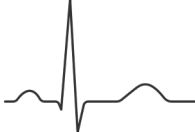





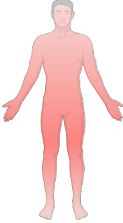




# Clozapine rechallenge (week 1-4)

- **Pre-exposure minimum:** high-sensitivity troponin, CRP, FBC, vital parameters, ECG, TTE (LVEF must be  $\geq 50\%$ ), cardiac MRI depending on case/clinical situation
- Pre-exposure minimum parameters should be within range before re-challenging and Sodium Valproate should be ceased if clinically justifiable
- Wait optimally more than 8 weeks after myocarditis resolution before rechallenge, all cardiac lab results must be within range before rechallenge, uptitration more slowly than during myocarditis index episode
- Caveat: Shared-decision making process weighing benefits vs. risks (off-label use)
- **Pre-exposure enhanced:** + NT-proBNP<sup>1</sup>
- **Starting dose of clozapine:** 6.25 mg

## Minimum and enhanced monitoring requirements in weeks 1-4 (clozapine rechallenge)










	Heart rate	Temperature	SpO <sub>2</sub>	ECG	postural BP	hs troponin	CRP	NT-proBNP <sup>1</sup>	FBC <sup>2</sup>
	Clinical			Instrumental		Laboratory parameters			
Parameter									
Minimum	daily	daily	twice weekly	weekly	twice weekly	twice weekly	twice weekly	-	weekly
Enhanced	daily	daily	twice weekly	twice weekly	twice weekly	twice weekly	twice weekly	weekly	weekly



Dose range for clozapine at **day 7**: 25mg

Dose range for clozapine at **end of week 4**: 100mg

## Minimum and enhanced monitoring requirements in weeks 5-8 (clozapine rechallenge)

	Heart rate	Temperature	SpO <sub>2</sub>	ECG	postural BP	hs troponin	CRP	NT-proBNP <sup>1</sup>	FBC <sup>2</sup>
	Clinical			Instrumental		Laboratory parameters			
Parameter									
Minimum	twice weekly	twice weekly	weekly	every 2 weeks	twice weekly	weekly	weekly	-	weekly
Enhanced	daily	daily	twice weekly	twice weekly	twice weekly	twice weekly	twice weekly	weekly	weekly

### Legend

<sup>1</sup> if available in the respective jurisdiction

<sup>2</sup> only for cardiac monitoring irrespective of regular ANC monitoring

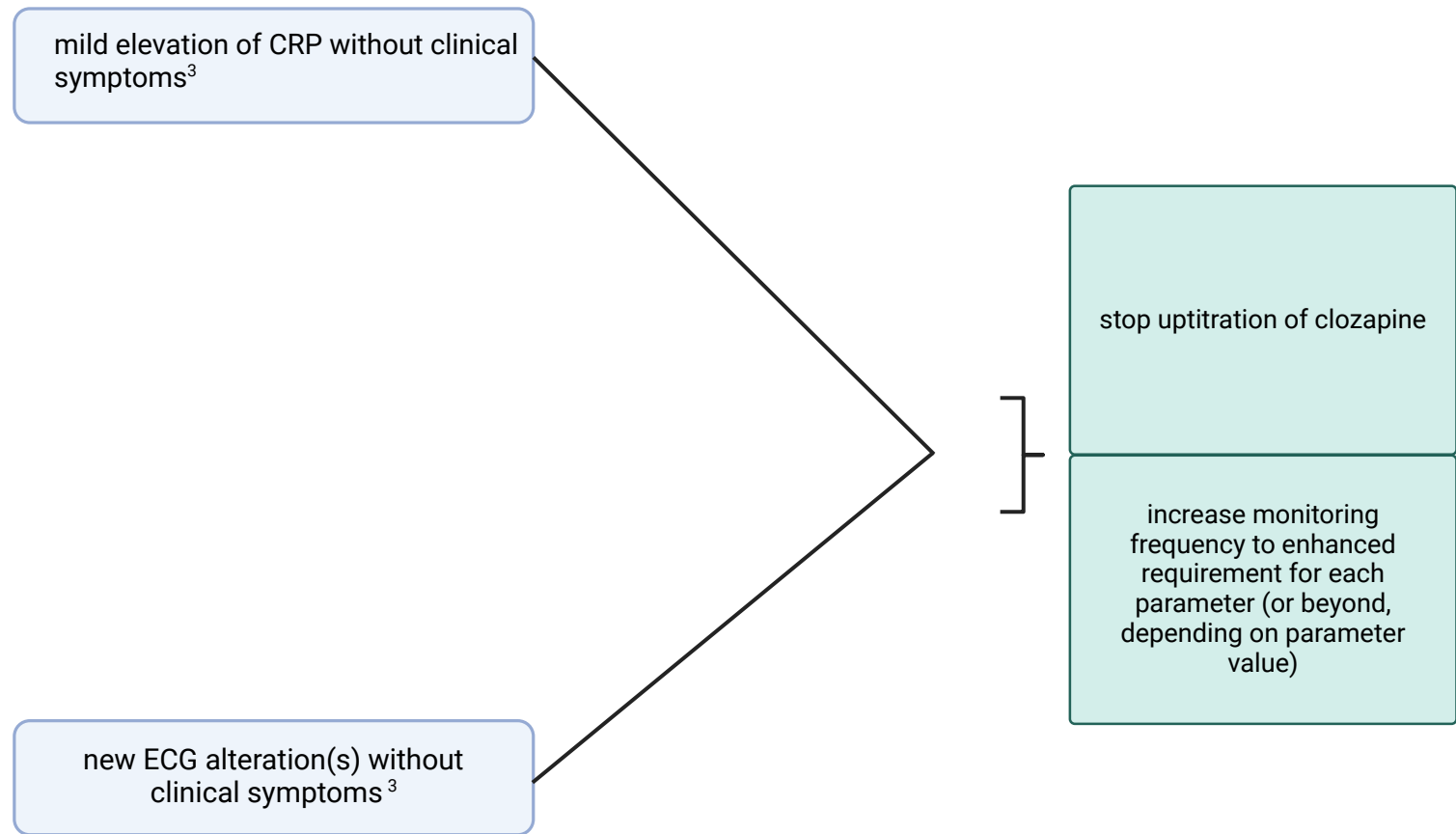
<sup>3</sup> clinical symptoms highly suggestive of myocarditis in individuals treated with clozapine are: fever, chest pain or dyspnoea and flu-like symptoms

<sup>4</sup> i.e. new ST-segment and T-wave deviations

<sup>5</sup> potentially life-threatening conditions (such as torsades de points, cardiogenic shock, etc) would trigger clozapine discontinuation before laboratory results are confirmed

<sup>6</sup> add NT-proBNP if cardiac imaging is not immediately available

<sup>7</sup> cardiac MRI shall be performed in cases when hs troponin I/T > 99th percentile, NT-proBNP ≥ 125 pg/ml or new significant rise from baseline beyond the biological and analytical variation of the assay used.



**General rules:**

- Caveat: special requirements (see Table 2)

