

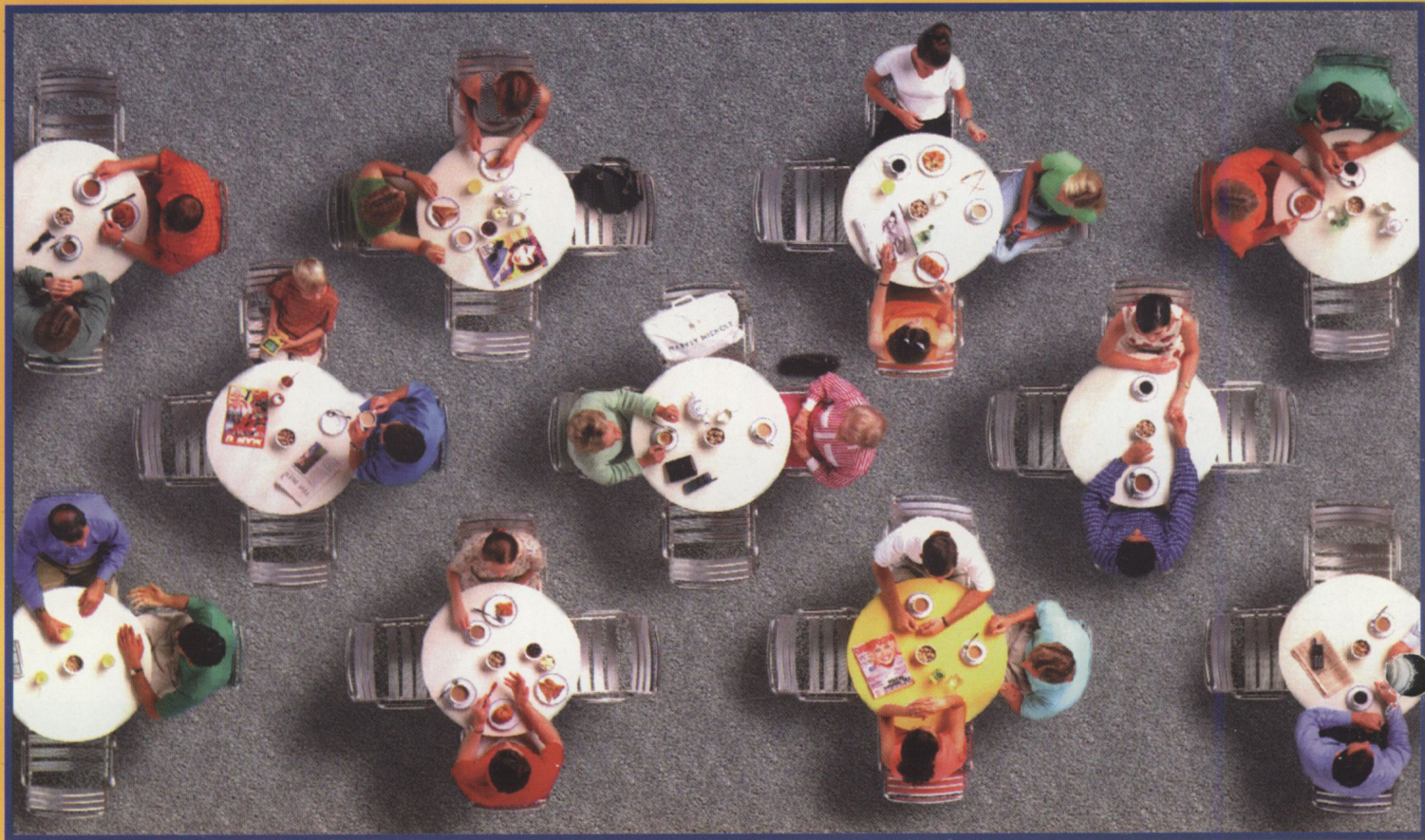
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'Straight and Narrow' by Janet Mullarney, 1991 (Painted wood, 208 x 320 x 137cm)
From the Collection at the Irish Museum of Modern Art, Royal Hospital Kilmainham, Dublin 8.
"The Straight and Narrow is to do with the Catholic idea of sacrificing. My personal guardian angel was repressive... The work is to do with the releasing of inhibitions." (Janet Mullarney)



Add life to living with schizophrenia

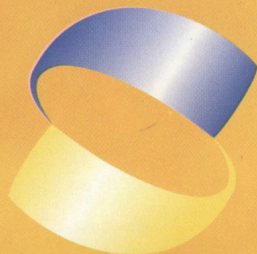
Solian is a new benzamide antipsychotic, with the ability to treat both the positive¹ and negative² symptoms of schizophrenia.

Solian offers a lower incidence of EPS than standard neuroleptics such as haloperidol,³ as well as avoiding some of the drawbacks of certain atypicals: it does not require routine cardiovascular⁴ or haematological^{4,5}

monitoring and patients gain significantly less weight than those treated with risperidone.²

So when patients need the ability to cope with their condition, Solian has the power to treat their positive¹ and their negative² symptoms whilst still allowing them to do the everyday things that the rest of us take for granted.

Solian[®]
AMISULPRIDE



Efficacy that patients can live with

Solian 50 and 200 amisulpride.

Prescribing Information. Presentation: Solian 200 tablets contain 200 mg amisulpride and Solian 50 tablets contain 50 mg amisulpride. **Indication:** Acute and chronic schizophrenia including predominant negative symptoms. **Dosage:** Acute psychotic episodes: 400-800 mg/day. Doses above 800 mg/day have not demonstrated greater efficacy but have increased rates of extrapyramidal symptoms. Dose titration not required on initiation of therapy; adjust dose according to individual response. For patients with mixed positive and negative symptoms, adjust dose for optimal control of positive symptoms. Amisulpride should be administered bd for doses above 400 mg. Establish maintenance treatment individually with the minimal effective dose. **Predominant negative symptoms:** 50-300 mg once daily adjusted according to individual response. **Elderly:** administer with caution due to the risk of hypotension or sedation. **Children:** contraindicated in children up to puberty (safety not established). **Renal insufficiency:** Reduce dose to half in patients with creatinine clearance between 10-30 ml/min. **Hepatic insufficiency:** no dosage adjustment necessary. **Contraindications:** Hypersensitivity, concomitant prolactin-dependent tumours e.g. pituitary gland prolactinomas and breast cancer, pheochromocytoma; children up to puberty; lactation. **Warning and Precautions:** As with all neuroleptics, neuroleptic malignant syndrome may occur (discontinued). **Caution:** Caution in patients with a history of

epilepsy and Parkinson's disease. Not recommended for use in pregnancy unless benefits outweigh risks. **Interactions:** Caution in concomitant administration of CNS depressants (including alcohol), antihypertensives and other hypotensive medications, and dopamine agonists. **Side Effects:** Insomnia, anxiety, agitation. Less commonly somnolence and GI disorders. In common with other neuroleptics Solian causes a reversible increase in plasma prolactin levels. Solian may also cause weight gain, acute dystonia, extrapyramidal symptoms, tardive dyskinesia, hypotension and bradycardia. Rarely, allergic reactions, seizures and neuroleptic malignant syndrome have been reported. **Cost:** Blister packs of : 200 mg x 60 tablets £67.94; 50 mg x 60 tablets £18.61. **Legal Category:** POM. **Marketing Authorisation Numbers:** Solian 50 - PA 832/4/2; Solian 200 - PA 832/4/3. **Marketing Authorisation Holder:** Lorex Synthelabo UK & Ireland Ltd, Foundation Park, Roxborough Way, Maidenhead, Berks SL6 3UD. Further information is available from the Marketing Authorisation Holder. **Irish Distributor:** Allphar Services, Dublin. Tel: (01) 404 1600. **References:** 1. Freeman HL. Int Clin Psychopharmacol 1997;12(Suppl 2):S11-S17. 2. Möller HJ. 6th World Congress of Biological Psychiatry, Nice, France, June 22-27 1997. 3. Coukell AJ, Spencer CM, Benfield P. CNS Drugs (Adis) 1996 Sep 6 (3):237-256. 4. Solian SPC. Lorex Synthelabo. 5. Clozapine SPC. Novartis. **Date of preparation:** May 1999.

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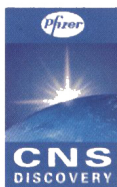
Fast Response

Can start to improve symptoms within seven days



FIRST CHOICE
LUSTRAL™ 50mg
 sertraline

A first choice antidepressant



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 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

MAOIs. 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 tranquilizers 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 822/1/4) Calendar pack of 28; 100mg tablet (PA 822/1/5) Calendar pack of 28. **Product Authorisation Holder:** Pfizer (Ireland) Limited, Pharmapark, Chapelizod, Dublin 20, Republic of Ireland. **Further information on request:** Pfizer (Ireland) Limited. Date last revised: 1/11/96 66973 June 97

