IRISH JOURNAL OF **PSYCHOLOGICAL** MOL 20 NO 2 JUNE 2003 DEDICINE ISSN 0790-9667



'Jet Plane, Blue, Red, Yellow, Green, Boxes, Arrows on Grand Parade, Chinese Version' (detail) by John the Painter (gouache on brown paper, 214 x 511cm) From an exhibition at the Irish Museum of Modern Art, Royal Hospital Kilmainham, Dublin 8.

In a broad spectrum of patients...

Abbreviated Prescribing Information for Geodon (ziprasidone). Republic of Ireland Geodon™. Presentation: Capsules containing ziprasidone hydrochloride monohydrate equivalent to 20, 40, 60 and 80mg ziprasidone. Indications: Treatment of schizophrenia Dosage: Acute treatment - 40mg twice daily with food. Maximum dosage of 80mg twice daily may be reached by day 3 of treatment. Maintenance treatment - use the lowest effective dose. In elderly: A lower starting dose should be considered for patients over 65 where clinical factors warrant. In children: Caution as no evaluation under 18 years of age. In renal impairment: No dosage adjustment required. In hepatic impairment: Consider lower doses in hepatic insufficiency. Caution in severe hepatic insufficiency. Contra-indications: Known hypersensitivity to any ingredient of the product. Known QT-interval prolongation. Congenital long QT syndrome. Recent acute myocardial infarction. mpensated heart failure. Arrhythmias treated with class IA and Unci III antiarrhythmic drugs. Concomitant treatment with medicines known to prolong the QT interval. Special warnings: A medical history, family history and physical examination should be undertaken to iden-tify patients for whom ziprasidone is not recommended. Mild to mod erate dose-related QT-interval prolongation, therefore, do not give together with medicinal products known to prolong the QT interval. Caution in patients with significant bradycardia. Before treatment is started - correct electrolyte disturbances; and as with other drugs which prolong QT interval, consider ECG review in patients with stable cardiac disease. If cardiac symptoms occur, consider the possibility of a malignant cardiac arrhythmia and perform a cardiac evaluation, including an ECG. It is recommended to stop treatment if the QT interval is >500msec. No cases of Neuroleptic Malignant Syndrome (NMS) seen in clinical trials, but potential risk cannot be excluded. Management of NMS should included immediate withdrawal of all antipsychotic drugs. Potential to cause tardive dyskinesia, if signs appear consider dose reduction or discontinuation. Caution in patients with a history of seizures. Interactions: ziprasidone should not be given with medicinal products known to prolong the QT interval (see SPC for details). Caution in combination with other centrally acting drugs and alcohol. Ziprasidone is unlikely to cause clinically important drug interactions mediated by CYP3A4 or CYP2D6 (see SPC for details). Pregnancy and lactation: Not recommended unless the expected benefit outweighs the risk. Women of childbearing potential should use an appropriate method of contraception. Avoid breastfeeding. Driving: Ziprasidone may cause somnolence, therefore cau-tion patients likely to drive or operate machines. Undesirable effects: In short term placebo controlled trials: >1/10 somnolence; >1/100,<1/10 asthenia, headache, constipation, dry mouth, dyspepsia, increased salivation, nausea, vomiting, agitation, akathisia, dizziness, dystonia, extrapyramidal syndrome, hypertonia, tremor, abnormal vision; >1/1000,<1/100 pain, postural hypotension, tachycardia, flatulence, thirst, joint disorder, leg cramps, cogwheel rigidity, paresthesia, speech disorder, tardive dyskinesia, rhinitis, rash, urticaria. In long term maintenance trials: elevated prolactin levels, returning to normal without cessation of treatment and rare reports of clinical manifesta-tion (gynaecomastia and breast enlargement). Legal Category: POM. Package quantities: blister packs containing 56 capsules. Further information on request: Pfizer (Ireland) Limited, Parkway House, Ballymount Road Lower, Dublin 12, Republic of Ireland. Marketing



Authorisation numbers: PA 19/52/5. Date of first authorisation/renewal of the authorisation: February 2002. Date of revision of the text: NCCKC SCYPSCIP.16.b7/36/2002.66700007552 Published online by Cambridge University Press ...See the difference **GEODON** can make



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Email: psychological@medmedia.ie Website: www.ijpm.org

Publisher

MedMedia Ltd. 25 Adelaide Street, Dun Laoghaire, Co Dublin, Ireland.

Printing: W&G Bairds Ltd

Subscriptions

Rates per volume of four issues (Mar, Jun, Sept, Dec) Price Regions: EU countries: €107, Stg65 Rest of World: €126, \$111 Incl. airmail postage internationally.

Subscription enquiries, orders

and cheques made payable to: Turpin Distribution Service Ltd Blackhorse Road, Letchworth SG6 1HN, England. Tel : +44 01462 672555 Fax: + 44 01462 480947 Email: CustServTurpin@turpinltd.com www.turpin-distribution.com

Circulation

2,200 to 54 countries. The Journal participates in the World Health Organisation project to improve distribution of scientific materials on mental health. Publication does not imply endorsement. Limited photocopying authorisation granted for a fee to Copyright Clearance Center, 27 Congress Street, Salem, MA 01970, USA, or to appropriate Reproduction Rights Organisation; isolated non-profit, academic photocopying excepted.

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Indexed and abstracted by BIOLOGICAL ABSTRACTS (BIOSIS Previews); CENTRE NATIONAL DE LA RECHERCHE SCIENTIFIQUE/INIST: PASCAL; EXCERPTA MEDICA/EMBASE; INSTITUTE FOR SCIENTIFIC INFORMATION: CURRENT CONTENTS/ Social & Behavioural Sciences (Social Science CITATION INDEX, Research Alert); PSYCHOLOGICAL ABSTRACTS (PsycINFO/PsycIIT); Cumulative Index to Nursing & Allied Health Literature, Current AlDS Literature (CAB Abstracts), International Pharmaceutical Abstracts, Linguistics & Language Behaviour Abstracts, Nutrition Abstracts and Reviews, (CAB Abstracts), Referativnyi Zhurnal, Social Planning/Policy & Development Abstracts, Social Work Research & Abstracts, Sociological Abstracts.

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too had a life, state laughter and tears. we made Wonderful **PLANS** for our later Years. and now here I am, in this WOCld of my own. I'M LOST and I'M frightened, and feel all alone. Because of my illness, 1'm no longer the same, BUT Ceach OUT AND TOUCH ME name. I'm more than a

MORE THAN A NAME by Jerry Ham (Alzheimer's carer)



Making a difference in Alzheimer's

