BRIEF SUMMARY of PRESCRIBING INFORMATION INDICATIONS AND USAGE Bipolar Mania: SERXOUEL is indicated for the short-term treatment of acote mar episode sasociated with bipolar i disorder, as either monotherapy or adjunct therapy to infimum or divalgoves. T relicavy of SERXOUEL in acute bipolar main aves stabilished in two 3-week monotherapy triat and one 3-we adjunct therapy trial of bipolar i, patients initially. Inspiralated for up to 7 days for acute maria. Effectiveness in end that a stable short benefative end acute that the short term (the physician who elects to u SERXOUEL for extended periods should periodcally re-evaluate the long-term risks and benefits of the double in individual patient. Serkondynemis: SERXOUEL is indicated for the treatment of a stinophrenia. The efficacy SERXOUEL in schoolphrenia was established in short-term (6-week) controlled trias of schoolphrenia the efficiences of serkondule in controlled trias. Therefore, the physician who elects to us SERXOUEL for cetended periods shoul periodcally re-evaluate the long-term use that is, short ben individual patient. Construction extended the constructive individual patient. s fo

CONTRAINDICATIONS: SEROQUEL is contraindicated in individuals with a known hypersensitivity to this medica

Periodically re-existing the provide software of the provide software of the provide software provides the provide provides of the provide software of

periodically during treatment. May patient treated with altypical antipsycholics should be monitored for symptomes of hyper-plycene during treatment with altypical antipsycholics should under plasting blood jucces testing. In some cases, plycene during treatment altypical antipsycholic was discontinued to the subset of the alternet continuation of anti-distric treatment despite discontinuation of the supper during the initial dose interior to magnetic altypication and the plycenesis treatment and the splice discontinuation of the supper during the initial dose interior points, prob-ably reliefung is, cardenergic antaling in planetism with noven cardiovascular disease (history of ryocardial interction or ischemic heart disease, heart lature or conductor altypication and synchronic and antitypication and synchronic and the splice and

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SEROQUEL® (quetiapine furnarate) Tablets

3- to 12-Week Placebo-Controlled Clinical Trials' for the Treatment of Schizophrenia and Acute Bipotar Mania (montheapy): Body as a Whole: Headsche, Pain, Asthenia, Addominial Pain, Back Pain, Fever, Cantiforesatteri Tackyradie, Peover Higherstein, Utgewähler: Um Munit, Constpation, Wonnien, Dyssepsie, Gastroenteritis, Gamma Gutarnyl, Transpeptidase Increased, Metabolic and Nutritional: Weight Gain, SSPT Increased, SGOT Gamma Diarang. Transpectises Increases, Metabelia end Mutriloais: Weyling Lain, SOPT Locases, 6007 Locases, Henroz, Algioni, Somana Di, Zorases, Andriv, Regnatory, Phanyang, Kinsins, Sina and Appendages: Rash: Special Samess: Anthyapia T-Shrin for which the SSPOUEL incidence was equal to a less than plactob are not solid in the table of Indicate the following cateful intrug, Antheria, Binsi and Discover and Stranspectra (1984). doctames of this, or monot of parts and the set associated with the use of SSPOUEL, incidence of SN or greeter and observed at a rate on SSPOUEL at least three that of plactob was common (1984). doctames of the Intrus of the Internet of SPOUEL, and doctames (1984). doctames of the Internet (1984). doctames of the Internet of the Internet of the Internet of SPOUEL, incidence of SN or greeter and observed on the Internet on Internet on Internet in the Internet of Internet (1984). doctames of Internet of Ause Discover and Automatical Internet on Internet

Steven Johnson syndrome (SIS) DINIG AUSE AND DEPENDENCE: Controlled Substance Class: SEPLOQUEL is not a controlled substance. Physical and Psychologic Heprodence: SEPLOQUEL has not ben systematically studied in anismo of humans to its posten-tial for abuse, tolerance or physical dependence. While the clinical trials did not reveal any lendency for any drog-service behavior. These observations were not systematic and it is not possible to predict on the basis of this limit. Consequently, patients should be evaluated carefully for a history of drug abuse, and such patients is should be evaluated carefully for a history of drug abuse, and such patients is should be evaluated carefully for a history of drug abuse, and such patients is should be evaluated carefully for a history of drug abuse, and such patients is should be evaluated carefully for a history of drug abuse, and such patients is should be evaluated carefully for a history of drug abuse, and such patients is should be evaluated carefully for a history of drug abuse, and such patients is should be evaluated carefully for a history of drug abuse, and such patients is not does and the evaluated carefully for a history of drug abuse, and such patients is not does and the evaluated carefully for a history of drug abuse, and such patients is not does and the evaluated carefully for a history of drug abuse, and such patients is not abuse of the second second abuse of the second second between the second second abuse of the drug abuse.

base terd basery to sign to misute or bases or backward backward backward baser in the dury seeking backward. **OVERDOSAGE: Human experience:** Experience with SERDOUEL (quetaprine fumarate) in acute overdosage was limited in the initial and actabase of expersive with serBoOUEL (quetaprine fumarate) in acute overdosage was limited in the initial and actabase of expersive with serBoOUEL (quetaprine fumarate) in acute overdosage was limited in the initial and actabase of expersive with serBoOUEL (quetaprine fumarate) in acute overdosage was limited in the initial and actabase of expersive with serBoOUEL (quetaprine fumarate) in acute overdosage was limited in the initial and actabase of expersive with the problem and first degree heart block. In post-micing experience, there have been very are reports of overdosage, establish and maintain an arway and ensure adequet orgenation and verification in zave of acute overdosage, establish and maintain an arway administration of activated charcial together with a backwe should be considered. The possibility of obtains-in secure or dyoctin reaction (in the acid an rick of blowing overdos are), respect and the administration indicated overdosage of SERDOLEL. Instein a grant in the respective location proteins when administrated blocking properties of brefylum might be additive to those of quetapoint, especting higher when administrated blocking properties of brefylum might be additive to those of quetapoint, especting higher when administrated blocking properties of brefylum might be additive to those of quetapoint, especting higher when administrated blocking properties of brefylum might be additive to those of quetapoint, especting higher when administrated blocking properties of brefylum might be additive to those of quetapoint, especting higher when administrated blocking moderates of brefylum might be additive to those of quetapoint, especting higher when administrated blocking moderates of brefylum might be additive to those of quetapoint, espectin induced alpha blockade). In cases of severe extrapyramidal symptoms, anticholinergic medication should be administered. Close medical supervision and monitoring should continue until the patient recovers.

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I never thought I could be myself again

Now I can

SEROQUEL is indicated for the treatment of acute manic episodes associated with bipolar I disorder and the treatment of schizophrenia. Patients should be periodically reassessed to determine the need for continued treatment.

End

Prescribing should be consistent with the need to minimize the risk of tardive dyskinesia, seizures, and orthostatic hypotension. A rare condition referred to as neuroleptic malignant syndrome (NMS) has been reported with this class of medications, including SEROQUEL.

There have been reports of diabetes mellitus and hyperglycemia-related adverse events associated with the use of atypical antipsychotics, including SEROQUEL.

The most commonly observed adverse events associated with the use of SEROQUEL in clinical trials were somnolence, dry mouth, dizziness, constipation, asthenia, abdominal pain, postural hypotension, pharyngitis, SGPT increase, dyspepsia, and weight gain.



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