BRIEF SIMMARY of PRESCRIBING INFORMATION
INICIATIONS AND URSACE Spicer Mains: SER/QUIE, is indicated for the short-term treatment of aude manic,
encodes associated with bigain? Idisorts as other monotherapy or adjunct therapy to lithium or divalpriser. The
efficacy of SER/QUIE, is a such polyer manic was established in two 3-week monotherapy trials and one 3-week
efficacy of SER/QUIE, in a such polyer manic was established in the 3-week monotherapy trials and one 3-week
in more than 3-weeks tas on been systematically evaluated in chiral trials. Therefore, the physician who elects to use
SER/QUIE, in careford periods should periodically revaluated be long-term rises and hereifs of the direct
the individual patient. Self-polyerials: SER/QUIE, is indicated for the treatment of schoophyrein; and seatablished in short-term (Sewell-controlled trials of schoophyrein; clarification).

The efficacy of SER/QUIE, in Individual patient.

SER/QUIE in schooling the self-polyerial was established in short-term (Sewell-controlled trials of enclapsers in clients)

The efficacy of SER/QUIE, in Individual patient.

SER/QUIE in school the Individual patient.

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

periodically re-evaluate the long-imm iselfulness of the drug for the individual swith a known hypersensitivity to this medication or any of its ingredients.

WARMICS: Neurolipic Malignant Syndrome (NMS): A potentially falla syndrom complex sometimes referred to a Neurolipic Malignant Syndrome (NMS): A potentially falla syndrom complex sometimes referred to a Neurolipic Malignant Syndrome (NMS): A potentially falla syndrom complex sometimes referred to a Neurolipic Malignant Syndrome (NMS): A potentially falla syndrom complex sometimes referred to a Neurolipic Malignant Syndrome (NMS): A potentially falla syndrom complex sometimes referred to drugs, including SPROULE. Pare cases of NMS have been reported with SPROULE. Clinical manifestations of the NMS are hyperyrea, muscle rejoint, a Meet ment and states, and evidence of automomic instability fringular pulse or bod pressure teatrycardia, disponeries, and cardiac dysritythmia). Additional signs may include elevated treating hypothesis in the syndrome is complicated. In arriving at a diagnosis, it is important to exclude cases where the clinical presentation includes both serious medical limes is (e.g., incuments), systemic infection, etc.) and untrated or inadequately related extrapramidal signs and symptoms (EPS). Other important considerations in the differential diagnosis is clude contrad articular interval control, heat stroke, during fever and primary central nervous system (CNS) pathology. The management of MMS should include: 1) immediate discontinuation of antisyschotic drugs and other drugs and other and antisyschotic drugs and other drugs and other antisys and antisyschotic drugs and other antisys of the control of the produce of the produce

periodically during treatment with ahypical antipsychotics should be monitored for symptoms of hyperphycemic including nebydaps, applycan, polypicania, and wadwaness. Patients who develop symptoms of hyperphycemic during treatment with ahypical antipsychotics should undergo basing blood plucose besting, in some cases, perceptives make resolved with red special antipsychotics was discontinuation of anti-darbeit: reatment despite discontinuation of the suspect drug.

PREDAUTIONS: General: Orthorated Hypotensions: ESPOULEL may induce orthostatic hypotension associated with disciness, tachycardia and, in some patients, syncope, sepocially during the initial dose-initiation period, provally reflecting its, capitares and in some patients, syncope, was reported in 19', (202507) on achee control drugs, and all resolutions of the patients treated with SEROOUE, compared with 0's (0007) on placebo and about 0.4% (2027) on achee control drugs, sepondarial interaction or schemic heart disease, heart failure or conduction abnormables, corelivouscular disease, floating of conditions with own would prestingere patients to hypotension and systrope may be minimized by limiting the intrinsic schedule is appropriate. Calenton in patients with many and the conditions of the conditions with one of the conditions of the conditions of the conditions with the conditions of the condi

confect gaintiers (communicative) international for Primater Physicians are advanced to discuss the tolerang boars with guests for whole they provide Scholler, Definated in Peptinaters Capters and the set of the communication of the communi

Set 1012-West Expect Controlled Cinical Trails* for the Treatment of Schoopherain and Acute Bipolar Mania (monotherapy): Body as a White: Headache, Pain, Astrania Adominated Pain, Each Pain, Feeter Cardiovascular Endywards, Postular Hypotecentro, Digester Dy. Month. Constitution, 1000 Pain (1997). The Constitution of the Con

Streen Johnson syndrome (SJS).

BRUS ANIES AND DEPKINENCE: Controlled Substance Class: SEROOLIEL is not a consolered substance. Plans: The Market Seroolies substance of the Streen Seroolies substance for this post-title for abuse, following dependence: SEROOLIEL has not been systematically studied, in animals or humans, for my drug-seeking belavior, these observations were not systematic and it is not possible to predict on the base of this immitted experience the sent of which at Obsache drug will be missed, diverted, and/or abused one marketed. Consequently, patients should be evaluated carefully for a history of drug abuse, and such patients should be observed (casely for signs of misuse or abuse of SEROOLIEL, e.g., development of tolerance, increases in dose, drug-seeking behavior. OVERDOSAGE: Human experience: Experience with SEROQUEL (quetiagine furnarate) in acute overdosage

OVERDOSAGE: Human experience: Experience with SEROUUEL (questapine fumarate) in acute overdesage was limited in the clinical trial database (or egorist) with estimated doses renging from 1200 mg to 9600 mg and natalities. In general reported signs and symploms were those resulting from an eargaperation of the drug's known pharmacological feets; i.e., drowsiness and sedation, tachivardia and hypotension. One case, involving an estimated overdose of 9600 mg, was associated with hypotelamia and first deper heart block in post-mar-leting opportance, there have been very rare reports of overdose of SEROULEL alone resulting in death, common com

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Manufactured for: AstraZeneca Pharmaceuticals LP Wilmington, Delaware 19850-5437



The safety and efficacy of SEROQUEL in pediatric patients have not been established.

Patients should be periodically reassessed to determine the need for continued treatment.

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 common adverse events associated with the use of SEROQUEL were somnolence, dry mouth, dizziness, constipation, asthenia, abdominal pain, postural hypotension, pharyngitis, SGPT increase, dyspepsia, and weight gain.

In bipolar mania trials, withdrawal rates due to adverse events were similar to placebo for SEROQUEL as monotherapy (SEROQUEL 5.7%, placebo 5.1%) and adjunct therapy (SEROQUEL plus lithium or divalproex 3.6%, lithium or divalproex alone 5.9%).

References: 1. SEROQUEL® (quetiapine fumarate) Prescribing Information, Rev 01/04, AstraZeneca Pharmaceuticals LP, Wilmington, Delaware. 2. Data on file, DA-SER-13, AstraZeneca Pharmaceuticals LP, Wilmington, Delaware. 3. Data on file, DA-SER-15, AstraZeneca Pharmaceuticals LP, Wilmington, Delaware. 4. Data on file, DA-SER-14, AstraZeneca Pharmaceuticals LP, Wilmington, Delaware. 5. Data on file, DA-SER-16, AstraZeneca Pharmaceuticals LP, Wilmington, Delaware.





To prevent medication errors, write "SEROQUEL" clearly on your Rx pad. Spell "SEROQUEL" clearly over the phone.

First-line treatment

Please see Brief Summary of Prescribing Information on following page.

www.SEROQUEL.com