

# Ziprasidone

Geodon, an antipsychotic medicine

This medicine treats psychosis and mania with little weight gain, but it only works if you take it with a real meal.

## WHAT IT TREATS

Schizophrenia, bipolar mania

## HOW YOU TAKE IT

Twice daily with meals

## 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

- **Ziprasidone** blocks the dopamine and serotonin signals behind voices, paranoia, and mania so your thinking can settle.
- It is one of the friendliest choices in this group for weight, blood sugar, and cholesterol, which is often why it is picked.
- The trade is that it needs food and it needs attention to your heart rhythm, so your prescriber may order an ECG.
- It is not a sedative and not habit forming, though it can make you sleepy for the first week or two.

## ⌚ HOW TO TAKE IT

- Take it **twice a day with a real meal**, about 500 calories each time. On an empty stomach you absorb only half the dose.
- A cracker or coffee does not count. Think a sandwich, eggs and toast, or dinner. Pair it with breakfast and supper.
- Swallow the capsules whole with water, and keep the two doses roughly 12 hours apart so your level stays even.
- Miss a dose? Take it with your next meal if that is soon, otherwise skip it. Never take two capsules at once.
- If your appetite is poor, tell your prescriber. Skipped meals are the most common reason this medicine looks like it failed.

## 📈 WHAT TO EXPECT

- Agitation and sleep usually improve within a week. Voices and suspicious thinking keep easing for **2 to 6 weeks**.
- Working looks like the volume coming down on your thoughts and being able to sit through an ordinary afternoon.
- Many people are left on a starting dose that is too low. If you are not better after a month, ask about going up.
- Weight usually stays close to where it started, which is one of the main reasons people stay on this medicine.

## ♥ COMMON SIDE EFFECTS

- Sleepiness, dizziness, and nausea are the most common effects. Taking doses with food and holding steady eases all three.
- A cannot-sit-still, need-to-keep-moving feeling can show up early. It is a side effect, it is treatable, and it is worth calling about.
- Weight, blood sugar, and cholesterol changes are small here, but they still get checked at the start, at 12 weeks, and yearly.
- Regular meals, walking most days, and steady sleep keep the small metabolic risk of this medicine from adding up over years.
- Your prescriber may check potassium and magnesium and order an ECG, since this medicine can change your heart rhythm.
- Dizziness when you stand comes from a drop in blood pressure. Rise slowly and keep water within reach through the day.

### ⚠ 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.
- Call **911** for fainting, a fluttering or pounding chest, or a seizure. These can signal a heart rhythm change.
- Report mouth, tongue, or hand movements you did not choose. Early treatment matters, so call at the first sign.
- Call **988** if thoughts of ending your life show up, and tell your prescriber the same day.

## 🚫 WHAT TO AVOID

- Tell your prescriber about every heart medicine you take. Some cannot be combined with this one because of heart rhythm.
- Do not take it fasting to save time. Doses without food are the single fastest way to make this medicine stop working.
- Go easy on alcohol, which adds to the drowsiness and the dizziness on standing that this medicine can cause.
- Ask before adding a water pill, since losing potassium or magnesium raises the risk to your heart rhythm.
- Tell your prescriber if you are pregnant, may become pregnant, or are nursing, so you can decide together.

## ⌚ STOPPING IT SAFELY

- Do not stop **ziprasidone** suddenly. It clears quickly, so symptoms can return within days of the last dose.
- Your prescriber will taper it over **1 to 2 weeks** or longer, which gives your body and your symptoms time to adjust.
- If eating twice a day around the doses is the real problem, say so. That is a fixable scheduling issue, not a failure.
- Never stop because you feel well. This medicine is doing that work, and stopping is what usually undoes it.

## ❓ QUESTIONS TO ASK

- What counts as a big enough meal for the doses I take?
- Do I need an ECG before I start or after a dose increase?
- Is my dose high enough, or should we go up before switching?
- Which of my other medicines affect my heart rhythm?

# 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.