



NHS Foundation Trust

Clozapine: reminder of potentially fatal risk of intestinal obstruction, faecal impaction, and paralytic ileus as a result of constipation and reduced gastric motility

The risk of gastrointestinal adverse effects is long established with clozapine. Warnings are provided in the Summary of Product Characteristics and Patient Information Leaflet and in the BNF. These adverse events are thought to be due to the anticholinergic properties of clozapine. The effects can range from constipation, which is very common, to intestinal obstruction, faecal impaction, and paralytic ileus, which are very rare. Cases have been fatal.

The MHRA issued a reminder in Drug Safety Update in October 2017 https://www.gov.uk/drug-safety-update/clozapine-reminder-of-potentially-fatal-risk-of-intestinal-<u>obstruction-faecal-impaction-and-paralytic-ileus</u>

They advised

- If constipation occurs during treatment with clozapine (Clozaril, Denzapine, Zaponex), it is vital that it is recognised and actively treated.
- exercise particular care in patients receiving other drugs known to cause constipation (especially those with anticholinergic properties), patients with a history of colonic disease or lower abdominal surgery, and in patients aged 60 years and older
- clozapine is contraindicated in patients with paralytic ileus
- advise patients to report constipation immediately
- actively treat any constipation that occurs

The incidence of life threatening clozapine-induced gastrointestinal hypomotility is similar to that of agranulocytosis, however the associated fatality rate is much, much higher, potentially due to less formal monitoring, symptoms not being recognised or actively treated.

It is important that any healthcare professional in contact with those on clozapine always enquires about constipation, bearing in mind that if bowel function has been altered for some time, patients may not know what is "normal" and may be reluctant to mention constipation and related symptoms unprompted.

- Use open questioning rather than just ask if the person is constipated. Ask about symptoms such as distended abdomen, bloating, stomach ache, feeling sick or loss of appetite.
- Advice patient, family members and carers of the need to prevent constipation.
- Advise of the importance of fruit and vegetable intake, fluid intake and exercise.
- Minimise the use of other constipating medication. See https://www.prescqipp.info/resources/send/294-anticholinergic-drugs/2864-bulletin-140anticholinergics-drugs
- Consider use of a stool softener and a stimulant laxative.

For further information see Bowel habit monitoring for patients prescribed clozapine (including information on the management of constipation) available in the intranet document store. Call for reporting All suspected adverse reactions to antipsychotic medicines can be reported via the Yellow Card Scheme.

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Reference:

Approved by: Safe medicines practice group January 2018

