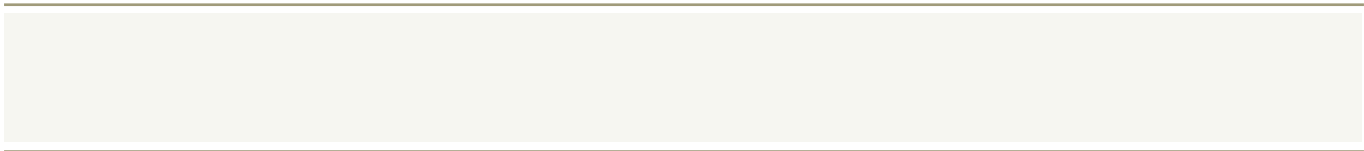


YOU ARE INVITED



As a general practitioner, your role is key in the continuity of care of patients living with mental illness. To support you in your practice, we are pleased to invite you to the following meeting:



- The role of Brintellix® (vortioxetine) in treating MDD
- The role of REXULTI® (brexpiprazole) in treating schizophrenia



Speaker(s):

Date:

Start time:

City:

End time:

Venue:



60 minute presentation
plus 15 minutes question time

AGENDA

Registration

Welcome
and entrée

Presentation,
dinner and
questions

Presentation
concludes;
dessert served

Close

Places are limited. RSVP to your local representative to avoid disappointment.

Contact details:

Name:

Phone:

Email:

RSVP by:

MDD: Major Depressive Disorder

FURTHER DETAILS



Inclusions: This invitation is for the intended recipient and applicable only for the venue to which they were invited to attend. Lundbeck Australia is not able to provide transport or accommodation associated with this event. As part of the sponsorship we anticipate that you will attend the educational session at the meeting. All attendees are responsible for obtaining approval to receive and/or disclose hospitality as required by their employers or professional association. Lundbeck Australia will not subsidise or pay for the hospitality, travel or other expenses of any guest, family, companion or any other person associated with a delegate attending an educational event.

CPD Points: This is not an accredited educational activity. Healthcare professionals can self-record their participation and claim CPD/CME points as a self-directed non-accredited activity.

Privacy: Lundbeck acknowledges and respects privacy. If you would like to know about Lundbeck Australia's privacy policy and procedures please contact Lundbeck Australia on +61 2 8669 1000. Lundbeck Australia's Privacy Policy can be viewed at www.lundbeck.com.au

PBS Information: This product is not listed on the PBS.

Please review Brintellix Approved Product Information before prescribing.
Product Information is available by calling Lundbeck on 1300 721 277.

Minimum Product Information: Brintellix® (vortioxetine hydrobromide) **Indications:** Treatment of major depressive disorder in adults including prevention of relapse. Vortioxetine is not indicated for paediatric use. **Dosage & Administration:** To be taken with or without food. Adults: 10 mg once daily; depending on individual response maximum 20 mg once daily or reduced to 5 mg once daily. Elderly (>65 years): 5 mg once daily; increase to 10 mg once daily if required. Dosage adjustment may be required for strong CYP2D6 inhibitors or CYP450 inducers. Treatment for at least 6 months is recommended for consolidation of response. **Contraindications:** Hypersensitivity to any component of BRINTELLIX. Concomitant treatment with MAOIs or treatment within 14 days of MAOIs. **Precautions:** Clinical worsening and suicide risk; Neuroleptic Malignant Syndrome; Serotonin Syndrome; activation of mania/hypomania; seizures; haemorrhage; hyponatraemia; severe hepatic impairment; severe renal impairment; *raised intraocular pressure; angle-closure glaucoma**; pregnancy (Category B3); electroconvulsive therapy; breastfeeding is not recommended. **Interactions:** MAOIs (see full PI for details); serotonergic medicines including tramadol and triptans; St John's Wort; Cytochrome P450 inducers e.g. rifampicin; Cytochrome P450 inhibitors e.g. bupropion; antiplatelets; anticoagulants; lithium; tryptophan; medicines lowering the seizure threshold including SSRIs, SNRIs, tricyclics, neuroleptics, mefloquine, tramadol. **Adverse Effects:** nausea; vomiting; diarrhoea; constipation; decreased appetite; sedation; generalised pruritus. For all other adverse events see full PI. **Date of TGA approval:** 31 March 2014. **Date of TGA update:** 15 January 2020. **Date of Minimum PI:** 15 January 2020.

*Please note changes to minimum product information in italics



PBS Information: Authority required (STREAMLINED). Code: 4246 for schizophrenia.

Please review the REXULTI® Approved Product Information before prescribing.
Product Information is available on request from Lundbeck Australia Pty Ltd 1300 721 277.

Minimum Product Information: REXULTI® (brexipiprazole). **Pharmacology:** Rexulti has pharmacological activity as a serotonin-dopamine activity modulator with antagonistic activity at specific noradrenergic receptors. **Indications:** Treatment of adult patients with schizophrenia. **Contraindications:** Hypersensitivity to brexipiprazole or any of the tablet excipients. **Precautions:** Elderly patients with dementia-related psychosis; suicidality; tardive dyskinesia; neuroleptic malignant syndrome; seizure; cerebrovascular events; hyperglycaemia; diabetes mellitus; orthostatic hypotension; cardiovascular disease, cerebrovascular disease or conditions predisposing to hypotension; venous thromboembolism; body temperature regulation; dysphagia; leucopenia, neutropenia, agranulocytosis; potential impairment of cognitive and motor skills; impulse control disorders; *sleep apnoea**; lactose containing, avoid in patients with galactose intolerance and glucose-galactose malabsorption; concomitant medical illness; pregnancy (Category C), congenital anomalies, neonatal effects; avoid breastfeeding; elderly and children <18 years. **Interactions:** Dosage adjustment is recommended for co-administered strong CYP2D6 or CYP3A4 inhibitors (e.g. quinidine or ketoconazole) strong CYP3A4 inducers (e.g. rifampicin) see Approved PI. **Adverse Effects:** There are no adverse reactions meeting the very common criteria from clinical trials. Common: diarrhoea; dyspepsia, toothache, weight increase, decreased appetite, blood creatinine phosphokinase increase, back pain, pain in extremity, muscle spasm, muscle pain, akathisia, tremor, sedation, pruritus. For further details on all adverse reactions see Approved PI. **Dosage & Administration:** To be taken with or without food. Recommended starting dose is 1 mg once daily on Days 1–4. Recommended target dose is 2 mg to 4 mg once daily. Titrate to 2 mg on Day 5 and to 4 mg on Day 8. Consult Approved PI for dosage adjustments for patients with renal or hepatic impairment. **Date of TGA approval:** 17 May 2017; **Date of TGA update:** 24 January 2020; **Date of Minimum PI:** 04 February 2020.

*Please note changes to minimum product information in italics



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Prepared Mar 2020. FD20391 AU-NOTPR-0117 Form is read-only if ticked:

