CLOZAPINE DEATHS

Antibody deficiency in patients taking clozapine

Mark J Ponsford ST5 clinical immunology and Welsh clinical academic trainee, Stephen Jolles consultant clinical immunologist, honorary professor, and clinical lead

Immunodeficiency Centre for Wales, Cardiff CF14 4XW, UK

Although clozapine reduces overall mortality in schizophrenia,1 a growing body of evidence links its use with higher rates of admission to hospital for pneumonia2-4 and mortality.5-8 Various mechanisms have been proposed for the rise in pneumonia, including sedation, salivary and aspiration, agranulocytosis, and smoking.9 10 Following the introduction of calculated globulin screening in Wales,11 we found a novel and striking association between use of the antipsychotic clozapine and antibody deficiency.12 Patients taking clozapine follow an intensive regimen of blood testing for the rare risk of agranulocytosis (with cumulative incidence of <1% cases), but antibody testing is not included in existing clozapine monitoring programmes. We urge consideration of this potential mechanistic explanation as a modifiable risk factor for the higher rates of pneumonia and sepsis related mortality reported in this vulnerable cohort.

Competing interests: SJ has received support from CSL Behring, Shire, LFB, Biotest, Binding Site, Sanofi, GSK, UCB Pharma, Grifols, BPL SOBI, Weatherden, Zarodes and Octapharma for projects, advisory boards, meetings, studies, speaker, and clinical trials.


8 Dyer C. Coroners warn health secretary of clozapine deaths. BMJ 2016;363:k5421. 10.1136/bmj.g5421 30591547


Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to http://group.bmj.com/group/rights-licensing/permissions