

# Long-acting Injectable Antipsychotic: Risperidone (UZEDY)

## Criteria for Use

### October 2024

VA Pharmacy Benefits Management Services and National Formulary Committee

*The following recommendations are based on medical evidence, clinician input, and expert opinion. The content of the document is dynamic and will be revised as new information becomes available. The purpose of this document is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost-effective drug prescribing. THE CLINICIAN SHOULD USE THIS GUIDANCE AND INTERPRET IT IN THE CLINICAL CONTEXT OF THE INDIVIDUAL PATIENT. INDIVIDUAL CASES THAT ARE EXCEPTIONS TO THE EXCLUSION AND INCLUSION CRITERIA SHOULD BE ADJUDICATED AT THE LOCAL FACILITY ACCORDING TO THE POLICY AND PROCEDURES OF ITS P&T COMMITTEE AND PHARMACY SERVICES.*

The Product Information should be consulted for detailed prescribing information.

## Continuity of Care Inclusion Criteria

If the following criterion and one of the Additional Inclusion Criteria are met, the medication may be used.

- Veteran is transitioning care from the Department of Defense to VHA

## Additional Inclusion Criteria

Select ONE if appropriate.

- The medication is safe and clinically appropriate as determined by a VA prescriber using shared decision making
- The medication is indicated for tapering the dose or slowly discontinuing therapy as determined by a VA prescriber using shared decision making

## Non-Continuity of Care Exclusion Criteria

If ANY of the following are met, the patient should not receive risperidone (UZEDY)

- The patient has never taken the long-acting injectable (LAI) antipsychotic ordered in any formulation (e.g., oral)
- The patient has a hypersensitivity to the antipsychotic ordered. Note: consider risperidone and paliperidone cross-sensitive

## Non-Continuity of Care Inclusion Criteria

ALL of the following must be met

- Diagnosis of schizophrenia, schizoaffective disorder, or bipolar disorder
- The initial prescriber is a VA Mental Health provider
- The patient has taken and tolerated the antipsychotic ordered prior to receiving it as a LAI for an adequate length of time. Note: consider risperidone and paliperidone cross-tolerant
- The patient will be transitioned from oral medication to the LAI per guideline/manufacturer recommendations

## **Non-Continuity of Care Inclusion Criteria**

ONE of the following must be met

- The patient has relapsed or been hospitalized for the intended indication or complications of the intended indication because of nonadherence when treated with oral antipsychotics
- The patient's care environment is such that a LAI is a more reliable route of administration (e.g., homeless, lack of medication supervision, or the medication cannot be stored safely)

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Prepared: September 2024. Contact: Matthew A. Fuller, Pharm.D., BCPP, National Clinical Pharmacy Program Manager, VA Pharmacy Benefits Management Services (12PBM)

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