



Count on

 **Pristiq**<sup>®</sup>  
*desvenlafaxine succinate*  
for powerful symptom relief

PRISTIQ is indicated for the symptomatic relief of major depressive disorder.<sup>1</sup>

# Choose PRISTIQ:

A demonstrated low incidence of sexual dysfunction<sup>1</sup>



In major depressive disorder, her doctor calls it  
“a demonstrated low incidence of sexual  
adverse events”  
She calls it  
“caring about her sexual function”

## Sexual function adverse events in women and in men at 8 weeks<sup>1</sup>

WOMEN	Sexual function adverse event	Placebo (n = 397)	PRISTIQ 50 mg (n = 209)	PRISTIQ 100 mg (n = 267)
	Anorgasmia	0%	1%	1%
MEN	Sexual function adverse event	Placebo (n = 239)	PRISTIQ 50 mg (n = 108)	PRISTIQ 100 mg (n = 157)
	Erectile dysfunction	1%	3%	6%
	Ejaculation delayed	<1%	1%	5%
	Libido decreased	1%	4%	5%
	Ejaculation failure	0%	1%	0%
	Sexual dysfunction	0%	1%	0%
	Anorgasmia	0%	0%	3%
	Orgasm abnormal	0%	0%	1%
	Ejaculation disorder	0%	0%	1%

Adapted from PRISTIQ Product Monograph.

## PRISTIQ demonstrated low potential for drug-drug interactions<sup>1\*</sup>

With a simple metabolic profile without the potential for CYP polymorphism factors, and linear pharmacokinetics, the potential for interaction with other prescribed medications remains low for PRISTIQ

PRISTIQ is contraindicated in patients taking monoamine oxidase inhibitors (MAOIs) and should not be taken in combination with selective serotonin reuptake inhibitors (SSRIs), other serotonin-norepinephrine reuptake inhibitors (SNRIs), other serotonergic drugs (including triptans, amphetamines, lithium, sibutramine, fentanyl and its analogues, dextromethorphan, tramadol, tapentadol, meperidine, methadone and pentazocine or St. John's Wort), or serotonin precursors (such as tryptophan), or drugs that interfere with hemostasis. Caution is advised when taken in combination with other CNS-active agents, potent inhibitors of CYP3A4, drugs metabolized by CYP2D6, or drugs metabolized by CYP3A4.

## PRISTIQ demonstrated low rate of discontinuation due to adverse events<sup>1</sup>

PRISTIQ 50 mg had a similar discontinuation rate due to adverse events vs. placebo

- In an 8-week study, the discontinuation rate due to adverse events for PRISTIQ 50 mg QD was 4.1% vs. 3.8% for placebo

The most common adverse reactions leading to discontinuation (at doses of 50-400 mg QD) were: nausea (4%), dizziness (2%), headache (2%) and vomiting (2%).



## PRISTIQ:

A demonstrated  
low risk of  
weight gain<sup>1</sup>

In major depressive disorder,  
her doctor calls it

“a demonstrated low risk of  
weight gain”

She calls it

“caring about her weight”

- In short-term, premarketing trials, mean change in weight was -0.4 and -0.6 kg for PRISTIQ 50 and 100 mg/day, respectively, vs. 0.0 kg for placebo
- At the end of a **6-month** study, no statistical difference in mean weight change vs. placebo was seen ( $p=ns$ )<sup>†</sup>

## PRISTIQ did not cause QT prolongation<sup>1</sup>

A thorough QTc study was designed to assess the potential effect of 200 and 600 mg of PRISTIQ on QT interval prolongation

- Electrocardiograms were obtained from 1,492 PRISTIQ-treated patients with major depressive disorder and 984 placebo-treated patients in clinical trials lasting up to 8 weeks. No clinically relevant differences were observed between PRISTIQ-treated and placebo-treated patients for QT, QTc, PR, and QRS intervals

### **Indications and clinical use:**

- PRISTIQ is indicated for the symptomatic relief of major depressive disorder (MDD)
- PRISTIQ is not indicated for use in children under the age of 18
- The short-term efficacy of PRISTIQ has been demonstrated in placebo-controlled trials of up to 8 weeks
- The efficacy of PRISTIQ in maintaining an antidepressant response for up to 26 weeks, following response during 20 weeks of acute, open-label treatment, was demonstrated in a placebo-controlled trial

### **Contraindications:**

- Concomitant use with monoamine oxidase inhibitors (MAOIs) or within the preceding 14 days
- Hypersensitivity to venlafaxine hydrochloride

### **Most serious warnings and precautions:**

- **Behavioural and emotional changes, including self-harm:**  
SSRIs and other newer antidepressants may be associated with:
  - Behavioural and emotional changes including an increased risk of suicidal ideation and behaviour
  - Severe agitation-type adverse events coupled with self-harm or harm to others
  - Suicidal ideation and behaviour; rigorous monitoring
- **Discontinuation symptoms:** should not be discontinued abruptly. Gradual dose reduction is recommended

### **Other relevant warnings and precautions:**

- Concomitant use with venlafaxine not recommended
- Allergic reactions such as rash, hives or a related allergic phenomenon
- Bone fracture risk with SSRI/SNRI
- Increases in blood pressure and heart rate (measurement prior to and regularly during treatment)
- Increases cholesterol and triglycerides (consider measurement during treatment)
- Hyponatremia or Syndrome of Inappropriate Antidiuretic Hormone (SIADH) with SSRI/SNRI
- Potential for GI obstruction
- Abnormal bleeding SSRI/SNRI
- Interstitial lung disease and eosinophilic pneumonia with venlafaxine
- Seizures
- Angle-closure glaucoma
- Mania/hypomania
- Bipolar disorder
- Serotonin syndrome or neuroleptic malignant syndrome-like reactions

### **For more information:**

Please consult the Product Monograph at <http://pfizer.ca/pm/en/Pristiq.pdf> for important information relating to adverse reactions, drug interactions and dosing information which have not been discussed in this piece.

The Product Monograph is also available by calling 1-800-463-6001.

\* Clinical significance has not been established.

† Results of the final on-therapy assessment in the 6-month, double-blind, placebo-controlled phase of a long-term trial in patients who had responded to PRISTIQ during an initial 12-week, open-label phase.

# Choose PRISTIQ<sup>®</sup>

for adult patients with  
major depressive disorder:<sup>1</sup>

Demonstrated low incidence of sexual dysfunction

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A demonstrated low risk of weight gain

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Demonstrated low rate (4.1%) of discontinuation due  
to adverse events (PRISTIQ 50 mg)

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Did not cause QTc prolongation in one study

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## Consider PRISTIQ for<sup>1\*</sup>

Low potential for drug-drug interactions



\* Clinical significance not established.

Reference: 1. PRISTIQ Product Monograph, Pfizer Canada, August 28, 2018.



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