Risperidone improves severe tardive dyskinesia in people with schizophrenia


MAIN RESULTS

Risperidone significantly reduced tardive dyskinesia compared with placebo over 12 weeks (mean decrease in AIMS score: −5.5 with risperidone vs. −1.1 with placebo, p = 0.001). The differences between groups became significant at the end of the 8th week onwards. 68% of the risperidone group responded, compared with 30% of the placebo group (p = 0.029). There was no significant difference in the Parkinsonian-ESRS or Dystonia-ESRS scores at 12 weeks (see Table). Improvement in tardive dyskinesia was mainly in the orofacial areas.

CONCLUSIONS

Risperidone significantly improves severe tardive dyskinesia caused by long term antipsychotic use in people with schizophrenia.
Risperidone improves severe tardive dyskinesia in people with schizophrenia

*Evid Based Mental Health* 2004 7: 83
doi: 10.1136/ebmh.7.3.83

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