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## ARIPIPRAZOLE IN THE TREATMENT OF RISPERIDONE ASSOCIATED TARDIVE DYSKINESIA

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**Objectives:** Tardive dyskinesia(TD) is a syndrome characterized by repetitive involuntary movements, usually involving mouth, face and tongue and sometimes the extremities. Atypical antipsychotics are of significantly lower risk for causing tardive dyskinesia, about one-fifth comparing with first generation antipsychotics. Furthermore, there is growing evidence that they may have a therapeutic effect on TD. We present a case that demonstrated a marked improvement in risperidone-induced TD following treatment with aripiprazole.

**Method:** Mr. A is a 21-year-old single male with a DSM-IV-TR diagnosis of schizophrenia, of approximately 2 years duration. He was mainly maintained on risperidone 4-6 mg/day during this time. Upon his admittance to our clinic, he was suffering auditory hallucinations, persecutory delusions, social withdrawal and he was noticed to have had some involuntary mouth movements. The patient scored three out of four (moderate) on the 'lips and peri-oral area' subcategory of the- Abnormal Involuntary Movement Scale (AIMS). A cranial CT scan was unremarkable and there was no past history or family history of neuro-psychiatric disorders. He was started on aripiprazole 15 miligrams per day.

**Result:** Within two weeks a marked improvement was seen in his psychotic symptoms and he scored 2 on the AIMS. Two months after starting aripiprazole, he was free of psychotic symptoms and dyskinetic movements.

**Conclusion:** Although atypical antipsychotics are known to be associated with lower risk of developing tardive dyskinesia, psychiatrists should be aware of these rare conditions. Aripiprazole, as a partial dopamine agonist, might be an alternate pharmacotherapy in threatening psychosis and atypical antipsychotic-induced TD.