Prolixin was developed in the 1960s by the pharmaceutical company now known as Novartis as a method of treatment for schizophrenia (NAMI 2007). It is an antipsychotic medication that blocks the positive symptoms of schizophrenia such as hallucinations and delusions by restoring the balance of dopamine in the patient's brain (NAMI 2007). Prolixin is classified as a first generation antipsychotic and is referred to as a conventional antipsychotic (FDA 2015). Like all first generation antipsychotics it is required by the FDA to carry a black box label as of 2008 (FDA 2008).

The side effects listed on this label range from drowsiness and dizziness to tardive dyskinesia, neuroleptic malignant syndrome (NMS), and sudden cardiac death (NAMI 2007). Prolixin has a 30-40% chance of causing tardive dyskinesia (NAMI 2007). Tardive dyskinesia is a disorder that is characterized by involuntary movements, primarily in the head, such as tongue rolling, chewing, and grimacing (NLM 2014). While this disorder can sometimes be reversed if the patient eliminates their usage of the drug it is not uncommon for the effects to be permanent (NLM 2014). These symptoms additionally have the potential to worsen even when the drug is no longer being used (NLM 2014). NMS is a life-threatening neurological condition characterized by sudden high fever, blood pressure changes, fatigue, and live or kidney abnormalities (NAMI 2014). If NMS is caught and treated early then the syndrome can be slowed although there is no guarantee that there will not be a relapse (NAMI 2014).

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