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Romantic Attachment in Patients with Mood and Anxiety Disorders

D. Marazziti, B. Dell'Osso, M.C. Dell'Osso, G. Consoli, A. Del Debbio, F. Mungai,
L. Vivarelli, F. Albanese, A. Piccinni, P. Rucci, and L. Dell'Osso

Aripiprazole in Juvenile Bipolar Disorder Comorbid with Attention-Deficit/Hyperactivity Disorder: An Open Clinical Trial

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Quetiapine for Mania Due to Traumatic Brain Injury

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S.M. Stahl

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J.A. Lieberman

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A Seven-Year Follow-Up of an Extremely Refractory Bipolar I Patient

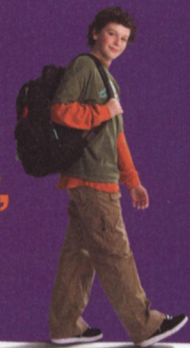
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Sudden death has been reported in association with CNS stimulant treatment at usual doses in children and adolescents with structural cardiac abnormalities or other serious heart problems. Sudden deaths, stroke, and myocardial infarction have been reported in adults taking stimulant drugs at usual doses in ADHD. Physicians should take a careful patient history, including family history, and physical exam, to assess the presence of cardiac disease. Patients who report symptoms of cardiac disease such as exertional chest pain and unexplained syncope should be promptly evaluated. Use with caution in patients whose underlying medical condition might be affected by increases in blood pressure or heart rate.

New psychosis, mania, aggression, growth suppression, and visual disturbances have been associated with the use of stimulants. Use with caution in patients with a history of psychosis, seizures or EEG abnormalities, bipolar disorder, or depression. Growth monitoring is advised during prolonged treatment.

Amphetamines have a high potential for abuse. Administration of amphetamines for prolonged periods of time may lead to drug dependence. Particular attention should be paid to the possibility of subjects obtaining amphetamines for non-therapeutic uses or distribution to others and the drugs should be prescribed or dispensed sparingly. Misuse of amphetamine may cause sudden death and serious cardiovascular adverse events.

The most common adverse events reported in clinical studies of Vyvanse were loss of appetite, insomnia, abdominal pain, and irritability.

Please see Brief Summary of Prescribing Information, including Boxed Warning, on adjacent page.

Reference: 1. Biederman J, Krishnan S, Zhang Y, et al. Efficacy and tolerability of lisdexamfetamine dimesylate (NRP-104) in children with attention-deficit/hyperactivity disorder: a phase III, multicenter, randomized, double-blind, forced-dose, parallel-group study. *Clin Ther* 2007;29:450-463.

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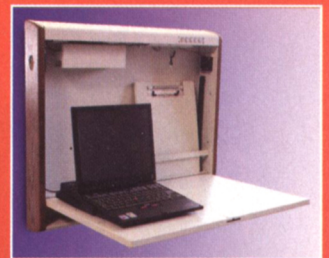
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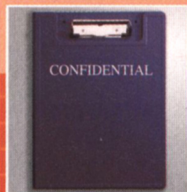
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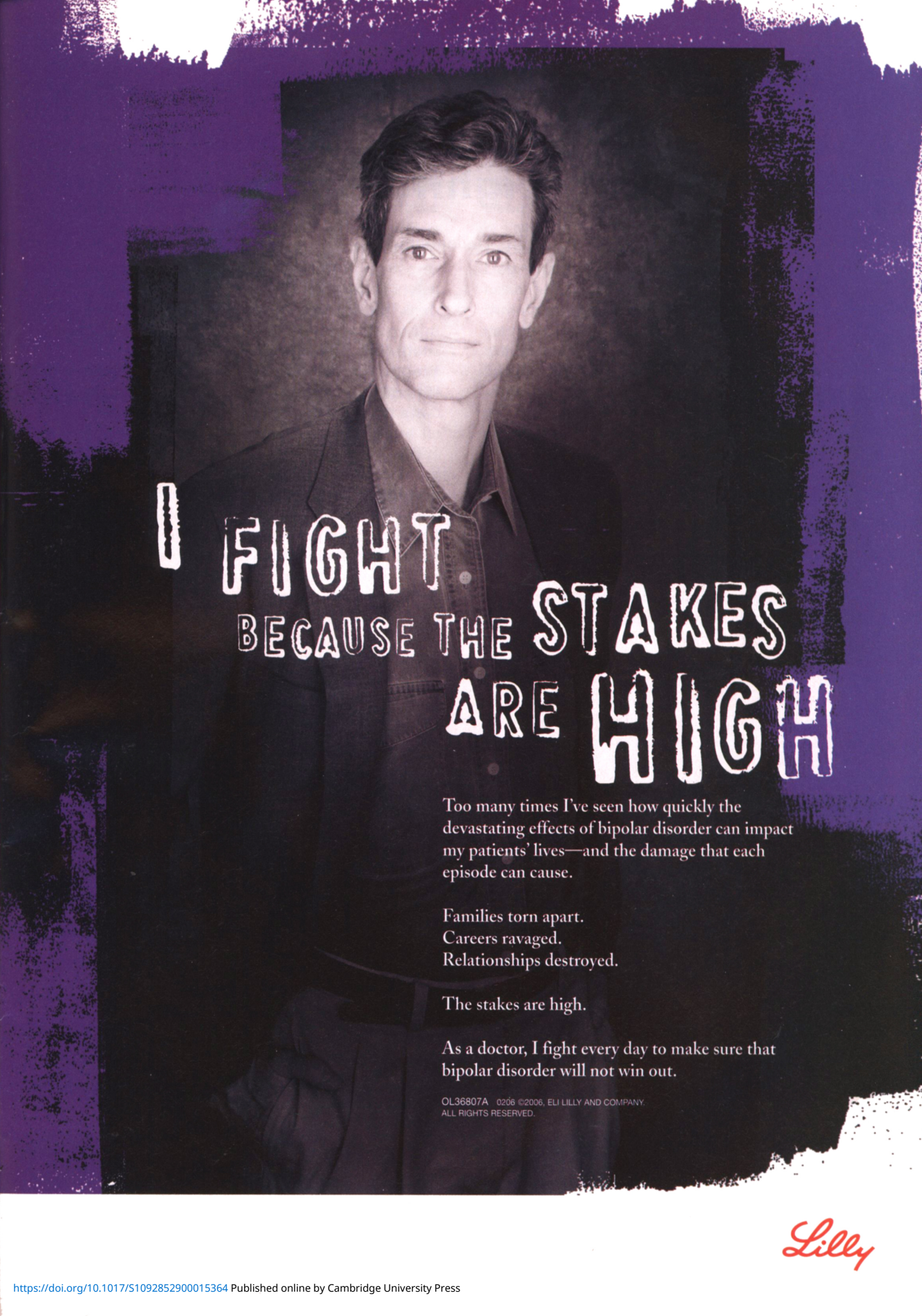
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