

NEW

Risperdal Consta

The first long-acting atypical
that provides constant coverage for
long-term stability



RISPERDAL CONSTA ADDRESSES FACTORS THAT CAUSE DISRUPTION IN THERAPY.

- Long-acting formulations improve compliance ⁽³⁾ with non-compliance becoming immediately detectable ^(4,5).
- Powerful PANSS score reductions after twelve weeks ⁽⁶⁾ and continuous significant improvement over 1 year ⁽⁷⁾.
- Well tolerated – with a low percentage of discontinuations due to adverse events ⁽⁸⁾.



At long last

References: 1.Oehl M,Hummer M, Fleischhacker WW.ACTA psychiatr Scand 2000;102(suppl 407):83-86 2.Weiden P,Glazer W.Psych Quarterly.1997;68:377-392 3.Remington GJ, Adams ME.Can J Psychiatry 1995;40(suppl 1):S5-S12.4.Kane JM, Aguglia E, Altamura AC, et al.Eur Neuropsychopharmacol.1998;8:55-66.5.Barnes TRE,Curson DA Drug Safety. 1994;10:464-479. 6. Kane J,Eerdeken M,Keith S, et al.poster 2002;Davos Switzerland 7.Data on file, JJPRD. 8.Data on file, JJPRD (Integrated Summary of Safety).

<https://doi.org/10.1017/S0799966700007710>

ZYPREXA® REPUBLIC OF IRELAND (OLANZAPINE) ABBREVIATED PRESCRIBING INFORMATION. Presentation: Tablets, 2.5mg, 5mg, 7.5mg, 10mg or 15mg of olanzapine. Also contain lactose Velotab® 5mg, 10mg or 15mg orodispersible tablets. Also contain gelatin, aspartame, menthyl and parahydroxybenzoates. **Uses:** Schizophrenia, both as initial therapy and for maintenance; also moderate to severe manic episode. **Dosage and Administration:** Schizophrenia: 10mg/day orally. Manic episode: 15mg/day in monotherapy, 10mg/day in combination therapy. May subsequently be adjusted to 5–20mg daily. **Children:** Not recommended (under 18 years). **The elderly:** A lower starting dose (5mg/day) is not routinely indicated but should be considered when clinical factors warrant. **Renal and/or hepatic impairment:** 5mg starting dose in moderate hepatic insufficiency. When more than one factor which might cause a slower metabolism (female gender, elderly age, non-smoking status), consider a decreased starting dose. **Contra-indications:** Known hypersensitivity to any ingredient. Known risk of narrow-angle glaucoma. **Warnings and Special Precautions:** Clinical monitoring advisable in diabetic patients and those with risk factors for diabetes. Caution with prostatic hypertrophy, or paralytic ileus and related conditions. Improvement in clinical condition may take several days to some weeks. **Phenylalanine:** Velotabs contain aspartame – a source of phenylalanine. **Sodium methyl parahydroxybenzoate and sodium propyl parahydroxybenzoate:** Velotabs contain these preservatives, known to cause allergic contact dermatitis and, rarely, immediate reactions with bronchospasm. Caution in patients with elevated ALT and/or AST, hepatic impairment, limited hepatic functional reserve, and in patients being treated with hepatotoxic drugs. Where hepatitis has been diagnosed, discontinue Zyprexa. Caution in patients with low leucocyte and/or neutrophil counts, bone marrow depression, and in patients with hypersensitization conditions or with myeloproliferative disease. Discontinue if signs and symptoms indicative of NMS, or unexplained high fever. Caution in patients who have a history of seizures or are subject to factors which may lower the seizure threshold. If tardive dyskinesia appears, consider dose reduction or discontinuation. Caution when taken with other centrally acting drugs and alcohol. May antagonise effects of spasmolytic agents. Blood pressure should be measured periodically in patients over 65 years. As with other antipsychotics, caution when prescribed with drugs known to increase QTc interval, especially in the elderly, in patients with congenital long QT syndrome, congestive heart failure, heart hypertrophy, hypokalaemia or hypomagnesaemia. In clinical trials, olanzapine was not associated with a persistent increase in absolute QT intervals. **Interactions:** Metabolism may be affected by substances that can specifically induce (eg, concomitant smoking or carbamazepine) or inhibit (eg, fluvoxamine) the isoenzyme P450-CYP1A2 which metabolises olanzapine. Activated charcoal reduces the bioavailability of oral olanzapine. Olanzapine may antagonise the effects of direct and indirect dopamine agonists. Olanzapine showed no interaction when co-administered with lithium or biperiden. **Pregnancy and Lactation:** Should be used in pregnancy only if the potential benefit justifies the potential risk to the foetus. Patients should be advised not to breast-feed an infant if they are taking Zyprexa. **Driving, etc:** May cause somnolence. Patients should be cautioned about operating hazardous machinery, including motor vehicles. **Undesirable Effects:** *Clinical trial adverse event reporting and investigations:* Blood and lymphatics: Common (1–10%): eosinophilia. Neutropenia was seen in a valproate combination therapy trial in bipolar mania patients; a potential contributing factor could be high plasma valproate levels. *Metabolism and nutritional:* Very common (>10%): weight gain. Common (1–10%): increased appetite, elevated glucose levels (incidence 1.0% for olanzapine versus 0.9% for placebo for non-fasting levels $\geq 11\text{mmol/l}$), elevated triglyceride levels. *Nervous:* Very common (>10%): somnolence, abnormal gait in Alzheimer's disease patients. Common (1–10%): dizziness, akathisia (olanzapine-treated patients had a lower incidence of parkinsonism, akathisia and dystonia compared with treated doses of haloperidol). Worsening of Parkinsonian symptomatology and hallucinations were reported more frequently in patients with Parkinson's disease. *Cardiac:* Uncommon (0.1–1%): bradycardia, with or without hypotension or syncope. *Vascular:* Common (1–10%): orthostatic hypotension. *Gastro-intestinal:* Common (1–10%): mild, transient, anticholinergic effects, including constipation and dry mouth. *Hepato-biliary:* Common (1–10%): transient, asymptomatic elevations of ALT, AST. *Skin and subcutaneous tissue:* Uncommon (0.1–1%): photosensitivity reaction. *General:* Common (1–10%): asthenia, oedema. *Investigations:* Very common (>10%): elevated plasma prolactin levels, but associated clinical manifestations (eg, gynaecomastia, galactorrhoea, breast enlargement) were rare. Uncommon (0.1–1%): high creatine phosphokinase. *Post-marketing spontaneous reporting:* Blood and lymphatics: Rare (0.01–0.1%): leucopenia. Very rare (<0.01%): thrombocytopenia. *Immune system disorder:* Very rare (<0.01%): allergic reaction. *Metabolism and nutritional:* Very rare (<0.01%): hyperglycaemia or exacerbation of pre-existing diabetes occasionally associated with ketoacidosis or coma, including some fatal cases. *Hypertriglyceridaemia:* Nervous: Rare (0.01–0.1%): seizures, mostly when there was a history of seizures or risk factors. Very rare (<0.01%): cases reported as NMS. Discontinuation reactions have been reported; gradual tapering of the dose should be considered. *Gastro-intestinal:* Very rare (<0.01%): pancreatitis. *Hepato-biliary:* Very rare (<0.01%): hepatitis. *Skin and subcutaneous tissue:* Rare (0.01–0.1%): rash. *Reproductive:* Very rare (<0.01%): priapism. For further information see Summary of Product Characteristics. **Marketing Authorisation Numbers:** EU/1/96/022/002 EU/1/96/022/004 EU/1/96/022/006 EU/1/96/022/009 EU/1/96/022/010 EU/1/96/022/012 EU/1/99/125/001 EU/1/99/125/002 EU/1/99/125/003. **Date of Preparation or Last Review:** July 2002. Full Prescribing Information is Available From: Eli Lilly and Company Limited, Dexta Court, Chapel Hill Basingstoke, Hampshire, RG21 5SY. Tel: Basingstoke (01256) 315000 or Eli Lilly and Company (Ireland) Limited, Hyde House, 65 Adelaide Road, Dublin 2, Republic of Ireland. Tel: Dublin 6614377. **ZYPREXA (olanzapine) and VELOTAB are trademarks of Eli Lilly and Company.** **References:** 1. Jones B et al. Schizophrenia Research 1999; 36(1–3): 183. **website:** www.elililly.ie

Indicated in schizophrenia and now in Mania

going
going
gone

Orally
dispersible
tablet

placed in
the mouth,
starts dispersing
in about 15
seconds¹

disperses
completely
within one
minute¹

ZYPREXA® Velotab™
Orodispersible Tablets, Olanzapine

Available as 5mg, 10mg and

NEW 15mg Velotab™

Lilly