



Treats the Present and Safeguards the Future

Tegretol Retard[®]

carbamazepine
-specially formulated to reduce peak plasma levels

For both generalised and partial seizures

PRESCRIBING INFORMATION. Presentation: TEGRETOL RETARD is a formulation which reduces the peak concentration of active substance in the plasma and also ensures that fluctuations in plasma concentration are reduced throughout the day. **Indications:** Epilepsy (generalised tonic-clonic and partial seizures). Trigeminal Neuralgia and other forms of deafferentation pain. Alcohol withdrawal symptoms. Treatment of mania and prophylaxis of manic-depressive illness. **Dosage:** Epilepsy: Adults: 100-200mg, once or twice daily, increasing slowly up to 800-1200mg daily, in divided doses. **Children:** See full prescribing information. Liquid is recommended for children under 5 years. It may be helpful to monitor drug levels: the optimum therapeutic plasma level ranges from 3-10mcg/ml (13-42 micromoles/L). TEGRETOL RETARD should not be chewed, but swallowed whole with a little water. For dosage of other indications: see full prescribing information. **Contra-indications:** Previous drug sensitivity to carbamazepine. Do not administer to patients with atrioventricular conduction abnormalities unless paced. **Precautions:** Blood counts should be performed before

commencing treatment, at weekly intervals during the first month and subsequently monthly for five months then two to four times a year. Liver function tests should be performed before treatment and periodically during therapy. Withdraw TEGRETOL if allergic skin reactions, deterioration of liver function, or severe, progressive or clinically manifest leucopenia occur. Caution in patients taking oral anticoagulants or concomitant anti-epileptic or lithium therapy, or requiring oral contraception. Macrolide antibiotics (e.g. erythromycin), isoniazid, some calcium antagonists (i.e. Verapamil, diltiazem), dextropropoxyphene, viloxazine and cimetidine may elevate carbamazepine levels. CNS side-effects may be exacerbated by alcohol. TEGRETOL may impair reactions of patients driving or operating machinery. Serum folic acid levels should be observed during anti-convulsant therapy. See full prescribing information. **SIDE-EFFECTS:** Occasionally dizziness, diplopia, headache, somnolence, ataxia, disorders of visual accommodation; confusion and agitation; dry mouth, nausea, diarrhoea or constipation; loss of appetite; generalised erythematous rash; leucopenia, thrombocytopenia; oedema, fever. Isolated cases exfoliative

dermatitis, Stevens-Johnson Syndrome, toxic epidermal necrolysis, hair loss; proteinuria, lymph-node enlargement and acute renal failure; agranulocytosis, aplastic anaemia and thromboembolism (blood count should be checked regularly in early stages of treatment). Rarely dose-dependent hyponatraemia, disturbance to cardiac conduction, hepatitis. **LEGAL CATEGORY:** S1B. Packs of TEGRETOL RETARD divisible tablets of 200mg (PA 11/1/5) in blister packs of 100; TEGRETOL RETARD divisible tablets of 400mg (PA 11/1/6) in blister packs of 100. ® denotes Registered Trademark. Full prescribing information is available from Geigy Pharmaceuticals, Beech House, Beech Hill Office Campus, Clonskeagh, Dublin 4. Telephone (01) 2601255. **DATE OF PREPARATION** February 1994. © Ciba Pharmaceuticals 1994.

Geigy

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*MIMS Ireland, December 1994. 20 mg (30's). Full prescribing information is available on request from: Smith Kline & French, Corrig Avenue, Dun Laoghaire, Co. Dublin.
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PRESCRIBING INFORMATION

Presentation: 'Seroxat' Tablets, PA 49/50/1-2, each containing either 20 mg or 30 mg paroxetine as the hydrochloride. 20 mg : 30(OP); 30 mg : 30(OP).
Indications: Treatment of symptoms of depressive illness of all types including depression accompanied by anxiety. Prevention of relapse and also recurrence of further depressive episodes.
Dosage: Adults: 20 mg a day. Review response within two to three weeks and if necessary increase dose by 10 mg increments to a maximum of 50 mg according to response. Give once a day in the morning with food. The tablets should not be chewed. Continue treatment for a sufficient period, which may be several months. Stop treatment gradually. Elderly: 20 mg a day increasing by increments of 10 mg up to 40 mg a day according to response. Children: Not recommended.
Severe renal impairment (creatinine clearance <30 ml/min) or severe hepatic impairment: 20 mg a day. Restrict incremental dosage if required to
<https://doi.org/10.1017/S079096670001944> Published online by Cambridge University Press
Contra-indications: Hypersensitivity to paroxetine and related drugs; use with MAO inhibitors; unstable epilepsy or convulsive disorders; severe renal failure.

Precautions: History of mania. Cardiac conditions: caution. Caution in patients with controlled epilepsy (monitor carefully); stop treatment if seizures develop. Caution patients about driving and operating machinery.
Drug interactions: Do not use with or within two weeks after MAO inhibitors; leave a two-week gap before starting MAO inhibitor treatment. Possibility of interaction with tryptophan. Great caution with warfarin and other oral anticoagulants. Use lower doses if given with drug metabolising enzyme inhibitors; adjust dosage if necessary with drug metabolising enzyme inducers. Combination with other highly bound protein drugs may alter plasma levels of either. Alcohol is not advised. Care with other CNS active drugs. Keep dosage of concomitant benzodiazepines low. Use lithium with caution and monitor lithium levels. Increased adverse effects with phenytoin; similar possibility with other anticonvulsants.
Pregnancy and lactation: Use in pregnancy only if essential and avoid during lactation.
Adverse reactions: Most commonly nausea, somnolence, sweating, tremor, asthenia, dry mouth, insomnia, sexual dysfunction.
Overdosage: Symptoms include nausea, vomiting, tremor, dilated pupils, dry mouth, irritability. No specific antidote. General treatment as for overdosage with any antidepressant. Early use of activated charcoal suggested.
Product authorisation holder: SmithKline Beecham Pharmaceuticals Ltd., Corrig Avenue, Dun Laoghaire, Co. Dublin.