### Fluphenazine

**Indication**
- Schizophrenia or other primary psychotic disorders

**INN**
- Fluphenazine

**Medicine type**
- Chemical agent

**List type**
- Core

**Formulations**
- Parenteral > General injections > IM: 25 mg per mL in ampoule (decanoate) ; 25 mg per mL in ampoule (enanthate)

**EML status history**
- First added in 1977 (TRS 615)
- Changed in 1979 (TRS 641)
- Changed in 2021 (TRS 1035)
- Changed in 2023 (TRS 1049)

**Sex**
- All

**Age**
- Adolescents and adults

**Therapeutic alternatives**
- haloperidol decanoate (ATC codes: N05AD01)
- zuclopenthixol decanoate (ATC codes: N05AF05)

**Patent information**
- Patents have expired in most jurisdictions
- [Read more about patents.](#)

**Wikipedia**
- [Fluphenazine](#)

**DrugBank**
- [Fluphenazine](#)

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### Summary of evidence and Expert Committee recommendations

The Expert Committee recalled the request made by the 2021 Committee that therapeutic alternatives for the square box listings for chlorpromazine, fluphenazine and haloperidol in this section of the EML be reviewed. The Expert Committee accepted the rationale applied by the WHO Department of Mental Health and Substance Use in identifying suitable therapeutic alternatives, and made the following recommendations:

- Chlorpromazine (oral formulations only) be included as a therapeutic alternative to oral haloperidol. (This recommendation, coupled with the recommendation to remove chlorpromazine injection, effectively removes the independent listing for chlorpromazine from the EML).
- Haloperidol decanoate and zuclopenthixol decanoate be included as therapeutic alternatives to fluphenazine (decanoate/enanthate).