



HEALTH AWARENESS

New Drug Treats Depression and Painful Complication of Diabetes

(NAPSA)—What do depression and the persistent pain caused by diabetic nerve damage have in common? According to scientists, the culprit may be an imbalance in chemical messengers, called neurotransmitters. These messengers exist in the brain and throughout the body, helping regulate pain as well as emotion.

This theory was underscored recently when the U.S. Food and Drug Administration approved Cymbalta® (duloxetine HCl) for the treatment of major depression and diabetic peripheral neuropathic pain, both in adults. As a dual-action antidepressant, Cymbalta targets two key neurotransmitters—serotonin and norepinephrine—helping relieve a broad spectrum of emotional and painful physical symptoms.

“We know that Cymbalta, as an antidepressant, is effective at treating both the emotional and painful physical symptoms of depression,” said Stephen Stahl, M.D., Ph.D., chairman of the Neuroscience Education Institute and adjunct professor of psychiatry at the University of California at San Diego School of Medicine. “Seeing significant benefit in diabetic neuropathic pain, among patients who did not have depression, helps confirm that this drug has a positive impact on pain that is separate from improvement in mood.”

About Depression

Although depression affects nearly 19 million Americans, it is often undiagnosed or undertreated. This may be because many fail to recognize that depression has physical as well as emotional symptoms. In one study, 69 percent of people with depression listed painful physical



A new drug may now be used to treat both depression and painful complication of diabetes.

symptoms, such as shoulder pain and backaches, as the main reason for first seeking help from their primary care physician. Recognizing and treating all disease symptoms is important. Studies show that patients with depression are more likely to recover fully when all of their symptoms, both emotional and physical, are addressed.

About Diabetic Peripheral Neuropathic Pain

Up to five million Americans with diabetes live with persistent burning, shooting or stabbing pain in their hands and feet caused by permanent nerve damage. Scientists believe this damage is caused by high blood sugar. Although Cymbalta does not change the underlying nerve damage, it is the only FDA-approved medication for the management of diabetic peripheral neuropathic pain. Until now, patients with this type of pain were treated with drugs not indicated for the condition.

To learn more about Cymbalta, visit www.Cymbalta.com.

Editor's Note: Cymbalta is indicated for the treatment of major depression and the management of diabetic peripheral neuropathic pain, both in adults. As Cymbalta has not been studied in children, Lilly discourages its use in those under 18.

Cymbalta should not be confused with Symbyax™ (pronounced SIMM-bee-ax), a medicine for bipolar depression also marketed by Lilly. Symbyax is a combination of olanzapine, the active ingredient in Zyprexa®, and fluoxetine, the active ingredient in Prozac®. Symbyax is available in capsules of 6 mg/25 mg (olanzapine/fluoxetine), 12 mg/25 mg, 6 mg/50 mg and 12 mg/50 mg. Cymbalta is available in 20 mg, 30 mg and 60 mg capsules.

Patients being treated with antidepressants should be observed closely for clinical worsening of depressive symptoms and suicidality. Patients and their families should watch for these as well as for anxiety, agitation, panic, difficulty sleeping, irritability, hostility, aggressiveness, impulsivity, restlessness, or overexcitement and hyperactivity. Call the doctor if any of these are severe or occur suddenly. Be especially observant when starting any antidepressant therapy and whenever there is a change in dose.

Prescription Cymbalta is not for everyone. People who are allergic to duloxetine hydrochloride or the other ingredients in Cymbalta should not take it. If you have recently taken a type of antidepressant called a monoamine oxidase inhibitor (MAOI), are taking thioridazine or have uncontrolled narrow-angle glaucoma, you should not take Cymbalta. Talk with your doctor before taking Cymbalta if you have serious liver or kidney problems, glaucoma or consume large quantities of alcohol. Women who are pregnant should talk with their doctor before taking Cymbalta. Nursing while taking Cymbalta is not recommended.

In clinical studies of Cymbalta for depression, the most common side effects were nausea, dry mouth, constipation, decreased appetite, fatigue, sleepiness and increased sweating. In clinical studies of Cymbalta for pain caused by diabetic neuropathy, the most common side effects were nausea, sleepiness, dizziness, constipation, dry mouth, increased sweating, decreased appetite and loss of strength or energy. Most people were not bothered enough by side effects to stop taking Cymbalta. Your doctor may periodically check your blood pressure. Don't stop taking Cymbalta without talking to your doctor.