



THE BRITISH JOURNAL OF PSYCHIATRY

October 1996

Vol. 169

Editorials

- Psychiatry and the politics of the underclass. *P. Thomas, M. Romme and J. Hamelijnck* 401
- Psychological sequelae of road traffic accidents: an inadequately addressed problem. *A. Di Gallo and W. L. Parry-Jones* 405

Review Article

- Victims and perpetrators of child sexual abuse. *M. R. Hilton and G. C. Mezey* 408

Papers

- Performance on neuropsychological tests related to single photon emission computerised tomography findings in frontotemporal dementia. *C. I. Elfgrén, E. Ryding and U. Passant* 416
- Seven year prognosis in depression. Mortality and readmission risk in the Nottingham ECT cohort. *D. A. O'Leary and A. S. Lee* 423
- Early psychological reactions in a group of individuals with pre-existing and enduring mental health difficulties following a major coach accident. *H. L. Chubb and J. I. Bisson* 430
- Cognitive function and duration of rooflessness in entrants to a hostel for homeless men. *A. J. Bremner, P. J. Duke, H. E. Nelson, C. Pantelis and T. R. E. Barnes* 434
- Pharmacological treatment of depression in cancer patients. A placebo-controlled study of mianserin. *K. van Heeringen and M. Zivkov* 440

- Psychological predictors of insight and compliance in psychotic patients. *R. Kemp and A. David* 444
- Impulsivity or comorbidity in bulimia nervosa. A controlled study of deliberate self-harm and alcohol and drug misuse in a community sample. *S. L. Welch and C. G. Fairburn* 451
- Hypnagogic and hypnopompic hallucinations: pathological phenomena? *M. M. Ohayon, R. G. Priest, M. Caulet and C. Guilleminault* 459
- Paroxetine versus clomipramine in the treatment of obsessive-compulsive disorder. *J. Zohar, R. Judge and the OCD Paroxetine Study Investigators* 468
- Monitoring psychosis in general practice: a controlled trial. *I. Nazareth, M. King and S. See Tai* 475
- Neutropenia and agranulocytosis in patients receiving clozapine in the UK and Ireland. *K. Atkin, F. Kendall, D. Gould, H. Freeman, J. Lieberman and D. O'Sullivan* 483
- Suicide in the 18 years after deliberate self-harm. A prospective study. *G. M. de Moore and A. R. Robertson* 489
- Suicides in Hong Kong, Taiwan and Beijing. *P. S. F. Yip* 495
- Erotomanic symptoms in 42 Chinese schizophrenic patients. *M. R. Phillips, C. L. West and R. Wang* 501

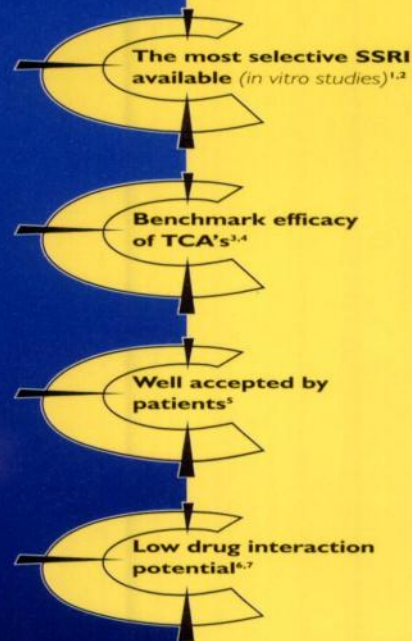
continued p. ii

Published by The Royal College of Psychiatrists

ISSN 0007-1250

Now you can lift depression with the body in mind

Site-specific 'Cipramil' addresses four key dimensions of antidepressant therapy:



Cipramil[▼]

citalopram

Specifically treating depression

Lundbeck

Research for a better life

Abbreviated Prescribing Information

Presentation: 'Cipramil' tablets, PL 0458/0058, each containing 20mg of citalopram as the hydrobromide. 28 (OP) 20mg tablets £21.28.

Indications: Treatment of depressive illness in the initial phase and as maintenance against relapse/recurrence. **Dosage:** Adults. 20mg a day. Depending upon individual patient response, this may be increased in 20mg increments to a maximum of 60mg. Tablets should not be chewed, and should be taken as a single oral daily dose, in the morning or evening without regard for food. **Elderly.** 20mg a day increasing to a maximum of 40mg dependent upon individual patient response. **Children.** Not recommended. Restrict dosage to lower end of range in hepatic impairment. Dosage adjustment not necessary in cases of mild/moderate renal impairment. No information available in severe renal impairment (creatinine clearance <20ml/min). **Contra-indications:** Combined use of 5-HT agonists. Hypersensitivity to citalopram. **Pregnancy and Lactation:** Safety during human pregnancy and lactation has not been established. Use only if potential benefit outweighs possible risk. **Precautions:** Driving and operating machinery. History of mania. Caution in patients at risk of cardiac arrhythmias. Do not use with or within 14 days of MAO inhibitors; leave a seven day gap before starting MAO inhibitor treatment. **Drug Interactions:** MAO inhibitors (see Precautions). Use lithium and

tryptophan with caution. Routine monitoring of lithium levels need not be adjusted. Alcohol is not advised. **Adverse Events:** Most commonly nausea, sweating, tremor, somnolence and dry mouth. **Overdosage:** Symptoms have included somnolence, coma, sinus tachycardia, occasional nodal rhythm, episode of grand mal convulsion, nausea, vomiting, sweating and hyperventilation. No specific antidote. Treatment is symptomatic and supportive. Early gastric lavage suggested. **Legal Category:** POM 24.1.95. Further information available upon request. Product licence holder: Lundbeck Ltd, Sunningdale House, Caldecotte Lake Business Park, Caldecotte, Milton Keynes, MK7 8LF. 'Cipramil' is a trademark. © 1995 Lundbeck Ltd.

Date of preparation: May 1995

References

1. Hyttel J, XXII Nordiske Psykiater-Kongres, Reykjavik, 11 August, 1988: 11-21.
2. Eison AS et al, Psychopharmacology Bull 1990; 26 (3): 311-315.
3. Rosenberg C et al, Int Clin Psychopharmacol 1994; 9 (Suppl 1): 41-48.
4. Shaw DM et al, Br J Psychiatry 1986; 149: 515-517.
5. Bech P and Cialdella P, Int Clin Psychopharmacol 1992; 6 (Suppl 5): 45-54.
6. Sindrup SH et al, Ther Drug Monit 1993; 15: 11-17.
7. Van Harten J, Clin Pharmacokin 1993; 24 (3): 203-220.

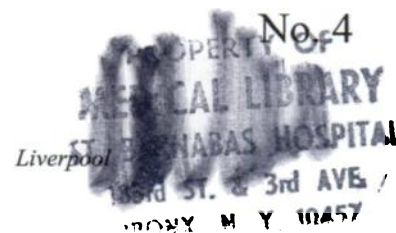
0495/CIP/501/019

The British Journal of Psychiatry

October 1996

Volume 169

Editor Greg Wilkinson



Senior Associate Editor
Alan Kerr *Newcastle upon Tyne*

Associate Editors
Sidney Crown *London*
Julian Leff *London*
Sir Martin Roth *Cambridge*
Sir Michael Rutter *London*
Peter Tyrer *London*

Editorial Advisers
Herschel Prins *Leicester*
Sir John Wood *Sheffield*
Kathleen Jones *York*

Assistant Editors
Mohammed Abou-Saleh *Al-Ain*
Louis Appleby *Manchester*
German Berrios *Cambridge*
Alistair Burns *Manchester*
Patricia Casey *Dublin*
John Cookson *London*
David Cottrell *Leeds*
Nigel Eastman *London*
Tom Fahy *London*
Anne Farmer *Cardiff*
Michael Farrell *London*
Nicol Ferrier *Newcastle upon Tyne*
William Fraser *Cardiff*
Richard Harrington *Manchester*
Sheila Hollins *London*

Jeremy Holmes *Barnstaple*
Alexander Kellam *Cardiff*
Peter Kennedy *York*
Michael King *London*
Alan Lee *Nottingham*
Shôn Lewis *Manchester*
Robin McCreadie *Dumfries*
Ian McKeith *Newcastle upon Tyne*
Roy McClelland *Belfast*
Stuart Montgomery *London*
David Owens *Leeds*
Ian Pullen *Edinburgh*
Rosalind Ramsay *London*
Henry Rollin *London*
Jan Scott *Newcastle upon Tyne*
Mike Shooter *Cardiff*
Andrew Sims *Leeds*
Jeanette Smith *Bristol*
George Stein *London*
David Tait *Perth*

Corresponding Editors

Sidney Bloch *Australia*
Patrice Boyer *France*
J.M. Caldas de Almeida *Portugal*
Andrew Cheng *Taiwan*
Andrei Cristian *Romania*
E. L. Edelstein *Israel*
Václav Filip *Czech Republic*
Heinz Katschnig *Austria*
Kenneth Kendler *USA*

Past Editors

Eliot Slater 1961–72 Edward H. Hare 1973–77 John L. Crammer 1978–83 Hugh L. Freeman 1984–93

Founded by J. C. Bucknill in 1853 as the *Asylum Journal* and known as the *Journal of Mental Science* from 1858 to 1963

Toshi Kitamura *Japan*
Arthur Kleinman *USA*
F. Lieh Mak *Hong Kong*
Jair Mari *Brazil*
Harold Merskey *Canada*
Paul Mullen *Australia*
Ahmed Okasha *Egypt*
Volodymer Poltavetz *Ukraine*
Michele Tansella *Italy*
Toma Tomov *Bulgaria*
John Tsiantis *Greece*
J. L. Vázquez-Barquero *Spain*
Richard Warner *USA*

Statistical Adviser

Pak Sham *London*

Staff

Publications Manager
Dave Jago
Scientific Editor
Lesley Bennun
Assistant Scientific Editors
Dinah Alam
Andrew Morris
Editorial Assistants
Zofia Ashmore
Julia Burnside
Sarah Fargie
Marketing Assistant
Dominic Bentham

Published by the Royal College of Psychiatrists

Contents continued from front cover

Limbic dysfunction in schizophrenia and mania. A study using 18F-labelled fluorodeoxyglucose and positron emission tomography. <i>A. H. Al-Mousawi, N. Evans, K. P. Ebmeier, D. Roeda, F. Chaloner and G. W. Ashcroft</i>	509
Measuring the mental health status of a population: a comparison of the GHQ-12 and the SF-36 (MHI-5). <i>C. J. McCabe, K. J. Thomas, J. E. Brazier and P. Coleman</i>	517
Columns	
Correspondence	522
A hundred years ago	527
Book reviews	528
<i>American Journal of Psychiatry</i> (contents)	535

Next month in the BJP

Maternal psychopathology and prediction of outcome based on mother-infant interaction ratings (BMIS). *A. E. Hipwell and R. Kumar*
Seasonal variation in bipolar disorder. *T. Partonen and J. Lönngqvist*
Aspects of perinatal psychiatric illness. *D. B. Pritchard and B. Harris*
Emotional overinvolvement in parents of patients with schizophrenia or related psychosis: demographic and clinical predictors. *H. Bentsen, B. Boye, O. G. Munkvold, T. H. Notland, A. B. Lersbryggen, K. H. Oskarsson, et al*

The *British Journal of Psychiatry* is published monthly by the Royal College of Psychiatrists (a registered charity, registration number 228636). The *BJP* publishes original work in all fields of psychiatry. All communications, including manuscripts for publication, should be sent to the Editor, *British Journal of Psychiatry*, 17 Belgrave Square, London SW1X 8PG.

Full instructions to authors are given at the beginning of the January and July issues.

Subscriptions

Non-members of the College should contact the Publications Subscription Department, Royal Society of Medicine Press Limited, PO Box 9002, London W1A 0ZA (tel. 0171 290 2928; fax 0171 290 2929). Annual subscription rates for 1996 (12 issues post free) are as follows:

Europe (& UK): institutions £160, individuals £140
US: institutions \$310, individuals \$230
Elsewhere: institutions £190, individuals £150
Full airmail is £36/US\$64 extra.
Single copies of the Journal are £14, \$25 (post free).

Payment should be made out to the British Journal of Psychiatry.

Queries from non-members about missing or faulty copies should be addressed within six months to the same address; similar queries from College members should be addressed to the Registration Subscription Department, The Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG.

© 1996 The Royal College of Psychiatrists. Unless so stated, material in the *British Journal of Psychiatry* does not necessarily reflect the views of the Editor or the Royal College of Psychiatrists. The publishers are not responsible for any error of omission or fact.

Back issues

Back issues published before 1995 may be purchased from William Dawson & Sons Ltd, Cannon House, Folkestone, Kent (tel. 01303 850 101).

Advertising

Correspondence and copy should be addressed to Peter T. Mell, Advertising Manager, PTM Publishers Ltd, 282 High Street, Sutton, Surrey SM1 1PQ (tel. 0181 642 0162; fax 0181 643 2275).

US Mailing Information

The *British Journal of Psychiatry* is published monthly by the Royal College of Psychiatrists. Subscription price is \$295. Second class postage paid at Rahway, NJ. Postmaster send address corrections to the *British Journal of Psychiatry*, c/o Mercury Airfreight International Ltd Inc., 2323 Randolph Avenue, Avenel, New Jersey 07001.

©™ The paper used in this publication meets the minimum requirements of American National Standard for Information Sciences – Permanence of Paper for Printed Library Materials. ANSI Z39.48-1984.

Typeset by Dobbie Typesetting Ltd, Tavistock, and Henry Ling Ltd.

Printed by Henry Ling Ltd, The Dorset Press, 23 High East Street, Dorchester, Dorset DT1 1HD.

New Brief Pulse ECT with *Computer-Assisted* Easy Seizure Monitoring



Somatics Thymatron™ DGx

- Automatically monitors your choice of EEG-EEG, EEG-ECG, or EEG-EMG and determines EEG and motor seizure lengths.
- Computer-measured seizure quality, including postictal EEG suppression, seizure energy index.
- Up to 8 seconds stimulus duration; pulsewidth as short as 0.5 ms.
- Single dial sets stimulus charge by age; high-dose option available.
- FlexDial™ adjusts pulsewidth and frequency without altering dose.

Distributed in the U.K. by:
DANTEC Electronics, Ltd.
Garonor Way
Royal Portbury
Bristol BS20 9XE
TEL (44) 1275-375333
FAX (44) 1275-375336

Distributed in Australia by:
MEECO Holdings Pty. Ltd.
10 Seville St.
North Parramatta NSW 2151
Australia
TEL (61) 2630-7755
FAX (61) 2630-7365

Distributed in New Zealand by:
WATSON VICTOR, Ltd.
4 Adelaide Rd.
Wellington, New Zealand
TEL (64) 4-385-7699
FAX (64) 4-384-4651

Distributed in India by:
DIAGNO.SYS
New Delhi
TEL (91) 11-644-0546
FAX (91) 11-622-9229

Distributed in Pakistan by:
IQBAL & CO.
Islamabad
TEL (92) 51-291078
FAX (92) 51-281623

Distributed in South Africa by:
DELTA SURGICAL
Craighall
TEL (27) 11-792-6120
FAX (27) 11-792-6926

Distributed in U.S.A. and Canada by:

 **SOMATICS, INC., 910 Sherwood Drive # 17, Lake Bluff, IL, 60044, U.S.A.**
Fax: (847) 234-6763; Tel: (847) 234-6761

**THE SOCIETY FOR THE STUDY OF ADDICTION
TO ALCOHOL AND OTHER DRUGS**

**ANNUAL SYMPOSIUM
DRUGS, ALCOHOL & CRIME
REDUCING COMMUNITY HARM**

to be held at

The Royal Society of Medicine,
1 Wimpole Street, London W1M 8AE

Wednesday November 13th and
Thursday November 14th, 1996

Speakers include: Prof. Philip Bean, Dr Colin Drummond,
Asst Chief Constable Castree, Dr Michael Farrell, Dr
Andrew Johns, Prof. Roy Light and Mr Alex Stevens

**INVITATION FOR SUBMISSION OF ORIGINAL
PAPERS**

Afternoon sessions will be devoted to the presentation of
short papers on any aspect of the Addictions.
Persons wishing to present a paper are invited to submit an
abstract not exceeding 200 words by **September 30, 1996**.

**FOR FURTHER DETAILS AND SYMPOSIUM
APPLICATION FORMS PLEASE CONTACT:**

Dr Andrew Johns or Mrs Elaine McMahon
Professorial Unit, Broadmoor Hospital, Crowthorne,
Berkshire RG45 7GE
Telephone: 01344 754119 Fax: 01344 754334

*The Symposium is open to members and non-members of the
Society*

South of Scotland

**COGNITIVE BEHAVIOURAL
THERAPY COURSE 1997**

A course in the theory and practice of
Cognitive Behavioural Therapy, based in the
South of Scotland. The course has been
specifically designed to minimise costs and
travelling time for busy clinical staff.

Organisers

Dr Chris Freeman, Edinburgh
Dr Kate Davidson, Glasgow

Structure

The teaching programme will run from
February to November, starting with a three-
day Induction Block. Thereafter, fortnightly
whole-day teaching sessions, alternating with
fortnightly individual supervision.

Cost: £1,750

Further Information

Course Administrator, Mrs Marie Mercer,
The Cottage, Royal Edinburgh Hospital,
Morningside Terrace, Edinburgh EH10 5HF.
Tel.: 0131 537 6707; Fax: 0131 537 6104.

**ROYAL SOCIETY OF MEDICINE
SECTION OF PSYCHIATRY**

**MENTAL HEALTH FOUNDATION
ESSAY PRIZE**

This prize is to be awarded for an original essay with
particular relevance to Psychiatry.

Entry is invited from candidates currently practising medicine in
the UK or Republic of Eire, and in training at any grade from
Senior House Officer to Senior Registrar or equivalent.

The winner and runner up may be invited to present their papers
at a meeting of the Section of Psychiatry during the session.

Closing date for entries is 31 March 1997

For a complete copy of the regulations, please contact:

Mrs Alyson Ling, Section Administrator
at the Royal Society of Medicine.

Tel: 0171 290 2985

Fax: 0171 290 2989

*The aim of the Royal Society of Medicine is the advancement of knowledge in
all fields of medicine and allied subjects*

PSYCHOANALYTIC PSYCHOTHERAPY

Vol. 10 Supplement

**Publication of
CONFERENCE PROCEEDINGS**

**Future Directions of Psychotherapy
in the NHS:**

Adaptation or Extinction?

Copies of the transcript from the Conference organ-
ised by the Royal College of Psychiatrists and the
Association of Psychoanalytical Psychotherapists in
the NHS, at Regents College last February, will be
available next month.

Orders, with cheques for £8, payable to Psycho-
analytic Psychotherapy, may be sent to

**Conference Proceedings
24 Middleton Road
LONDON
E8 4BS**

or credit-card details telephoned to 0171 241 3696 or
faxed to 0171 241 3606 for a copy to be sent to you
as soon as they arrive from our Printers.

Lilly

NEW THERAPIES IN PSYCHIATRY

This is an excellent opportunity to join one of the world's most successful pharmaceutical companies, dedicated to finding new therapies for disease management. In 1995, Lilly invested over \$1 billion on R&D and has an exciting portfolio of new medicines under development, including several highly promising prospects in the CNS field.

As physicians play an increasingly important rôle in the company's business activities, we seek an experienced psychiatrist to spearhead the future UK development of serotonin re-uptake inhibitors and treatments for schizophrenia. This will include the provision of authoritative professional advice and support to multidisciplinary project teams. You would also advise on clinical R & D programmes for new molecules being developed for treatment of other disorders of the central nervous system.

To qualify for this key position, you should possess your MRCPsych (or equivalent), and have obtained at least a further 2 years' experience in good units in academic or clinical psychiatry. You should also have a good understanding of CNS pharmacotherapy assessment. Personal attributes should include high professional standards, sound judgement, good communication and organisational skills, vigour and enthusiasm.

This position commands an excellent remuneration package, which includes a non-contributory pension scheme, company car and generous assistance with costs of relocation, if appropriate.

*To discuss the appointment further, please 'phone **Dr Kevin Young** in complete confidence:*

**Talentmark Recruitment, King House, 5-11 Westbourne Grove,
London W2 4UA. Tel: 0171 - 229 2266. Fax: 0171 - 229 3549.**



CONSULTANT/S IN OLD AGE PSYCHIATRY

Central England

Innovative and progressive, this successful £25 million turnover Trust, serves a population of 300,000 in a prosperous Midlands City. The Trust is translating growth income into valuable improvements in specialist health care and is seeking to strengthen the clinical leadership of its community-orientated mental health service through the appointment of two high calibre Consultants in Old Age Psychiatry.

The well-equipped 34 bed integrated In-patient Unit for Old Age Psychiatry and modern Day Hospital facilities are located on a major District General Hospital site, offering several regional specialties, including a well-developed Neuroscience Department. The 48,000 'over 65' population are served by three established Community Mental Health Teams (Older People), each of which will be led by a Consultant in Old Age Psychiatry.

Widely acclaimed for the highly regarded county-wide postgraduate training scheme, the Trust has excellent junior medical support, including several Specialist Registrar posts in Adult Mental Health and related specialties. There is a newly opened postgraduate Psychiatry Centre and the successful candidates will be actively encouraged to enhance the good research links which already exist with local universities. These two appointments will add to the present complement of thirteen Consultants, which include two holders of Professorial chairs.

Top Level Salary + Benefits

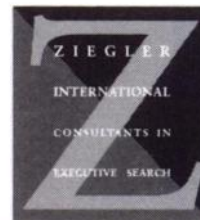
Accredited, contemporary Psychiatrists who are seeking a well-supported community-orientated clinical role, with outstanding opportunities for research and teaching, should examine these exemplary and stimulating positions closely. Applications are encouraged from both Doctors completing training and established Consultants.

These high profile and rewarding appointments afford an opportunity to work in an attractive, affluent and accessible city, offering the complete spectrum of sporting, entertainment and cultural facilities, within a rural county boasting unspoilt open countryside, historic towns and first-class communications links.

Male or female candidates should submit, in confidence, a comprehensive CV quoting reference number ZI/260 by **16th October 1996** to: ZIEGLER INTERNATIONAL, Consultants in Executive Search, The Jeffreys Building, Cowley Road, Cambridge CB4 4WS.
Tel: 01223 425030,
Fax: 01223 421863.

Assignment Briefing specifications available upon request.

Arrangements for site visits to be made through:
Janet Courtenay-Wilson/
Laurence Irvine, Director/s,
Ziegler International.



College Seminars Series

Seminars in Clinical Psychopharmacology

Edited by David J. King

Psychopharmacology is a key both to the understanding of the biological basis of severe mental illness and to the rational use of drugs in clinical psychiatry. This book is an excellent introduction to an ever-expanding and fascinating subject, linking relevant basic neuropharmacology to clinical practice. It aims to bridge the gap between the theoretical basis for the mode of action of psychotropic drugs and guidance on their clinical use, and should increase interest in and understanding of the drugs widely used in clinical practice. £20.00, 544pp., 1995, ISBN 0 902241 73 7

Available from bookshops and from the Publications
Department, Royal College of Psychiatrists, 17 Belgrave Square,
London SW1X 8PG (Tel. 0171 235 2351 extension 146)



CONSULTANT/S IN CHILD AND ADOLESCENT MENTAL HEALTH

South East England

Winner of the European Golden Helix Award for quality in patient care and NHS "trainer of the year" award for total commitment to staff development and training, this innovative £37 million turnover Trust, serving a population of 281,000 in both urban and rural locations, is aiming to be a provider of excellence in Child and Family Services and to add impetus to this objective, seeks to appoint two high calibre Consultant Child and Adolescent Psychiatrists.

The roles have the rare and attractive benefit of formal academic sessions for the pursuit of a research interest at Cambridge University. A key challenge will be to integrate two existing services in adjacent towns, moving to single premises within two years. Responsible for children and adolescents up to the age of 18, each Consultant will have particular, though overlapping, responsibilities for younger and older age groups and will be encouraged to develop special interests.

Ideal candidates, either Doctors completing training or established Consultants, will be excellent communicators, comfortable with multi-disciplinary working, able to deliver high quality clinical services, committed to evidence based practice and to research and development and keen to invest in both personal development and the training of others.

Top Level Salary + Benefits

Applications are encouraged from both whole time/maximum part-time candidates and those seeking part-time employment (5-6 sessions).

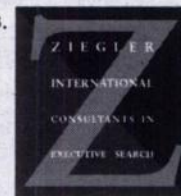
These high profile, prestigious appointments, afford an opportunity to live in, or near to, The Chilterns, a designated area of outstanding natural beauty, with an excellent selection of historic towns and picturesque villages, popular with professionals and their families, and yet only thirty minutes from Central London with its unrivalled cultural, recreational and shopping facilities.

Male or female candidates should submit, in confidence, a comprehensive CV quoting reference number ZI/270 by 16th October 1996 to: ZIEGLER INTERNATIONAL, Consultants in Executive Search, The Jeffreys Building, Cowley Road, Cambridge CB4 4WS. Tel: 01223 425030, Fax: 01223 421863.

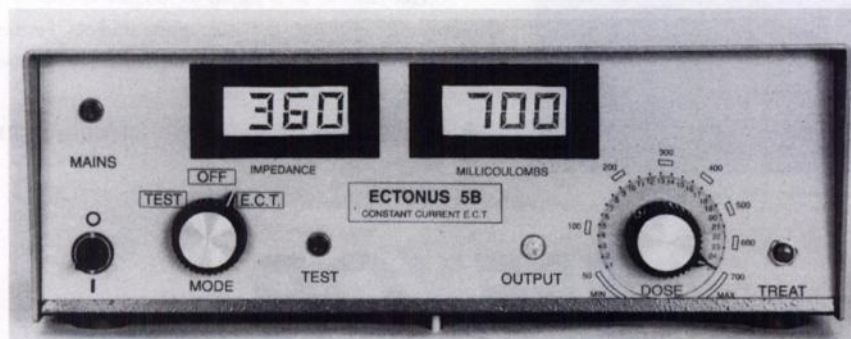
Assignment Briefing specifications available upon request.

Arrangements for site visits to be made through:

Janet Courtenay-Wilson/
Laurence Irvine, Director/s,
Ziegler International.



THE CONSTANT CURRENT SERIES 5B E.C.T. APPARATUS



ECTONUS Constant Current Series 5B

Supplementing the Constant Current Series 5A ECT Apparatus

ECTONUS and ECTONUSTIM models available from the manufacturers with over 46 years of experience in the design of E.C.T. equipment.

ECTRON LTD

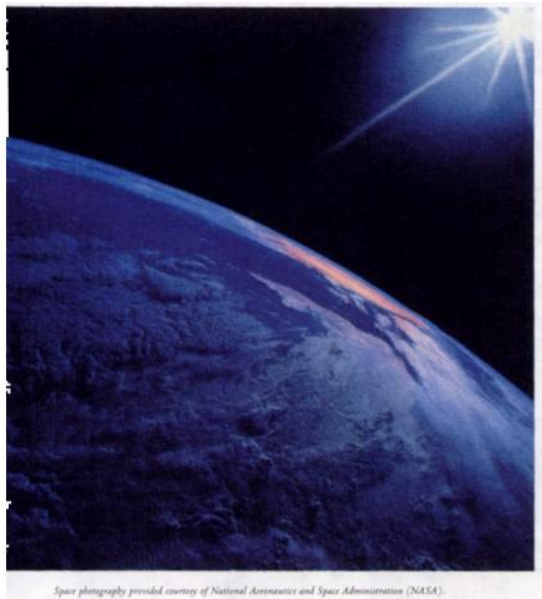
KNAP CLOSE LETCHWORTH HERTS ENGLAND SG6 1AQ
Telephone 01462 682124 Fax 01462 481463

—EFEXOR—

THE WORLD'S FIRST

S · N · R · I

SEROTONIN NORADRENALINE REUPTAKE INHIBITOR



Space photography provided courtesy of National Aeronautics and Space Administration (NASA).

The result of original Wyeth research and development, Efexor (venlafaxine) is the first of a new class of antidepressants, the SNRIs.

Efexor is a serotonin and noradrenaline reuptake inhibitor and increases the availability of both of the key neurotransmitters involved in depression.¹ This is in line with current thinking on the pathophysiology of depression, which stresses the importance of interactions between serotonin and noradrenaline.²

Extensive clinical trials of Efexor in over 2,500 depressed patients have confirmed the success of this approach. Efexor has been shown to be at least as effective and better tolerated than standard tricyclic and related antidepressants such as dothiepin, imipramine and trazodone.³

Efexor has also been shown to compare favourably with the SSRI fluoxetine in inpatient⁴ and outpatient studies.⁵ Furthermore, Efexor demonstrates a significant dose response curve which allows flexibility of treatment in a wide range of patients.⁶

For many depressed patients, the world's first SNRI could make a world of difference.

EFEXOR^{*} ▼
VENLAFAXINE 37.5mg b.d.

EFFECTIVE IN A WIDE RANGE OF DEPRESSED PATIENTS

PRESCRIBING INFORMATION PRESENTATION Tablets containing 37.5mg, 50mg or 75mg venlafaxine (as hydrochloride) **USE** Treatment of depressive illness **DOSAGE** Usually 75mg/day (37.5mg bd) with food increasing to 150mg/day (75mg bd) if necessary in more severely depressed patients, 150mg/day (75mg bd) increasing every 2 or 3 days in up to 75mg/day increments to a maximum of 375mg/day, then reducing to usual dose consistent with patient response. Discontinue gradually. Elderly use normal adult dose. Doses should be reduced by 50% for moderate renal or moderate hepatic impairment. **CONTRA-INDICATIONS** Pregnancy, lactation, concomitant use with MAOIs, hypersensitivity to venlafaxine or other components, patients aged below 18 years. **PRECAUTIONS** Use with caution in patients with myocardial infarction, unstable heart disease, renal or hepatic impairment, or a history of epilepsy (discontinue in event of seizure). Patients should not drive or operate machinery if their ability to do so is

impaired. Possibility of postural hypotension (especially in the elderly). Women of child-bearing potential should use contraception. Prescribe smallest quantity of tablets according to good patient management. Monitor blood pressure with doses >200mg/day. Advise patients to notify their doctor should an allergy develop or if they become or intend to become pregnant. Use with caution in patients taking other CNS-active drugs or in the elderly or hepatically-impaired patients taking cimetidine. Patients with a history of drug abuse should be monitored carefully. Not recommended in severe renal or severe hepatic impairment. **INTERACTIONS** MAOIs: do not use Efexor in combination with MAOIs or within 14 days of stopping MAOI treatment. Allow 7 days after stopping Efexor before starting a MAOI. **SIDE-EFFECTS** Nausea, headache, insomnia, somnolence, dry mouth, dizziness, constipation, asthenia, sweating, nervousness, anorexia, dyspepsia, abdominal pain, anxiety, impotence, abnormality of accommodation,

vasodilation, vomiting, tremor, paraesthesia, abnormal ejaculation/orgasm, chills, hypertension, palpitation, weight gain, agitation, decreased libido, rise in blood pressure, postural hypotension, reversible increases in liver enzymes, slight increase in serum cholesterol. **BASIC NHS PRICE:** 37.5mg tablet (PL 0011/0199) – Calendar pack of 56 tablets £23.97, 50mg tablet (PL 0011/0200) – Blister pack of 42 tablets: £23.97, 75mg tablet (PL 0011/0201) – Calendar pack of 56 tablets: £39.97. **LEGAL CATEGORY:** POM. Further information is available upon request. **PRODUCT LICENCE HOLDER:** Wyeth Laboratories (John Wyeth & Brother Limited), Taplow, Maidenhead, Berkshire SL6 0PH. **REFERENCES** 1. Clerc GE *et al.* *Int Clin Psychopharmacol* 1994, 9: 139-142. 2. Kalus O, Asnis GH, van Praag HM, *Psychiatric Annals* 1989, 19: 348-353. 3. Data on file, Medical Affairs Department, Wyeth-Ayerst International Inc. Date of Preparation December 1995. Code: Z773520/09/95. * trade marks.

Z773520/09/95