

Table D-3: Antipsychotic Adverse Event Profiles^{o,p,q,r,s,t,u}

Medication	EPS	Sedation	Weight Gain	Metabolic	Orthostasis	AcH	QTc
Aripiprazole	++	+/0+	+/0+	+/0+	+	0	+
Asenapine	++	+	+	+	+	0	+
Brexipiprazole	++	+	0	+	+	0	+
Cariprazine	++	+	+	+	+	0	+
Chlorpromazine	++	+++	+++	++	+++	+++	++
Clozapine	+0	+++	+++	+++	+++	+++	++
Fluphenazine	+++	+	+	+	+	0	+
Haloperidol	+++	+	+	+	+	0	++
Iloperidone	+	+	++	+	+++	0	++
Loxapine	++	+	+	+	+	+	+
Lumateperone	+	+	0	+	+	+	+
Lurasidone	++	+	+	+	+	0	+
Molindone	++	++	+	+	+	+	+
Olanzapine	+	+++	+++	+++	++	++	++
Olanzapine/ Samidorphan	+	+++	++	+++	++	++	++
Paliperidone	+++	+	++	+	+	+	+
Perphenazine	++	+	++	+	++	0	+
Pimavanserin	0	+	0	0	+	++	+

^o U.S. Package Inserts^p Daily Med: <https://dailymed.nlm.nih.gov>^q UpToDate: <https://uptodate.com>^r Lexicomp: <https://online.lexi.com>^s Stahl SM. Prescriber's Guide: Stahl's Essential Psychopharmacology 7th edition. New York, NY. Cambridge University Press, 2021.^t Keepers GA, Fochtmann LJ, Anzia JM et al. The American Psychiatric Association practice guideline for the treatment of patients with schizophrenia. Am J Psychiatry 2020;177:868–872.^u Schoretsanis G, Kane JM, Correll CU et al. Blood levels to optimize antipsychotic treatment in clinical practice: a joint consensus statement of the American Society of Clinical Psychopharmacology and the therapeutic drug monitoring task force of the Arbeitsgemeinschaft für Neuropsychopharmakologie und Pharmakopsychiatrie. J Clin Psychiatry 2020;81(3):19cs13169.