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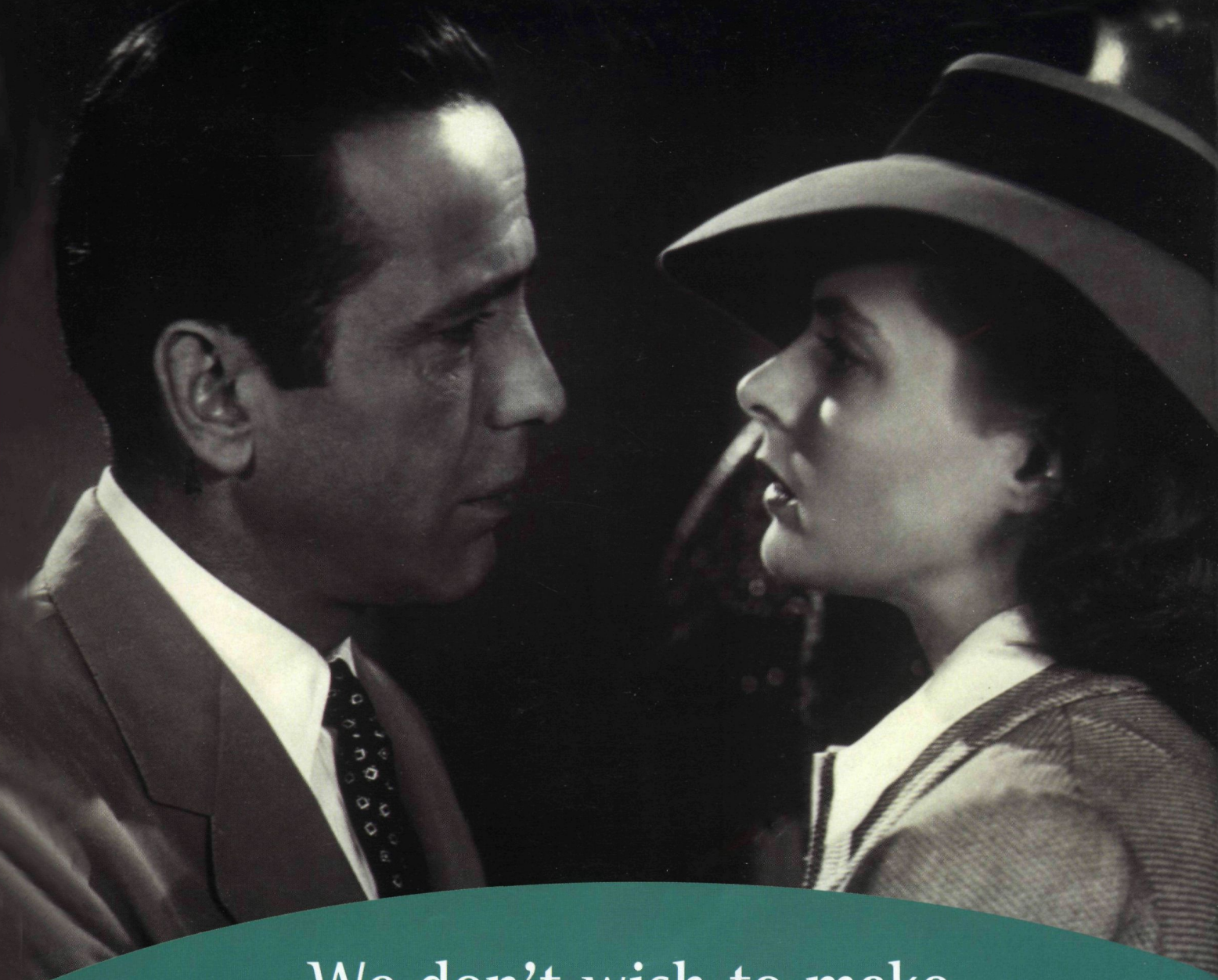

We don't wish to make a big scene about your love life...

(But we do think it's worth mentioning!)

DUTONIN

NEFAZODONE

DUTONIN FIRST-LINE IN TREATING DEPRESSION[1,2]

"...an alternative to SSRIs [Dutonin] may be preferred as a first-line agent in treating sexually active patients who have depression"[1]

Dutonin Prescribing Information (Abbreviated)

Presentation: Tablets containing 100mg and 200mg nefazodone hydrochloride.

Indications: Symptomatic treatment of all types of depressive illness, including depressive syndromes accompanied by anxiety or sleep disturbances. All adverse drug reactions should be reported to the N.D.A.B.

Dosage: Usual therapeutic dose 200mg twice daily.
Range - 200mg - 600mg daily, see data sheet.

Elderly: Usual therapeutic dose 100 - 200mg twice daily.

Renal and Hepatic Impairment: Lower end of dose range.

Children: Not recommended below the age of 18 years.

Contraindications: Hypersensitivity to nefazodone hydrochloride, tablet excipients or other phenylpiperazine antidepressants.

Drug Interactions: With other CNS medication, see data sheet.

Warning/Precautions: Hepatic or renal impairment. Patients at high risk of self harm should be kept under close supervision during initial treatment phase. Modest decrease in some psychomotor function tests but no impairment of cognitive function. Not recommended in pregnancy and lactation. Use with caution in epilepsy, history of mania/hypomania. No clinical studies available on concurrent use of ECT and nefazodone.

Side Effects: Most frequently asthenia, dry mouth, nausea, somnolence and dizziness; see data sheet.

Overdosage: There is no specific antidote for nefazodone. Gastric lavage recommended for suspected overdosage. Treatment should be symptomatic and supportive in the case of hypotension or excessive sedation.

Product Licence Numbers: Dutonin Tablets 100mg P.A. 2/60/2;
Dutonin Tablets 200mg P.A. 2/60/3.

Product Licence Holder: Bristol-Myers Squibb Pharmaceuticals Limited.

Legal Category: POM Further information from: Medical Information, Bristol-Myers Squibb Pharmaceuticals Ltd., Swords, Co. Dublin.
Telephone: 01-8406244. Date of Preparation: August 1996.

References: (1) Feiger A. et al. "Nefazodone vs Sertraline in Outpatients with major depression: Focus on efficacy, tolerability, and effects on Sexual Function and Satisfaction". J. Clin Psych. 1996: Vol. 57 (suppl. 2): 53-62. (2) Dutonin data sheet, August 1996.

Bristol-Myers Squibb Pharmaceuticals Limited

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REASON TO BE CHEERFUL

LUSTRAL™ 50mg

sertraline

Established in treating depression

Pfizer CNS DISCOVERY

Abbreviated Prescribing Information: LUSTRAL™ (sertraline)

Presentation: Tablets containing 50mg or 100mg sertraline. **Indications:** Treatment of symptoms of depressive illness, including accompanying symptoms of anxiety. Prevention of relapse or recurrence of depressive episodes, including accompanying symptoms of anxiety. Obsessive compulsive disorder (OCD). **Dosage:** Lustral should be given as a single daily dose. The initial dose is 50mg and the usual antidepressant dose is 50mg. Dosage can be further increased, if appropriate, to a maximum of 200mg daily. Patients should be maintained on the lowest effective dose. *Use in children:* Not recommended. *Use in the elderly:* Usual adult dose. **Contra-indications:** Hypersensitivity to this group of drugs. Hepatic insufficiency, unstable epilepsy and convulsant disorders, pregnancy and lactation. Do not use with, or within two weeks of ending treatment with, MAOI's. At least 14 days should elapse before starting any MAOI following discontinuation of Lustral. **Precautions, Warnings:** Renal insufficiency, ECT, epilepsy, driving. Lustral should be discontinued in a patient who develops seizures. Lustral should not be administered with benzodiazepines or other tranquillizers in patients who drive or operate machinery. The patient should be monitored for signs of suicide or mania. **Drug Interactions:** Caution with other centrally active medication. Serotonergic drugs such as tryptophan or fenfluramine should not be used with Lustral. Lithium levels should be monitored. Although Lustral has been shown to have no adverse interaction with alcohol, concomitant use with alcohol is not recommended. The potential for Lustral to interact with other highly protein bound drugs should be borne in mind. Interactions with e.g. warfarin, diazepam, tolbutamide and cimetidine have not been fully assessed. With warfarin prothrombin time should be monitored when Lustral is initiated or stopped. **Side effects:** Dry mouth, nausea, diarrhoea/loose stools, ejaculatory delay, tremor, increased sweating, dizziness, insomnia, somnolence, headache and dyspepsia. Rarely, abnormal LFTs, hyponatraemia. The following have been reported with Lustral but may have no causal relationship: movement disorders, convulsions, menstrual irregularities, hyperprolactinaemia, galactorrhoea and rash. As with other serotonin re-uptake inhibitors rare reports of agitation, confusion, depersonalisation, hallucinations, nervousness, postural hypotension, hypo/hypertension, tachycardia and arrhythmias. As with all psychoactive medicines, possible side effects on discontinuation, such as dizziness, sensory disturbance, sleep disturbance, agitation or anxiety, nausea and sweating. **Legal Category:** S1A. **Package Quantities:** 50mg tablet (PA 19/46/4) Calendar pack of 28: 100mg tablet (PA 19/46/5) Calendar pack of 28. **Product Authorisation Holder:** Pfizer Limited, Sandwich, Kent.

Further information on request: Pfizer (Ireland) Limited, Pharmapark, Chapelizod, Dublin 20, Republic of Ireland.

Pfizer

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