Prescribing Information
Presentation: Molipaxin (trazodone hydrochloride) 50 and 100mg capsules, Molipaxin tablets 150mg, tablets 150mg/d (50mg/5ml) liquid Indications: Relief of symptoms in a types of depression including depres types of depression including depres-sion accompanied by anxiety. Symptoms likely to respond in the first week include depressed mood, insom-nia, anxiety, somatic symptoms and hypochondriasis. Dosage and Administration: Starting dose of Molipaxin is 150mg daily taken in divided doses after food or as a single dose on retiring. This may be dose on retiring. This may be increased to 300mg/day the major portion of which is preferably taken on retiring. In hospitalised patients, dosage may be further increased to 600mg/day in divided doses. Dosage in the elderly and frail: Starting dose of 100mg/day in divided doses or as a single night-time dose. This may be increased, under supervision, according to efficacy and tolerance. Doses above 300mg/day are unlikely to be required. Cessation of Molipaxin should be gradual. Children. Not recommended. Contra-indications: Known sensitivity to trazodone. <u>Precautions</u>: Avoid during first rinester of pregnancy and in nursing mothers. Warn against risks of han-dling machinery and driving. May enhance muscle relaxants, some antihypertensive agents, sedatives or anti-depressants and alcohol, acute effects of clonidine may be reduced. Avoid concurrent therapy with MAOIs and do not give Molipaxin within 2 weeks of stopping MAOIs or give MAOIs within 1 week of stopping Molipaxin. within I week of stopping Molipaski. ble with care in patients with epilep-sy, severe hepatic, cardiac or renal dis-ease. Patients receiving long-term therapy with any antidepressant should be kept under regular surveil-lance. Side_effects: Molipasin is a scalable antidepressant Am dizinges. sedative antidepressant. Any dizziness or drowsiness usually disappears on or drowsiness usually disappears on continued dosage. Anticholinergic-like ymptoms occur, but the incidence is similar to placebo. Blood dyscrasias, including agranulocytosis, thrombooytopenia and anaemia, have been reported on rare occasions. Adverse effects on hepatic function, including jaundice and hepatocellular damage, sometimes severe, have been rarely reported. Should such effects occur, Molipaxin should be discontinuous minediately as with other drugs with immediately. As with other drugs with alpha-adrenolytic activity, Molipaxin has been associated with priapism. At present, there have been few reports in the UK. However, reports from the United States suggest an association between trazodone and priapism which has on occasion required surgical intervention and led to permanent sexual dysfunction. Priapism should be dealt with as a urological emergency and Molipaxin therapy should be dis-continued immediately. Other side effects include isolated cases of oede effects include isolated cases of oederma and postural hypotension.

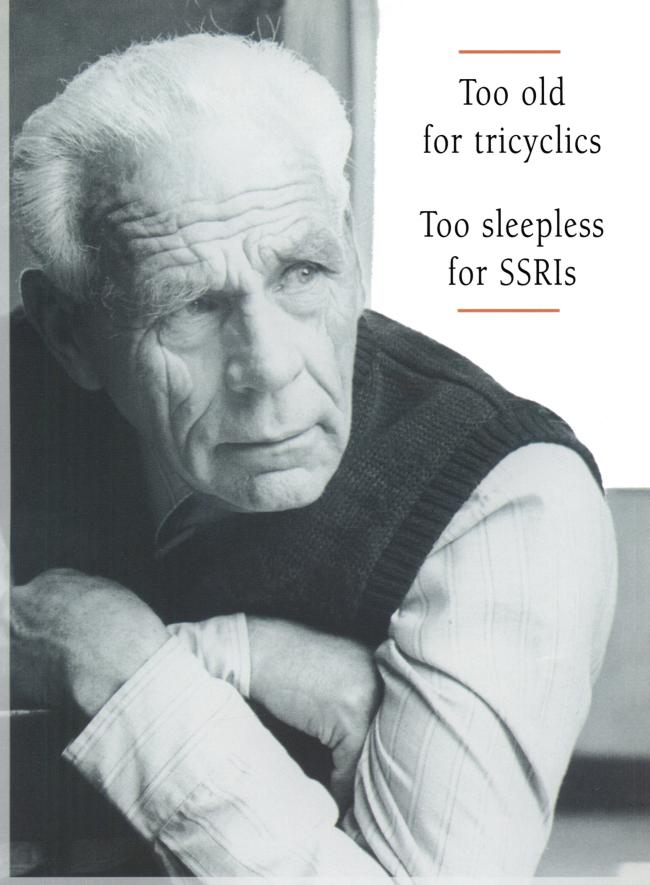
Overdosage: No specific antidote is available. Give supportive and symptomatic treatment. Presentations, product authorisation numbers and GMS prices: Molipaxin 50mg, 84 capsules; PAG/12/2; £16.41. Molipaxin 100mg, 56 capsules; PAG/12/3; £19.32. Molipaxin 150mg, 28 tablets; PAG/12/8; £110.1. Molipaxin libuid PA6/12/8; £11.01. Molipaxin liquid 50mg/5ml, 150ml bottle; PA6/12/7; £7.33. Date of last review: January 1995. Product authorisation holder: Laboratories Rousse Laboratories, Broadwater Park, North Orbital Road, Denham, Uxbridge, Middlesex UB9 5HP. Distributor Marion Merrell Dow Ltd., Lakeside House, Stockley Park, Uxbridge, Middlesex UB11 1BE. Agent in the Republic of Ireland: Allihar's Cengriss Ltd. Button Hall Park Allphar Services Ltd., Burton Hall-Park, Sandyford Industrial Estate, Foxrock, Dublin 18. Further product informa-tion including data sheet is available



MARION MERRELL DOW

References: 1. Drugs Aging 1994; 331-355. 2. Clin Neuropharmacol 1989; 12 (Suppl 1): 525-533. 8. Psychopathology 1987; 20 (Suppl 1): 39-47. 4. Psychopathology 1987; 20 (Suppl 1): 82-91.

Molipaxin is a registered trademark Date of preparation: June 95



Just right for Molipaxin

Sleeplessness and depression are common bedfellows in older patients. But some SSRIs can be associated with insomnia - and tricyclics may be poorly tolerated by the elderly.

Molipaxin rapidly improves both sleep and depression, ^{1,2} and it has a favourable safety profile that's particularly suitable for older patients. ^{3,4}



Treats the elderly with the respect they deserve

Now at a New Lower Price



What else could we improve but the price?

Seroxat is at a new low price of 71p per day*.

Breacadh an lae. Re orga ag breacadh.

°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. ©1994 SmithKline Beecham Pharmaceuticals. 'Seroxat' is a trade mark. 9/94/SX:AD0234E.

PRESCRIBIN

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 lower end of range.

Contra-indications: Hypersensitivity to paroxetine and related drugs; use with MAO inhibitors; unstable epilepsy or convulsive disorders; severe renal failure.

https://doi.org/10.1017/50790966700014464 Published online by Cambridge University Press

Precautions: History of mania. Cardiac conditions: caution. C-ution in patients with controlled epilepsy (monitor carefully); stop treatment if sesizuares 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. Creat custion with warfari and other oral anticoaguiants. Use lower doses if given with drug metabolising enzyme inhibitors; adjust dosage if necessary with drug metabolising enzyme inhibitors; adjust dosage if necessary with drug metabolising enzyme inducers. Combination with other highly bound protein drugs may after plasmal evels 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.