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Your comments are important to us. This form provides you with the opportunity to express your opinions. Our goal is to make **CNS Spectrums** your source for practical and clinical neuropsychiatric information. By filling out this FaxBack form, you enable us to incorporate your views about our editorial content in future issues. Please fill out this form in its entirety. Thank you.

1. On a scale of 1 to 5 (1=Poor, 5=Excellent), please indicate your level of interest and/or satisfaction with the editorial content in this issue.

Cover Topic: Assessing the Impact of Trauma and Loss:

September 11, 2001

1 2 3 4 5

Departments

CNS News

1 2 3 4 5

CME

1 2 3 4 5

2. Which areas of neuropsychiatry would you like us to cover in the future?

3. Please describe your reading pattern for this issue:

- read cover to cover
- skimmed table of contents
- read select items of interest
- skimmed text
- did not read

4. On a scale of 1 to 5 (1=Incomplete, 5=Comprehensive), how would you describe the depth of coverage for this issue?

1 2 3 4 5

5. Any other comments?

6. Please indicate your title:

- psychiatrist
- neurologist

FIRST-LINE TREATMENT FOR SCHIZOPHRENIA



Well!

Accepted!

WELL!

Efficacy you look for in an atypical antipsychotic

- Proven to reduce positive and negative symptoms¹⁻⁴

ACCEPTED!

An excellent side-effect profile

- The only first-line atypical antipsychotic with an EPS* profile no different from placebo across the entire dosing range (up to 800 mg).^{1,2,5}

*Extrapyramidal symptoms.

- The most common adverse events associated with the use of SEROQUEL are dizziness (10%), postural hypotension (7%), dry mouth (7%), and dyspepsia (6%). The majority of adverse events are mild or moderate
- As with all antipsychotic medications, prescribing should be consistent with the need to minimize the risk of tardive dyskinesia, seizures, and orthostatic hypotension



Seroquel[®]
quetiapine fumarate

25 mg, 100 mg, 200 mg & 300 mg tablets

Treatment patients can LIVE with!

References: 1. Small JG, Hirsch SR, Arvanitis LA, et al, and the Seroquel Study Group. Quetiapine in patients with schizophrenia: a high- and low-dose double-blind comparison with placebo. *Arch Gen Psychiatry*. 1997;54:549-557. 2. Arvanitis LA, Miller BG, and the SEROQUEL Trial 13 Study Group. Multiple fixed doses of "Seroquel" (quetiapine) in patients with acute exacerbation of schizophrenia: a comparison with haloperidol and placebo. *Biol Psychiatry*. 1997;42:233-246. 3. Borison RL, Arvanitis LA, Miller BG. ICI 204,636, an atypical antipsychotic: efficacy and safety in a multicenter, placebo-controlled trial in patients with schizophrenia. *J Clin Psychopharmacol*. 1996;16:158-169. 4. Data on file, Study S91, AstraZeneca Pharmaceuticals LP, Wilmington, Delaware. 5. SEROQUEL[®] (quetiapine fumarate) Prescribing Information, Rev 1/01, AstraZeneca Pharmaceuticals LP, Wilmington, Delaware.

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Please see Brief Summary of full Prescribing Information on following page.

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