LAI ANTIPSYCHOTICS
RECOMMENDED STARTING DOSES

Aripiprazole monohydrate

- The recommended starting and maintenance dose is 400mg monthly (no sooner than 26 days after the previous injection).
- If there are adverse reactions to the 400mg dose, consider reducing the dosage to 300mg monthly.

Aripiprazole lauroxil

- Dosing depends on the daily oral dose of aripiprazole.
- The 441mg dose per month is equivalent to 10mg oral dose daily.
- The 662mg dose per month is equivalent to 15mg oral dose daily.
- The 882mg dose per month is equivalent to ≥ 20mg oral dose daily.

Fluphenazine decanoate

- A dose of 12.5 – 25mg (0.5 – 1mL) may be given to initiate therapy.
- Subsequent injections and the dosage interval are determined according to patient’s response.
- Fluphenazine hydrochloride 20mg daily is equivalent to 25mg (1mL) of fluphenazine decanoate injection every 3 weeks.
- This represents an approximate conversion ratio of 12.5mg (0.5mL) of decanoate every 3 weeks for every 10mg of fluphenazine hydrochloride daily.
- A single dose has been found to be effective for patients for 4-6 weeks in maintenance therapy.

Haloperidol decanoate

- Haloperidol decanoate comes in 50mg and 100mg doses. The preferred approach to determining the minimum effective dose is to begin with lower initial doses and to adjust upward as needed.
- For patients previously maintained on low doses of antipsychotics (e.g. up to the equivalent of 10 mg/day of oral haloperidol), it is recommended that the initial dose of haloperidol decanoate be 10-15 times the previous daily dose in oral haldol equivalents.
- In patients previously maintained on higher doses of antipsychotics for whom a low dose approach risks recurrence of psychiatric decompensation and in patients whose long-term use of haloperidol has resulted in a drug tolerance, 20 times the previous daily dose in oral haloperidol equivalents should be considered for initial conversion, with downward titration on succeeding injections.
- The initial dose of haloperidol decanoate should not exceed 100mg regardless of previous antipsychotic dose requirements. If conversion requires more than 100mg of haloperidol as an initial dose, that dose should be administered in two injections, i.e. a maximum of 100mg initially followed by the balance in 3 – 7 days.
Olanzapine pamoate

- Olanzapine pamoate is available in doses of 210mg/2wk, 300mg/2wk, and 405mg/4wk.
- An oral olanzapine dose of 10mg/day corresponds to 210mg/2 weeks or 405mg/4 weeks (changed to 150mg/2 weeks or 300mg/4 weeks after 8 weeks).
- An oral dose of 15mg/day corresponds to 300mg/2weeks (changed to 210mg/2weeks or 405mg/4 weeks after 8 weeks)
- An oral dose of 20mg/day corresponds to 300mg/2 weeks (same dose in maintenance).

Paliperidone palmitate (monthly)

- To initiate, inject 234mg day 1, followed by 156mg day 8, followed by first maintenance dose five weeks after first injection.
- Maintenance doses are 39-234mg/month with recommended maintenance dose of 117mg monthly.
- Dosing options are 39mg, 78mg, 117mg, 156mg, or 234mg.
- Oral dose of 3mg daily corresponds to 39-78mg monthly.
- Oral dose of 6mg daily corresponds to 117mg monthly.
- Oral dose of 12mg daily corresponds to 234mg monthly.

Paliperidone palmitate (every 3 months)

- Dosing options include 273mg, 410mg, 546mg, or 819mg.
- Transition to every 3 months — paliperidone palmitate should follow treatment with monthly paliperidone palmitate.
- 78mg monthly corresponds to 273mg every 3 months.
- 117mg monthly corresponds to 410mg every 3 months.
- 156mg monthly corresponds to 546mg every 3 months.
- 234mg monthly corresponds to 819mg every 3 months.

Risperidone long acting injectable

- Dosing options include 12.5mg, 25mg, 37.5mg, and 50mg.
- The recommended dose is 25mg every 2 weeks.
- Although dose response for effectiveness has not been established, some patients not responding to 25mg may benefit from a higher dose of 37.5mg or 50mg.
- The maximum dose should not exceed 50mg every 2 weeks.