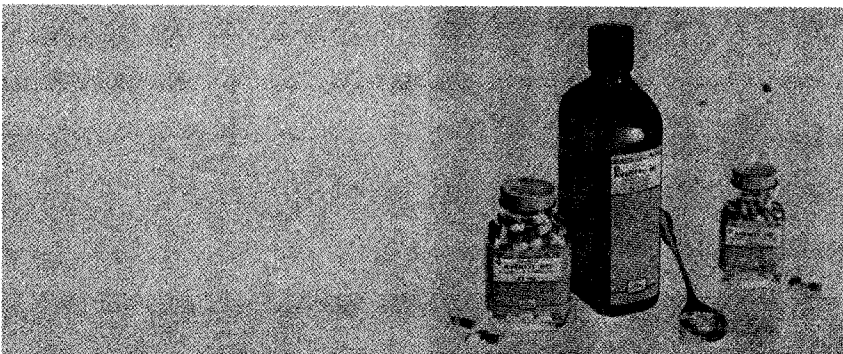




An immediate effect and a rapid over-all response

Prompt tranquilization occurs and provides evidence of initial improvement in some patients. In others, an immediate stimulatory effect is observed. Generally, a peak is rapidly reached and is soon followed by lasting over-all improvement.

Of those patients who responded to Aventyl HCl, 59 percent improved within one week, 79 percent by the second week, and 94 percent within one month.

Well-tolerated therapy

Unwanted effects appear to be milder and less frequent than those produced by certain other antidepressants. Studies indicate Aventyl HCl has considerably less anticholinergic activity than certain of its predecessors.

In contrast to some tranquilizers, Aventyl HCl has not been reported to cause either habituation or withdrawal symptoms.

1. Cole, D. "Guidelines for Understanding Emotional Disorders," M. Times, 10/1/64, 124.
2. From data available through the Lilly Research Laboratories.

when patients display
behavioral drift:
Aventyl® HCl
Nortriptyline
Hydrochloride

Additional information available
to physicians upon request.
Eli Lilly and Company
Indianapolis, Indiana 46206

Actions and Indications

Aventyl HCl is a potent antidepressant with a rapid onset of action for the treatment of major depressive disorder, anxiety disorders, and psychosomatic disorders and for use as an adjunct to psychotherapy.

Contraindications: Concomitant use with a monoamine oxidase inhibitor is contraindicated since potentiation of adverse effects can be serious or even fatal. The monoamine oxidase inhibitor should be discontinued for at least ten to twenty-one days before treatment with Aventyl HCl is started.

Warnings: Care in convulsive or hypotensive states should be closely followed. At present, there are no known contraindications of Aventyl HCl during pregnancy. The possibility of a fetal risk exists in a depressed patient who always becomes ill. Although there have been no reports of late-term changes or other serious effects, careful observation of the patient and periodic laboratory studies are recommended as with all new medications.

Precautions: Because of its antidepressant activity, Aventyl HCl should be used cautiously in patients with glaucoma or in those having a propensity for urinary retention. Care should be exercised when Aventyl HCl is given in combination with anticholinergic drugs. For use in hypotension, this drug with certain venous thrombotic and other plasma factors may result in a higher than usual

rate. As with similar drugs, it is advisable to observe for epileptiform activity during the initial phase of treatment.

Side Effects: No single side effect can be considered as occurring frequently, and most are mild and transitory. Dry mouth was noted in 26 percent of patients, drowsiness in 11 percent. The following have been occasionally noted (5 to 15 percent): constipation, diarrhea, tremulousness, emotional state, restlessness, weakness, and blurred vision. Side effects rarely noted (1 to 5 percent) were epigastric distress, sweating, peculiar taste, fatigue, weight gain, weight loss, insomnia, headache, paresthesia, nervousness, burning nose and itching, and change of mouth taste. Miscellaneous side effects were reported in less than 0.5 percent. There have been no reports of habituation or of withdrawal symptoms. No potentiation or increased incidence of side effects was observed when Aventyl HCl was used together with tranquilizers, other antidepressants (except MAO inhibitors), oral contraceptives, sedatives, hypnotics, preparations, and standard drugs given for primary medical disorders.

Dosage: Most adults respond well to 25 mg. three times daily, but the dose should be adjusted to the needs of the patient. Usual dosage range is divided doses.

Adults—20 to 150 mg. daily.
 Children—20 to 75 mg. daily (1 to 2 mg. per kg. of body weight). (See package literature for complete dosage information.)