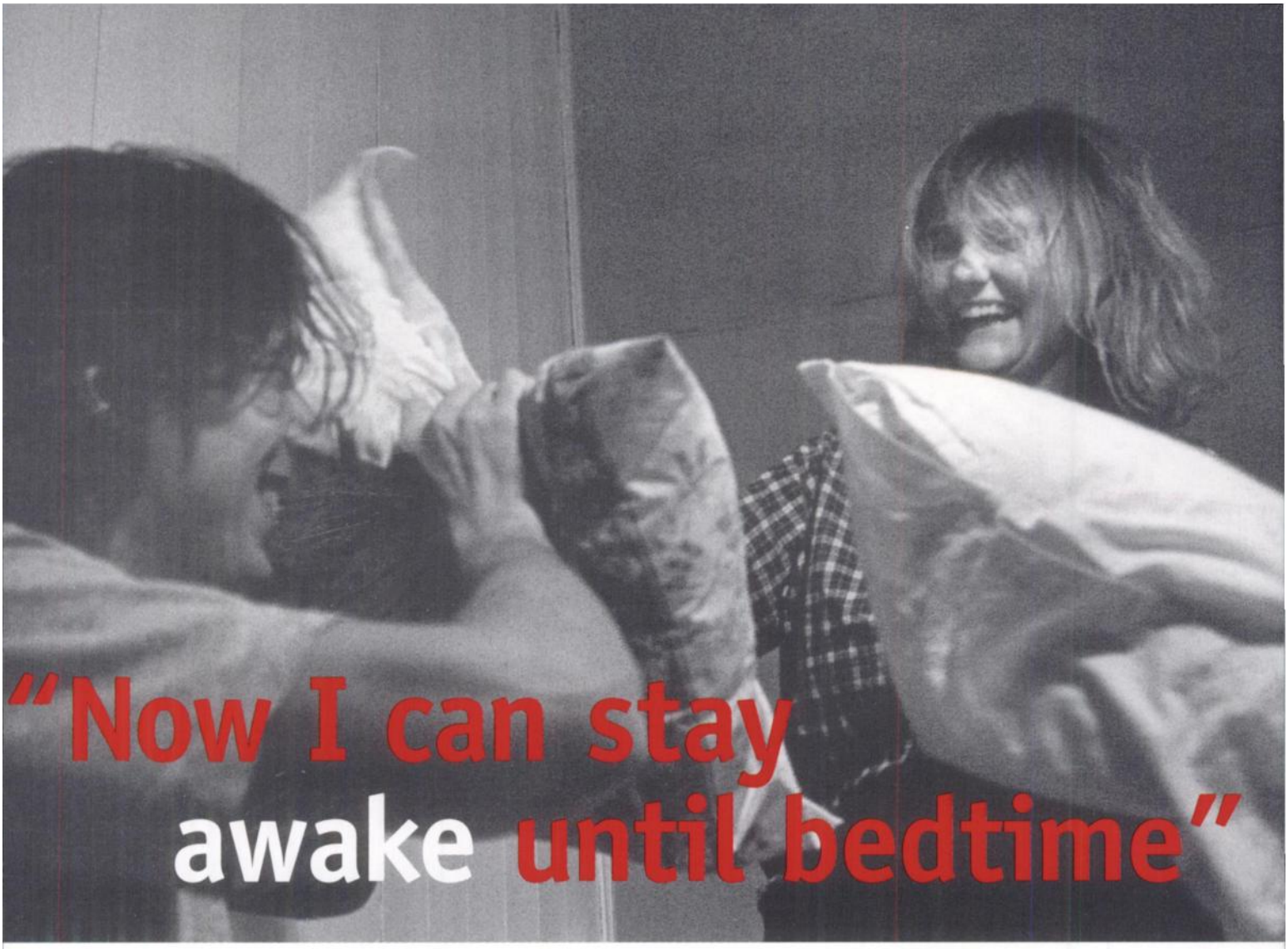
https://doi.org/10.1192/S0007125000150470 Published online by Cambridge University Press



FOR MOST PATIENTS, SCHIZOPHRENIA IS A LIFELONG DISEASE REQUIRING LIFELONG MEDICATION. SEDATION IS THE MOST COMMON SINGLE SIDE-EFFECT OF ANTIPSYCHOTIC MEDICATIONS[1] AND ITS POTENTIAL IMPACT ON COMPLIANCE AND QUALITY OF DAILY LIFE IS THEREFORE AN IMPORTANT ISSUE TO CONSIDER.

TRIALS WITH SERDOLECT HAVE DEMONSTRATED PLACEBO-LEVEL SEDATION[2]

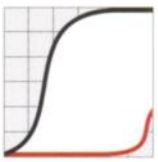
By separating efficacy from sedation, Serdolect gives physicians greater flexibility in patient management - in acute psychotic disturbance, Serdolect may be safely combined with a benzodiazepine[2].

SERDOLECT ADDITIONALLY OFFERS

- Efficacy against positive and negative symptoms of schizophrenia[3,4]
- EPS at placebo level[3]
- Prolactin levels maintained within normal limits[2]
- Once-daily dosage

REFERENCES

1. American Psychiatric Association. Practice Guidelines for the treatment of patients with schizophrenia. Supplement to Am. J. Psychiatry 1997; 154(4)
2. Data on file, H. Lundbeck A/S
3. Zimbroff DL et al. Am. J. Psychiatry 1997;154:782-791
4. Hale A. et al. Poster presented at CINP meeting, June 1996, Melbourne



Serdolect®

sertindole

Success is a long-term achievement

OLECT: ABBREVIATED PRESCRIBING INFORMATION

ntation: Tablets of 4mg, 12mg, 16mg or 20mg sertindole. **Indications:** ment of schizophrenia. Not for urgent relief of symptoms in acutely disturbed nts. **Dosage and administration:** Tablets should be taken orally once daily ut regard for food. Adults: All patients should be started on 4mg/day. The should be increased by 4mg increments after 4-5 days on each dose to the um daily maintenance dose range of 12-20mg. The dose may be increased aximum of 24mg, Re-titration is necessary if dosing is suspended for more one week. Children: Not recommended. Mild to moderate hepatic impairment: r titration and lower maintenance dose. Elderly: Slower titration and lower enance doses may be required. **Contraindications:** Known prolongation interval or combined use of drugs known to prolong QT interval. Clinically icant cardiac disease or uncorrected hypokalaemia. Combined use of drugs ay induce hypokalaemia. Diuretic therapy may be initiated if required but ssium-sparing agent must be used. Combined use of quinidine or systemic Serdolect is not sedative, however, patients should be advised not to drive or operate machinery until their individual susceptibility is known. History of diabetes, seizures, Parkinson's disease. Symptoms of orthostatic hypotension may occur and blood pressure should be monitored during initial dose titration and in early maintenance phase. In common with other antipsychotic drugs, Serdolect lengthens the QT interval in some patients (<1.7% of patients). Electrolyte imbalance or combined use of other drugs that inhibit Serdolect metabolism can increase the risk of occurrence of prolonged QT interval. An ECG should be performed prior to use with periodic ECG monitoring during treatment. Serdolect should not be initiated or should be discontinued if the QTC_2 interval exceeds 520 msec. Hypokalaemia and hypomagnesaemia should be corrected and maintained within normal limits during treatment. If signs and symptoms of tardive dyskinesia appear, consider dose reduction or discontinuation. **Drug interactions:** (see also contraindications). Combined use of agents known to inhibit hepatic isoenzymes may necessitate lower maintenance doses. Combined use of agents prolonged QT interval. Incidence of EPS adverse events similar to placebo. Overdosage: Symptoms have included somnolence, slurred speech, tachycardia, hypotension and transient prolongation of QT interval. There is no specific antidote. Treatment is supportive and symptomatic. Epinephrine and dopamine should not be used (may exacerbate hypotension). Cardiovascular monitoring recommended. Administration of activated charcoal and laxative should be considered. **Package quantities and basic NHS price:** 4mg tablets, £36.63 for 30 tablet pack, 12mg tablets, £102.55 for 28 tablet calendar pack. 16mg tablets, £102.55 for 28 tablet calendar pack. 20mg tablets, £102.55 for 28 tablet calendar pack. Legal category: POM. **Product Licence numbers:** 4mg: 13761/0001. 12mg: 13761/0003, 16mg: 13761/0004. 20mg: 13761/0005. **Date of last review:** April 1997. Further information is available on request from Lundbeck Limited, Sunningdale House, Caldecotte Lake Business

Lundbeck

Fast Response

Can start to improve symptoms within seven days[1]

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. **Dosage:** Lustral should be given as a single daily dose. The initial dose is 50mg and the usual therapeutic dose is 50mg daily. Dosage can be further increased, if appropriate, to a maximum of 200mg daily. Patients should be maintained on the lowest effective dose and doses of 150mg or more should not be used for periods exceeding 8 weeks. **Use in children:** Not recommended. **Use in the elderly:** [illegible] to Lustral. Hepatic insufficiency. Do not use with, or within two weeks of ending treatment with, MAOIs. At least 14 days should

Lustral. **Use during pregnancy:** Lustral should be used only if clearly needed. **Lactation:** Not recommended. **Precautions, warnings:** Renal insufficiency, unstable epilepsy, ECT, driving. Lustral should be discontinued in a patient who develops seizures. Lustral should not be administered to patients concurrently being treated with tranquillizers who drive or operate machinery. Patients should be closely supervised for the possibility of suicide attempt or activation of mania/hypomania. Bleeding abnormalities. **Drug Interactions:** Caution with other centrally active medication and with drugs known to affect platelet function. Serotonergic drugs including tryptophan, sumatriptan and 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. Interactions with other highly protein bound drugs should be [illegible] potential of Lustral to interact with e.g. warfarin, diazepam, tolbutamide and cimetidine have not been fully assessed. With warfarin prothrombin time should be monitored

nausea, anorexia, diarrhoea/loose stools, sexual dysfunction (principally, ejaculatory delay), tremor, increased sweating, dyspepsia, dizziness, insomnia and somnolence. Vomiting, abdominal pain, abnormal LFTs, jaundice, serious liver events, pancreatitis, arthralgia, myalgia, malaise, rash (including rare reports of erythema multiforme, photosensitivity), angioedema, tachycardia. Seizures (see precautions, warnings). Movement disorders, menstrual irregularities, hyperprolactinaemia and galactorrhoea. Hyponatraemia. As with all psychoactive medicines, possible side effects on discontinuation. **Legal Category:** POM. **Basic NHS Cost:** 50mg tablet (PL57/0308) Calendar pack of 28, £26.51; 100mg tablet (PL 57/0309) Calendar pack of 28, £39.77. Further information on request. Pfizer Limited, Sandwich, Kent. Date revised: September 1997. **Reference:** 1. Lustral SPC.

CNS DISCOVERY