

Forthcoming from Gaskell

Gaskell is the imprint of the Royal College of Psychiatrists

Critical Reviews in Psychiatry

2nd Edition

Edited by Greg Wilkinson and Tom Brown

Good medical practice is based on a combination of clinical judgement and sound application of research-based evidence. Psychiatrists need to acquire skills and confidence in critical appraisal of research and its application to their clinical work, in order to evaluate published literature both in terms of scientific validity and clinical relevance. To test candidates in the principles and methodology of evidence-based medicine, the Royal College of Psychiatrists instigated a major change to the MRCPsych Part II examination in April 1999 – the Critical Review paper.

This book provides an introduction to the Critical Review paper, updated in the light of the first Critical Review examination paper taken by trainees (included in the book). The book includes mock exam papers, with model answers, covering most of the major kinds of research study, including randomised controlled trials, case control studies and systematic reviews. The book also includes advice from the Royal College of Psychiatrists on the new examination paper, including two pilot papers, and an introductory chapter provides helpful tips on how to tackle the paper. *Critical Reviews in Psychiatry* is unique in its coverage of the psychiatric aspects of critical review, and will be essential reading for all psychiatric trainees taking the MRCPsych examination.

December 1999, £tbc, Paperback, ISBN 1 901242 41 2

Gaskell books are available from

Book Sales, Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG. Telephone +44 (0)171 235 2351 extension 146, fax +44 (0)171 245 1231. Credit card orders can be taken over the telephone.

See the latest information on College publications on the Internet at <http://www.rcpsych.ac.uk>



Excel in depression

With efficacy superior to the leading SSRI¹

Efexor XL, the world's first SNRI, is nearly twice as effective as fluoxetine in eradicating the symptoms of depression.¹ Eradication of symptoms reduces the risk of relapse, impairment and suicide.²



Simply effective

EFEXOR XL
VENLAFAXINE 75 mg o.d.

RAISING LEVELS OF EFFECTIVENESS IN DEPRESSION

EFEXOR XL venlafaxine – Prescribing Information Presentation: Capsules containing 75mg or 150mg venlafaxine (as hydrochloride) in an extended release formulation. Use: Treatment of depressive illness. Dosage: Adults (including the elderly): Usually 75mg, given once daily with food, increasing to 150mg once daily if necessary. The dose can be increased further to 225mg once a day. Dose increments should be made at intervals of approximately 2 weeks or more, but not less than 4 days. Discontinue gradually to reduce the possibility of withdrawal reactions. Children: Contraindicated below 18 years of age. Moderate renal or moderate hepatic impairment: Doses should be reduced by 50%. Not recommended in severe renal or severe hepatic impairment. Contra-indications: Pregnancy, lactation, concomitant

(discontinue in event of seizure). Patients should not drive or operate machinery if their ability to do so is impaired. Possibility of postural hypotension (especially in the elderly). Women of child-bearing potential should use contraception. Prescribe smallest quantity of tablets according to good patient management. Monitor blood pressure with doses >200mg/day. Advise patients to notify their doctor should an allergy develop or if they become or intend to become pregnant. Patients with a history of drug abuse should be monitored carefully. Interactions: MAOIs: do not use Efexor XL in combination with MAOIs or within 14 days of stopping MAOI treatment. Allow 7 days after stopping Efexor XL before starting an MAOI. Use with caution in elderly or hepatically-impaired patients taking cimetidine, in patients taking other

drugs which inhibit both CYP2D6 and CYP3A4 hepatic enzymes. Side-effects: Nausea, insomnia, dry mouth, anorexia, dizziness, constipation, headache, nervousness, sweating, abnormal ejaculation/orgasm, anorexia, abnormal vision/accommodation, impotence, vomiting, tremor, abnormal dreams, vasodilatation, hyperreflexia, rash, agitation, hypertonia, paresthesia, postural hypotension, reversible increases in liver enzymes, night increase in serum cholesterol, weight gain or loss, hyponatraemia. Symptoms reported on discontinuation of venlafaxine were mostly non-serious and self-limiting and included dizziness, insomnia, nausea and nervousness. Basic NHS price: 75mg capsule (PL 00011/022/0) – blister pack of 28 capsules: £23.97, 150 mg capsule (PL 00011/022/1) – blister pack of 28 capsules: £39.97. Legal category: POM. Further information is available upon request from the Product Licence holder: Wyeth Laboratories, Tapscott, Maidenhead, Berkshire SL6 0PH. References: 1. Rudolph R et al. Poster presented at ECNP Vienna, 1997 [112003]. 2. Fennell W. J Clin Psychiatry 1993; 60 (Suppl 8): 10-14 [122569]. Wyeth. Date of preparation: October 1999. Trade mark: Wyeth or 72016001000.