

## Q-MIND SR

### For the use of a Psychiatrist only

Abbreviated Prescribing information for Q-MIND SR (Quetiapine fumarate 50/100/200/300/400 mg tablets) [Please refer the complete prescribing information available at [www.torrentpharma.com](http://www.torrentpharma.com)]

**PHARMACOLOGICAL PROPERTIES:** Quetiapine fumarate is an anti-psychotic drug belongs to dibenzothiazepine derivative. It shows the pharmacological action by inhibiting dopamine type 2 (D<sub>2</sub>) and serotonin type 2 (5HT<sub>2</sub>).

**INDICATIONS:** It is indicated in the treatment of schizophrenia and bipolar disorder.

**DOSAGE AND ADMINISTRATION:** Quetiapine can be taken with or without food. It should be swallowed whole and not split, chewed or crushed. Recommended dose *for schizophrenia in adults:* 400-800 mg/day, *in adolescents:* 400-800 mg/day, *maintenance dose:* 400– 800 mg/day and *for Bipolar I Disorder manic or mixed-Acute monotherapy or adjunct to lithium or divalproex in adults:* 400-800 mg, *children and adolescents:* 400-600 mg, *maintenance dose:* 400-800 mg.

**CONTRAINDICATIONS:** In patients with known hypersensitivity to this medication or any of its ingredients.

**WARNINGS & PRECAUTIONS:** Increased mortality in elderly patients with dementia-related psychosis, patients with major depressive disorder may experience worsening of their depression and/or the emergence of suicidal ideation and behavior or unusual changes in behavior. Neuroleptic Malignant Syndrome (NMS) may occur with quetiapine. Metabolic changes, irreversible, involuntary, dyskinetic movements and may develop with quetiapine, hypotension with dizziness, tachycardia, increases in blood pressure (children and adolescents), leukopenia, neutropenia, agranulocytosis, cataracts, QT prolongation, seizures, hypothyroidism, hyperprolactinemia potential for cognitive and motor impairment, dysphagia and acute withdrawal symptoms, such as insomnia, nausea, and vomiting have been described after abrupt cessation of quetiapine.

**DRUG INTERACTIONS:** Caution should be used while taking in other centrally acting drugs, the cognitive and motor effects of alcohol potentiated while taking quetiapine, CYP3A4 inhibitors increases quetiapine's pharmacological effect while CYP3A4 inducers decreases. It may enhance the effects of antihypertensive agents and may antagonize the effects of levodopa and dopamine agonists.

**ADVERSE REACTIONS:** Cerebrovascular adverse reactions, somnolence, dry mouth, dizziness, dyspepsia, anaphylactic reaction, cardiomyopathy, hyponatremia, myocarditis, nocturnal enuresis, pancreatitis, retrograde amnesia, rhabdomyolysis, syndrome of inappropriate antidiuretic hormone secretion (SIADH), Stevens-Johnson syndrome (SJS), and toxic epidermal necrolysis (TEN), extrapyramidal symptoms etc.

### MARKETED BY:



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(Additional information is available on request)