
A Unique Case of Addiction to Trifluoperazine in a Non-psychotic Patient

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INTRODUCTION

Trifluoperazine, a typical antipsychotic, has been frequently used in psychotic disorders for many years. Sudden discontinuation of trifluoperazine is known to cause relapse of psychotic symptoms in patients suffering from major psychosis.

THE CASE HISTORY

Mr P, a 34 years old male, professor of physics, was admitted on August 12, 2014, his fourth admission in the last one year, with chief complaints of extreme restlessness, tremors of the hands and blurring of vision for two days prior admission. The patient had been taking 12-16 tablets of a combination of trifluoperazine 5mg and trihexyphenidyl 2mg for about one week prior to his hospitalization.

The patient described experiencing a feeling of numbness once he took the aforementioned tablets which 'insulated' him from problems at home. He reported experiencing severe restlessness and anxiety if he did not take the tablets.

The patient was diagnosed as suffering from Obsessive Compulsive Disorder one year back when he had presented with chief complaints of recurrent

disturbing thoughts as to whether he had kept his car keys in a particular pocket and whether he had locked his car or not. To relieve the extreme anxiety provoked by these thoughts, he would be compelled to carry out checking compulsions. He was started at that time on

Paroxetine and a combination of trifluoperazine and trihexyphenidyl. The recurrent thoughts and compulsive acts were relieved in about a

month. He stopped taking paroxetine of his own but continued taking the combination of trifluoperazine and trihexyphenidyl following which he was hospitalized with us.

DISCUSSION

There have been sporadic reports of addiction to antipsychotic drugs, including trihexyphenidyl,

risperidone and quetiapine. Most of them are associated with a typical withdrawal syndrome

on sudden stoppage of antipsychotic drug in question which is the prime reason behind the patient

taking to the antipsychotic drug again. Most of the patients were known cases of schizophrenia or

another long term psychotic illness. The case presented here is unique in the sense that the patient does not suffer from any psychotic illness.

CONCLUSION

Obviously, the problem of addiction is complex. This case points to the need for a fresh research into the mechanisms

leading to dependence to a particular drug.