Summary of Discussion at Superintendents Meeting 18\textsuperscript{th} July 1958

A NEW PHENOTHIAZINE, SANDOZ TP-21

Since July 1957 the Department of Psychiatry at the University has been using on various types of patients a new phenothiazine developed by Sandoz. A controlled double-blind study run on out-patients populations at the General Hospital and the University during the summer and fall of 1957, demonstrated quite conclusively that the drug TP-21 was significantly more effective in improving the overall condition and performance of the patients than a companion phenothiazine and placebos for each of these medications. Most noticeable, in addition to the relief of anxiety and tension symptoms, was the improvement in the depression-apathetic range of symptoms in many of the patients on TP-21.

In addition to the double-blind study, there have been a number of clinical trials with this drug on both in- and out-patients with the result that we feel we can state the drug compares quite favorable with either trilafon or chlorpromazine in its ataractic effect and appears to have stimulating effect that neither of these two compounds possesses. In addition, the only observable side effects have been some light grogginess and drowsiness during the first twenty-four to forty-eight hours of medication with the drug which seems to pass quite rapidly, leaving the patient free of any unpleasant side effects. No blood dyscrasias or evidence of liver disturbance have been reported to date.

A sample of disturbed children at the Wilder Clinic as well as by several private practitioners, seems to indicate that the drug is well tolerated and has a rapid tranquilizing effect upon many of the behavior disorders seen in children, being especially effective in the generally hyperactive, tense, hyper-kinetic child.

Dosage ranges are from 25 mg. t.i.d. upward in out-patients for adults, the highest dosage given being 300 mg. a day. For children we have started with 10 mg. twice or three times a day and adjusted the dose up or downward as seemed necessary. For in-patients, 50 mg. t.i.d. as a starter, going up to, at the present time, as high as 800 mg. appears to be the average range.

One of the significant findings with this drug appears to be its lack of Parkinson-like side effects since in some patients studied at Anoka State Hospital who were on chlorpromazine and who were having definite Parkinson symptoms, a switch to an equivalent amount TP-21 maintained or improved their general adjustment but the Parkinson symptoms disappeared within forty-eight hours. In addition, in one patient who one and a half years ago had shown a definite liver disturbance with severe jaundice when on chlorpromazine has been successfully medicated for four months with TP-21.
Recently this patient was shifted to chlorpromazine again as part of a controlled study and within seventy-two hours again showed jaundice. From this one case it would appear that there is less involvement of the liver with TP-21 than with chlorpromazine.

We recommend a trial of this new phenothiazine as apparently a potentially useful drug with minimal side effects to date. We would suggest that you contact Dr. Glueck at the University or Mr. Robert Meints, 6945 Harriet Ave., Minneapolis, Un 9-8136, who is the area representative for Sandoz, about supplies of medication, dosage and other questions that may arise.

Dr. Bernard C. Glueck, Jr.

Copy to Dr. Smith, Dr. Kennedy, Dr. Bruhl, Dr. Lende, Dr. Ozolins and Dr. Arneson.

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