Neuroleptics: too readily prescribed

In many countries, use of neuroleptic (antipsychotic) drugs has soared since the market introduction of second-generation (or "atypical") neuroleptics in the 1980s: *amisulpride*, *aripiprazole*, *clozapine*, *olanzapine*, *quetiapine* and *risperidone* (1). Is this increase medically justified?

Increasing use, including in non-psychotic disorders. A team of pharmacoepidemiologists from France's National Institute of Health and Medical Research (INSERM) have pointed out that the number of prescriptions for "atypical" neuroleptics rose rapidly in the 1990s because they were said to have a better adverse effect profile than that of first-generation neuroleptics (1).

Although they provoke fewer neurological adverse effects in the short term than neuroleptics such as *haloperidol*, they have more marked metabolic adverse effects, such as diabetes and dyslipidaemia. Both types of neuroleptics are associated with excess mortality (1,2).

Yet the number of prescriptions for these drugs has continued to rise, in particular in unauthorised indications such as anxiety disorders, mood disorders and dementia (1). These drugs are also prescribed to children and adolescents, in attention deficit hyperactivity disorder and autism for example (1).

A risky trend. The authors of this article find this broad use of neuroleptics troubling, mainly because these drugs carry a risk of cardiac disorders and excess mortality. They are worried that these drugs are too readily prescribed for children and adolescents, despite the lack of data on their potential impact on the developing brain (1).

A similar phenomenon was observed when the "selective" serotonin reuptake inhibitor antidepressants were introduced to the market (starting with *fluoxetine*) (1).

In both cases, new drugs, hailed (mainly by pharmaceutical companies) for their superior adverse effect profile, replaced older drugs whose efficacy was established and whose adverse effects were better known (1).

When decisions are based more on hopes and on claims made by pharmaceutical companies than on robust data, patients can actually be victims of the attention healthcare professionals pay to the harmful effects of drugs.

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1- Verdoux H et al. "Usage et mésusage des médicaments psychotropes: les antipsychotiques, nouvelle panacée pour les troubles psychiatriques?" *Bull Acad Natle Méd* 2016; **200** (6): 12 pages.
2- "12-5-5. Patients sous neuroleptique" *Rev Prescrire* 2015; **35** (386 suppl. interactions médicamenteuses).

EDITORIAL

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