzapine?

- You can give your child medicines that contain paracetamol or ibuprofen, unless your doctor has told you not to.
- Olanzapine should not be taken with some common drugs that you get on prescription. Tell your doctor and pharmacist about any other medicines your child is taking before giving olanzapine.
- Check with your doctor or pharmacist before giving any other medicines to your child. This includes herbal or complementary medicines.

# Is there anything else I need to know about this medicine?

- Do not suddenly stop giving your child olanzapine, as they may get withdrawal symptoms (difficulty sleeping, tremor, anxiety, nausea, vomiting).
- Generally, olanzapine should not be taken during pregnancy, particularly during the last 3 months. If your daughter thinks she might be pregnant, she should contact her doctor straight away. She should continue to take olanzapine until she has seen her doctor.

Your child should be aware that if they drink alcohol while taking olanzapine, the effects will be stronger. Ideally, they should not drink alcohol.

# General advice about medicines

- Try to give medicines at about the same times each day, to help you remember.
- Only give this to *your* child. Never give it to anyone else, even if their condition appears to be the same, as this could do harm.

If you think someone else may have taken the medicine by accident, contact your doctor for advice.

- Make sure that you always have enough medicine. Order a new prescription at least 2 weeks before you will run out.
- Make sure that the medicine you have at home has not reached the 'best before' or 'use by' date on the packaging. Give old medicines to your pharmacist to dispose of.

#### Where should I keep this medicine?

- Keep the medicine in a cupboard, away from heat and direct sunlight. It does not need to be kept in the fridge.
- Keep the medicine in the container it came in.
- Make sure that children cannot see or reach the medicine.

# Who to contact for more information

Your child's doctor or pharmacist will be able to give you more information about olanzapine and about other medicines used to treat your child's condition.

You can also get useful information from:

England – NHS 111: 111 - www.nhs.uk

Scotland – NHS 24: 111 - www.nhs24.com

Wales/Galw Lechyd Cymru – NHS Direct: 0845 4647 - www.nhsdirect.wales.nhs.uk

Northern Ireland – NI Direct: www.nidirect.gov.uk Young MINDS: 0808 802 5544 - www.youngminds.org.uk Mind: 0845 766 0163 - www.mind.org.uk



# www.medicinesforchildren.org.uk





Health & care information you can trust

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The primary source for the information in this leaflet is the British National Formulary for Children. For details on any other sources used for this leaflet, please contact us through our website, www.medicinesforchildren.org.uk

We take great care to make sure that the information in this leaflet is correct and up-to-date. However, medicines can be used in different ways for different patients. It is important that you ask the advice of your doctor or pharmacist if you are not sure about something. This leaflet is about the use of these medicines in the UK, and may not apply to other countries. The Royal College of Paediatrics and Child Health (RCPCH), the Neonatal and Paediatric Pharmacists Group (NPPG), WellChild and the contributors and editors cannot be held responsible for the accuracy of information, omissions of information, or any actions that may be taken as a consequence of reading this leaflet.