Suffering-Treating Worrying

Cognitive/psychiatric side effects, including cognitive dysfunction, psychiatric/behavioral disturbances, and somnolence and fatigue.

Most common adverse events associated with TOPAMAX 100 mg vs placebo were: paresthesia, 51% vs 6%; anorexia,* 15% vs 6%; fatigue, 15% vs 11%; nausea, 13% vs 8%; diarrhea, 11% vs 4%; weight decrease, 9% vs 1%; taste alteration, 8% vs 1%.

The possibility of decreased contraceptive efficacy and increased breakthrough bleeding should be considered in patients taking combination oral contraceptive products with TOPAMAX.

After 6 weeks, average LDL cholesterol levels were reduced significantly more in each of the rosuvastatin groups than they were in the corresponding atorvastatin groups. In fact, patients receiving the lower dose of rosuvastatin had a decline in LDL of about the same degree as patients receiving the higher dose of atorvastatin (Am. J. Cardiol. 2006;97:229-35). Similarly, rosuvastatin resulted in significantly greater reductions in total cholesterol, non–HDL cholesterol, and apolipoprotein B than milligram-equivalent doses of atorvastatin. The ratios of LDL cholesterol to HDL cholesterol, total cholesterol to HDL cholesterol, non–HDL cholesterol to HDL cholesterol, and apo B to apo A1 were also significantly better in patients taking rosuvastatin than in those taking atorvastatin.

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