
Copyright © 2011 BMJ Publishing Group Ltd.

A copy can be downloaded for personal non-commercial research or study, without prior permission or charge.

The content must not be changed in any way or reproduced in any format or medium without the formal permission of the copyright holder(s)

When referring to this work, full bibliographic details must be given.

http://eprints.gla.ac.uk/51338/

Deposited on: 24th January 2013
Two points of clinical interest add to Mackin and Thomas’s summary of the indications for and use of atypical antipsychotic drugs. \(^1\)

Firstly, up to 5\% of patients with schizophrenia commit suicide,\(^2\) which is similar to the rates in major depression and considerably higher than those in the general population. Suicidal ideation at initial presentation is thought to predict suicide attempt in the near future.\(^3\) Clozapine is the only antipsychotic drug with an anti-suicidal effect,\(^4\) so it may be useful in clinically significant suicidal ideation, especially secondary to psychotic symptoms.

Secondly, recent long term follow-up data suggest that antipsychotic use may be an independent risk factor for generalised and specific reduction in grey matter volume.\(^5\) This effect was dose dependent, the changes were subtle, and atypical antipsychotics were milder than typical antipsychotics.

Antipsychotic use must therefore be judicious and the minimal effective dose tailored to each patient.

Competing interests: None declared.

1 Mackin P, Thomas SH. Atypical antipsychotic drugs. BMJ 2011;342:d1126. (4 March.)

Cite this as: BMJ 2011;342:d2148