

Paliperidone

Invega, Invega Sustenna, Invega Trinza, Invega Hafyera, an antipsychotic medicine

This medicine steadies psychosis with a daily tablet or with a shot that can cover you for a month or even longer.

WHAT IT TREATS

Schizophrenia,
schizoaffective

HOW YOU TAKE IT

Daily tablet or a shot

WHEN IT WORKS

1 to 2 weeks; more by 6

HABIT FORMING

No

⚠️ IMPORTANT SAFETY WARNING

Older adults with dementia who take this kind of medicine have a higher risk of death, so it is not used to treat confusion or agitation caused by dementia.

① WHAT THIS MEDICINE DOES

- **Paliperidone** lowers dopamine signaling that runs too high, which softens voices, paranoia, and disorganized thinking.
- It is the active part that your body makes from risperidone, so the two medicines behave much the same way in you.
- It is barely broken down by the liver, so it collides with fewer other medicines than most options in this group.
- The shot forms exist so that staying well does not depend on remembering a pill every single morning.

④ HOW TO TAKE IT

- Take the tablet **once a day in the morning**, and be consistent about whether you take it with breakfast or without.
- Swallow it whole. Do not chew, split, or crush it, because the tablet releases the dose slowly through the whole day.
- Seeing the empty tablet shell in your stool is normal. The medicine is already gone; only the casing passes through.
- Miss a dose? Take it when you remember that day, but never take two. If a shot is late, call rather than waiting it out.
- The **monthly** shot, and the ones given every 3 or 6 months, are only started after you are steady on the shorter one.

📈 WHAT TO EXPECT

- Sleep and agitation improve within days. Voices and suspicious thinking keep easing over the next **2 to 6 weeks**.
- Working looks like being able to leave the house, hold a conversation, and stop scanning the room for threats.
- With the tablet, the level in your blood stays flat through the day, so you avoid the peaks that cause grogginess.
- The long-acting shots take months to reach full steady levels, so early tablets or a smaller starting shot bridge the gap.

♥️ COMMON SIDE EFFECTS

- This medicine raises prolactin, a hormone. That can stop periods, cause breast tenderness or milk, or lower interest in sex.
- Say something if that happens. A simple blood test, a lower dose, or a switch usually resolves it, and it is common.
- A cannot-sit-still, need-to-keep-moving feeling, plus stiffness or tremor, become more likely at higher doses and can be treated.
- Weight gain is moderate, with modest rises in blood sugar and cholesterol, all checked at the start, at 12 weeks, and yearly.
- Daily walking, protein at breakfast, and cutting sugary drinks do more against this weight gain than any single food rule.
- Fast heartbeat and dizziness on standing are common early, and injection-site soreness fades over a few days.

⚠️ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Call **911** for muscle stiffness with a high fever, confusion, or a racing heart. That combination is an emergency.
- Report mouth, tongue, or hand movements you did not choose. Early treatment matters, so call at the first sign.
- Go to the **ER** for severe belly pain with vomiting, or an erection lasting longer than 4 hours.
- Call **988** if you have thoughts of ending your life, and tell your prescriber the same day.

🚫 WHAT TO AVOID

- Skip this tablet if you have had bowel narrowing or major bowel surgery, unless your prescriber knows and says it is fine.
- Go easy on alcohol, which adds to the sleepiness and the drop in blood pressure when you stand up.
- Hold off on driving until you know how this affects you, especially in the first week and after any dose change.
- Tell your prescriber about kidney problems, because your kidneys clear this medicine and your dose depends on them.
- Tell your prescriber if you are pregnant, may become pregnant, or are nursing, so the plan protects you both.

⏸️ STOPPING IT SAFELY

- Do not stop **paliperidone** on your own. Symptoms usually return, often weeks later and harder than before.
- With the shots, missing an appointment is the same as stopping. Call for a new date instead of letting the window pass.
- Your prescriber can taper the tablet or move you to a different medicine, and either is safer than simply quitting.
- If the shot hurts or the schedule is hard, ask about a different site, needle, or interval before you give up on it.

❓ QUESTIONS TO ASK

- Should I be on the tablet or one of the long-acting shots?
- How is my kidney function, and does it change my dose?
- What should I do if I miss a shot appointment by a week?
- Should we check a prolactin level if my periods or sex drive change?

Where this information comes from

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NOTE

Sources are listed in APA 7th edition style. This handout is general information about a medicine, not medical advice, and it does not replace the instructions from your own prescriber or pharmacist. Never start, change, or stop a medicine on your own. If you think you are having a serious reaction, call your prescriber; if you cannot breathe, cannot stay awake, or are thinking of harming yourself, call 911 or 988 right away.