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Understanding antipsychotics: Uses, beneýts, and considerations

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INTRODUCTION

Antipsychotic medications represent a critical component in the treatment of various mental health conditions, particularly psychotic disorders like schizophrenia and bipolar disorder. These medications, also known as neuroleptics, are designed to alleviate symptoms such as hallucinations, delusions, and disorganized thinking. While their primary use is in managing psychosis, antipsychotics can also be prescribed for other conditions like severe depression, Tourette's syndrome, and sometimes as adjunct treatments for anxiety disorders. One of the primary mechanisms of antipsychotics involves blocking dopamine receptors in the brain. Dopamine is a neurotransmitter associated with pleasure, reward, and motor function, but abnormal dopamine activity is implicated in psychotic symptoms. By regulating dopamine levels, antipsychotics help stabilize mood and reduce the severity of hallucinations and delusions. There are two main classes of antipsychotics: typical (frst-generation) and atypical (second-generation). Typical antipsychotics tend to have more pronounced side efects such as movement disorders, while atypical antipsychotics are newer and often preferred due to their lower risk of extrapyramidal symptoms (Arana GW, 2000).

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While efective, the use of antipsychotics requires careful consideration of potential side efects and individual response. Common side efects include weight gain, sedation, and metabolic changes, which can increase the risk of conditions like diabetes and cardiovascular disease over the long term. Some individuals may also experience motor disturbances such as tremors or involuntary movements. Consequently, healthcare providers monitor patients closely to adjust dosages or switch medications if side efects become problematic.In recent years, there has been ongoing research to develop antipsychotics with fewer side efects and greater ef cacy. Advances in pharmacogenomics aim to personalize treatment based on genetic factors, optimizing therapeutic outcomes while minimizing adverse reactions (Blin O, 1999). Moreover, behavioral therapies and psychosocial interventions are increasingly integrated with medication management to provide comprehensive care that addresses both symptoms and functional recovery.antipsychotic medications play a pivotal role in managing severe mental illnesses characterized by psychosis. While they ofer signifcant benefts in reducing symptoms and improving quality of life, their use requires careful monitoring and consideration of individual needs. With ongoing research and personalized approaches, the feld of antipsychotics continues to evolve, ofering hope for better treatment outcomes and enhanced recovery for individuals afected by these challenging conditions (Bhabananda D,2003).

Antipsychotic medications are broadly classifed into two main categories: typical (frst-generation) and atypical (second-generation). Typical antipsychotics, such as haloperidol and chlorpromazine, were among the frst

developed and primarily work by blocking dopamine D2 receptors in the brain (Farah A,2005). They effectively alleviate psychotic symptoms but are associated with a higher risk of movement disorders like tardive dyskinesia, which involves involuntary movements of the face and body. Atypical antipsychotics, including medications like risperidone, olanzapine, and quetiapine, act on a broader range of neurotransmitters beyond dopamine. They are often preferred due to their reduced likelihood of causing movement disorders and sometimes offer additional benefts