

## Fact Sheet: Aripiprazole Monohydrate

Drug:	Dosage	Tmax (Days)	T ½ (Days) Multiple Dosing	Loadable?
Aripiprazole Monohydrate (sali ne base)	300 - 400 mg/4 weeks	6.5 - 7.1	29.9 - 46.5	Yes

- TGA / dopamine partial agonist
- Do **NOT** load with Maintena® if the patient is **not symptom-free** (stabilized) for at least 8 to 12 weeks on prescribed oral (PO) aripiprazole.
- IMPORTANTLY, because of its long half-life, an LAI formulation of aripiprazole should be used **only if the patient is a proven responder to dopamine partial agonists**.
- Use of an LAI formulation of aripiprazole in dopamine antagonist responder will result in **destabilization** of the patient and a prolonged period during which D2 antagonists are unable to bind to the target receptors.

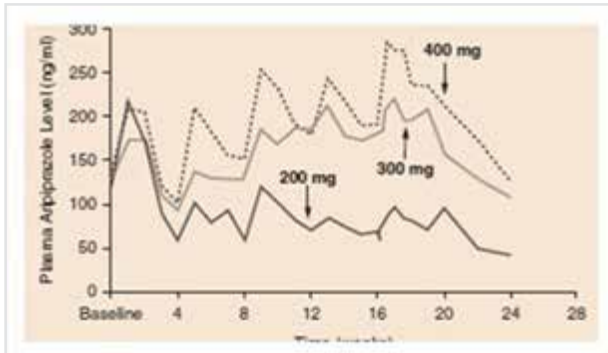
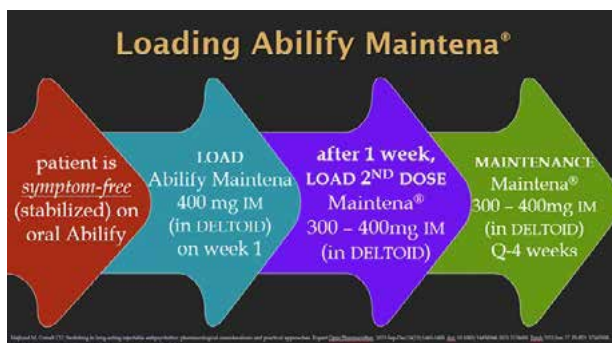


Figure 1. Kinetic profile of aripiprazole monohydrate with 2 weeks of oral aripiprazole 10 mg/day overlap.

Aristada Initio® is only used as an initial dose. **Abilify Asimtufii®/Aristada®** should be reserved for patients on stable doses of Maintena® for ≥4 months.



average expected plasma level = 11 x oral dose (mg/day)

Antipsychotic	Optimal trough plasma level
Aripiprazole	110 - 500 ng/ML

- Abilify Maintena® 300 mg IM monthly = aripiprazole 15 mg PO daily
- Abilify Maintena® 400 mg IM monthly = aripiprazole 20 mg PO daily

### References

1. DSH Psychotropic Medication Operational Procedures, Chapter 9. Depot Antipsychotic Medications.
2. Meyer JM Stahl's Handbooks: The Clinical Use of Antipsychotic Plasma Levels; <https://doi.org/10.1017/9781009002103>
3. Højlund M, Correll CU. Switching to long-acting injectable antipsychotics: pharmacological considerations and practical approaches. Expert Opin Pharmacother. 2023 Sep-Dec;24(13):1463-1489. doi: 10.1080/14656566.2023.2228686. Epub 2023 Jun 27. PMID: 37345508.

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