

dignity &

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ADVICE NOTES

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We were asked to look at a case of a patient on clozapine therapy who had died.

This is a complex area of clinical practice often involving a clozapine clinic as well as the usual community mental health team and GP.

While we did not conclude that there was a deficiency of care, we thought there were a number of useful learning points.

- Services should consider protocols for how they monitor physical health care in a systematic way and in particular communication with GP about possible side effects and the action to be taken in the light of any abnormal findings
- There should be an awareness of important complications eg constipation, in addition to monitoring of full blood count.
- There needs to be a system for communicating changes to prescriptions by all involved.
- Although monitoring of serum clozapine and norclozapine levels is not mandatory it can be a useful adjunct in clinical care provided staff understand the significance of results. Local guidelines developed with pharmacy colleagues may be useful.
- The provision of appropriate information for patients and carers is essential, and can include packs for patients starting medication and informal carers groups.





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