ABOUT YOUR MEDICINE

Perphenazine

Trilafon (brand discontinued; generic only), an older antipsychotic medicine

Perphenazine eases hallucinations and false beliefs, with less weight gain than many newer antipsychotic medicines.

WHAT IT TREATS	HOW YOU TAKE IT	WHEN IT WORKS	HABIT FORMING
Schizophrenia, nausea	Split into 2-3 daily doses	1-2 weeks; fuller by 6	No

⚠ IMPORTANT SAFETY WARNING

Older adults with dementia who take antipsychotic medicines have a higher risk of death. Perphenazine is not approved for hallucinations or agitation caused by dementia.

WHAT THIS MEDICINE DOES

- **Perphenazine** dials down the brain signal that feeds hallucinations and false beliefs, so your thinking can settle.
- In a large government study it worked about as well as several newer antipsychotics, with less weight gain and lower cost.
- Smaller amounts are also used for severe nausea and vomiting, which is a completely different job for the same medicine.
- It does not blunt who you are. If you feel flat or drugged, that is a side effect to report, not the goal of treatment.

HOW TO TAKE IT

- This medicine does not last a full day, so it is usually split into two or three doses. Keep the spacing even.
- Take it with or without food. A snack helps if your stomach is unsettled, and it does not weaken the medicine.
- If you miss a dose, take it when you remember unless the next one is close. Never take two doses to catch up.
- Do not chew or crush any long-acting form, and use the pharmacy dropper if you were given the liquid concentrate.
- Store it at room temperature, away from heat and damp, and keep it in the container the pharmacy gave you.

WHAT TO EXPECT

- Sleep, agitation, and tension usually improve within **1 to 2 weeks**. Hallucinations often need a full **6 weeks**.
- Working looks like the voices fading into background noise and being able to hold a plan for the day again.
- Because the dose is split, you may feel it wear off before the next one. Tell your prescriber rather than adding a dose.
- Weight and blood sugar are less affected than with many newer options, but they still get checked at your visits.
- A one-minute movement check at each visit finds stiffness or twitching while it is still easy to treat.

COMMON SIDE EFFECTS

- A restless, cannot-sit-still feeling is the most common effect here. It is treatable, so bring it up at the next call.
- Muscle stiffness, a slower walk, or less facial expression can come on early. Another medicine usually clears this up.
- Missed periods, breast swelling or milk, and lower sex drive come from a hormone shift and can often be managed.
- Mild sleepiness and lightheadedness on standing. Rise slowly and drink enough water, especially in the first weeks.
- Dry mouth and constipation. Water, sugar-free gum, fiber, and daily movement handle most of it without extra pills.
- Blurry near vision often improves on its own, so wait a few weeks before you spend money on new glasses.

⚠ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Go to the ER for a high fever with stiff muscles, confusion, and a racing pulse. This is rare and urgent.
- Call right away for a sudden neck twist, locked jaw, or eyes pulled upward. It is treated quickly and well.
- Report lip smacking, tongue movements, or jaw motions you cannot control as soon as anyone notices them.
- Call **911** for fainting, a seizure, or a heartbeat that pounds or flutters and will not settle.

WHAT TO AVOID

- Alcohol adds to sleepiness and dizziness and makes the illness harder to keep steady. Discuss any drinking honestly.
- Do not drive or use machinery until you know how alert and steady this medicine leaves you feeling.
- Some antidepressants raise your level a lot, and seizure medicines can lower it. Share your full list every time.
- Take care in hot weather. Cooling down is harder on this medicine, so drink water and rest in the shade.
- Tell your prescriber if you are pregnant, might be, or are breastfeeding, so you can weigh the options together.

STOPPING IT SAFELY

- Do not stop suddenly. A quick stop brings nausea, sweating, sleeplessness, and often a return of symptoms.
- Your prescriber will step the dose down over several weeks, which is much easier on your body and your mood.
- New movements can appear as the dose falls. That is a call to your prescriber, not a reason to stop everything.
- If cost, side effects, or the number of daily doses is the problem, say so. Every one of those has a workaround.

QUESTIONS TO ASK

- Can my doses be arranged to fit my work or school schedule?
- What do I do first if I feel restless and cannot sit still?
- How often will you check my movements and my hormone levels?
- Which medicines of mine could push this level up or down?

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.