Jeffrey Panko NP
PSYCHIATRY

Jeffrey Panko, PMHNP-BC
Phone 646-549-4694 | Fax 646-558-4238
JMPankoNP@JeffreyPanko.com
jeffreypanko.com

PATIENT EDUCATION

Lumateperone

Caplyta / Oral capsules

A guide for adults taking lumateperone.
Follow the directions on your prescription and your provider's recommendations.

ONCE DAILY | WITH OR WITHOUT FOOD

Formulations: Capsules are taken once daily. Lower doses may be needed with liver impairment or interacting medicines.

What it is used for

Lumateperone treats schizophrenia, depressive episodes in bipolar I or II disorder, and is added to an antidepressant for major depression. Bipolar depression treatment may be alone or with lithium or valproate. It is not an acute antimanic treatment.

How it works

It affects serotonin and dopamine signaling, with additional effects on pathways involved in glutamate transmission. These actions contribute to mood and psychosis treatment.

What to expect over time

Some symptoms improve earlier than others. Changes in hallucinations, mood, or organized thinking often develop over several weeks. Track practical goals, such as regular sleep and daily activities, and report side effects or limited benefit.

Taking your medication

- Take once daily, with or without food.
- If you miss a dose, take it when you remember unless it is almost time for the next dose. Then skip it. Do not double a dose.
- Discuss timing if sleepiness interferes with daily activities.
- Do not change the dose when another medicine is added or stopped without review.

Jeffrey Panko NP
PSYCHIATRY

Jeffrey Panko, PMHNP-BC
Phone 646-549-4694 | Fax 646-558-4238
JMPankoNP@JeffreyPanko.com
jeffreypanko.com

LUMATEPERONE / 02

Side effects and safety

Possible side effects

- Sleepiness or fatigue
- Dizziness or lightheadedness
- Dry mouth, nausea, or diarrhea
- Possible weight, blood-sugar, or movement changes

Keeping track of treatment

Some side effects resolve with time; others may require a change of medication. Discuss persistent or bothersome side effects with your provider.

Expect periodic checks of weight, blood pressure, blood sugar, cholesterol, and movement symptoms. Some changes, such as higher blood sugar, may occur before you feel different.

Report new mouth, tongue, face, or limb movements. Tardive dyskinesia is a movement disorder that can persist after medication is stopped.

When used for depression, report worsening mood or suicidal thoughts, especially under age 25.

If you take too much

For a suspected overdose, call Poison Control at **1-800-222-1222** immediately, even if you feel well. Call 911 for a seizure, collapse, trouble breathing, or inability to wake.

Before you start

Discuss diabetes, heart-rhythm problems, fainting, seizures, low blood counts, swallowing difficulties, and kidney or liver disease. Antipsychotics increase the risk of death in older adults with dementia-related psychosis.

Discuss pregnancy, pregnancy plans, and breastfeeding with your provider. Treatment decisions should consider both the medication and the condition being treated.

Medicines and interactions

Review all your medications with your provider, including over-the-counter medicines and supplements. Have new medications checked before taking them.

CYP3A inhibitors can require a dose reduction; CYP3A inducers should be avoided. Review antibiotics, antifungals, seizure medicines, and grapefruit.

Alcohol, opioids, and other sedatives add impairment. Blood-pressure medicines may increase dizziness.

Jeffrey Panko NP
PSYCHIATRY

Jeffrey Panko, PMHNP-BC
Phone 646-549-4694 | Fax 646-558-4238
JMPankoNP@JeffreyPanko.com
jeffreypanko.com

LUMATEPERONE / 03

Living with your treatment

When to get help

Emergency symptoms. Get emergency care for fever with severe muscle stiffness and confusion, a seizure, fainting with an irregular heartbeat, or trouble breathing. Fever and stiffness can signal neuroleptic malignant syndrome, a rare but serious reaction.

Prompt medical advice. Contact your provider promptly for new involuntary movements, trouble swallowing, severe restlessness, or symptoms of high blood sugar such as unusual thirst and frequent urination.

If you feel unsafe or have thoughts of self-harm, call 911 or go to an emergency department.

Your questions answered

Can I stop when I feel better?
Consult with your provider. Continuing treatment may prevent symptoms from returning. Abrupt stopping can cause withdrawal symptoms or a relapse.

What if I cannot sit still?
An inner urge to keep moving can be akathisia, a medication side effect. Tell your provider promptly; it can be mistaken for worsening anxiety.

Everyday tips

Stand up slowly. Avoid driving until you know how the medication affects alertness and coordination.

Stay hydrated and take breaks in hot weather. Some antipsychotics interfere with temperature regulation.

Discuss appetite or weight changes early, and keep scheduled monitoring visits.

Storage and safety

Keep medication in its labeled container, away from excess heat and moisture and out of reach of children and pets. Do not share it. Ask a pharmacy about disposal of unused medication.

Sources

DailyMed: Caplyta prescribing information, including adjunctive MDD indication

Educational handout; does not replace your prescription or provider's recommendations.