

FOUNDATION THERAPY

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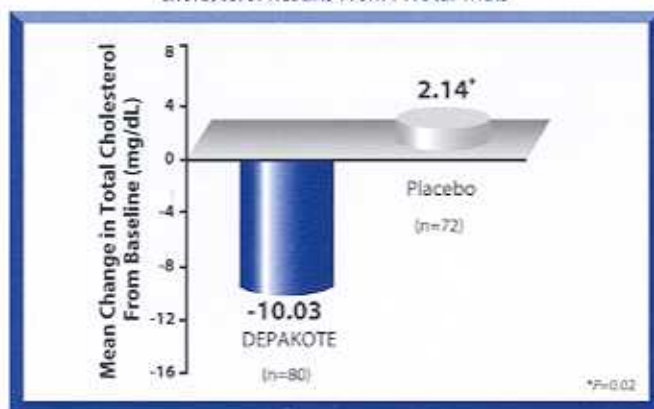
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Metabolic Effects Are Important When Choosing a Foundation Therapy

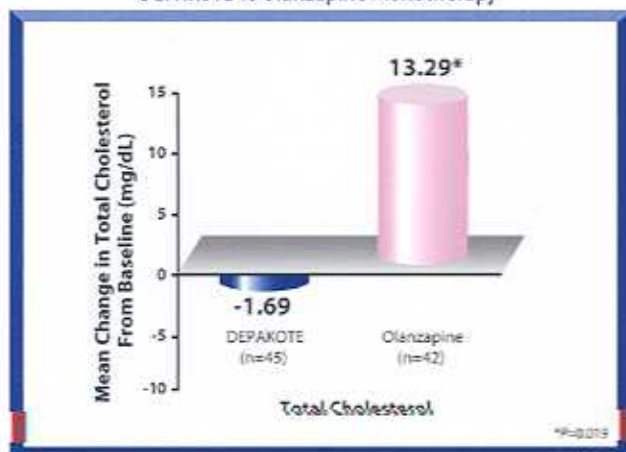
DEPAKOTE Did Not Increase Cholesterol in Clinical Trials¹

Cholesterol Results From Pivotal Trials¹



Study Design: A pooled analysis of variance (ANCOVA) from studies M87-016 and M88-267. Patients treated for bipolar mania with DEPAKOTE (n=72) and placebo (n=80) were monitored for cholesterol, total protein, albumin, creatinine, and glucose. DEPAKOTE demonstrated a mean reduction in cholesterol from baseline that was statistically significant from placebo (P=0.02).

DEPAKOTE vs Olanzapine Monotherapy²



Study Design: In a 12-week, randomized, double-blind, multicenter study of 120 bipolar patients, DEPAKOTE was initiated in 63 patients at 20 mg/kg/day while olanzapine was initiated in 57 patients at 10 mg/day. The primary efficacy measurement was change in MRS scores from baseline to day 21. Mean reduction in MRS scores: DEPAKOTE -14.8, olanzapine -17.2. Mean baseline: DEPAKOTE 30.8, olanzapine 32.3. Several metabolic parameters were monitored, including total cholesterol, LDL, HDL, triglycerides, glucose, and weight. Mean model doses: DEPAKOTE 1583 mg, olanzapine 16 mg.

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