WA PSYCHOTROPIC DRUG COMMITTEE (WAPDC) ALERT
Atropine Eye Drops for Hypersalivation

Position statement

Use of sublingual atropine eye drops for the treatment of antipsychotic-induced hypersalivation may be an option for patients in whom the anticholinergic load is considered acceptable and where the patient is able to manipulate the bottle to extract the dose safely.

Consensus agreement

Sublingual atropine drops are commonly used ‘off label’ as a treatment option for management of clozapine-induced hypersalivation.

The pharmacokinetics of atropine and susceptibility to its effects varies considerably between patients. Atropine is toxic in overdose and deaths have occurred after administration of just 15mg oral atropine.

When prescribing atropine drops for this indication, the ability of the patient to manipulate the bottle to reliably extract the correct dose and the risk of systemic anticholinergic load should be considered.

Atropine eye drops 1% can be used sublingually, one or two drops two or three times a day.

Alternative anticholinergic medications to atropine drops for hypersalivation (also ‘off label’) include:

- Amitriptyline - also toxic in overdose and will cause systemic effects like constipation
- Hyoscine - sublingual or oral but this has the same systemic effects as atropine drops.
- Benztropine - also toxic in overdose and will cause systemic effects like constipation
- Ipratropium spray sublingually - generally regarded as far less effective than atropine drops or systemic anticholinergics
- Glycopyrrolate - no convenient formulations are available here and the toxic effects are similar to atropine

If anticholinergic medications are not effective in the treatment of hypersalivation α-adrenergic medications can be considered. There is only weak evidence available demonstrating efficacy for this group of medications which include:

- Clonidine
- Amisulpride
- Terazosin
- Moclobemide

# The Statewide Medicines Formulary does not permit use of this medication for hypersalivation. Use for this indication would require an individual patient approval (IPA) from the hospital drug and therapeutics committee (DTC).

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Reference