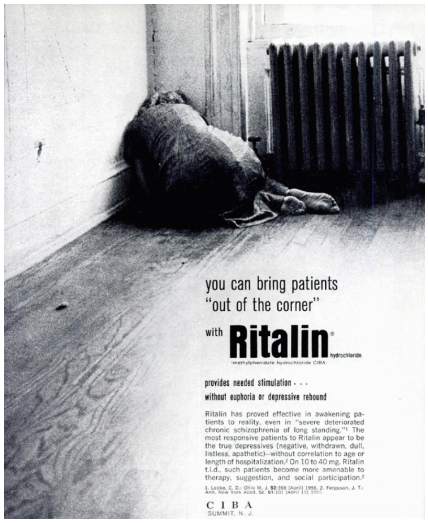
En liten historia om bedräglig marknadsföring av droger

Vem ska vi bota med Ritalina idag?

Ska vi kanske använda narkotikapreparatet Ritalina för att få fram de schizofrena ur hörnen?

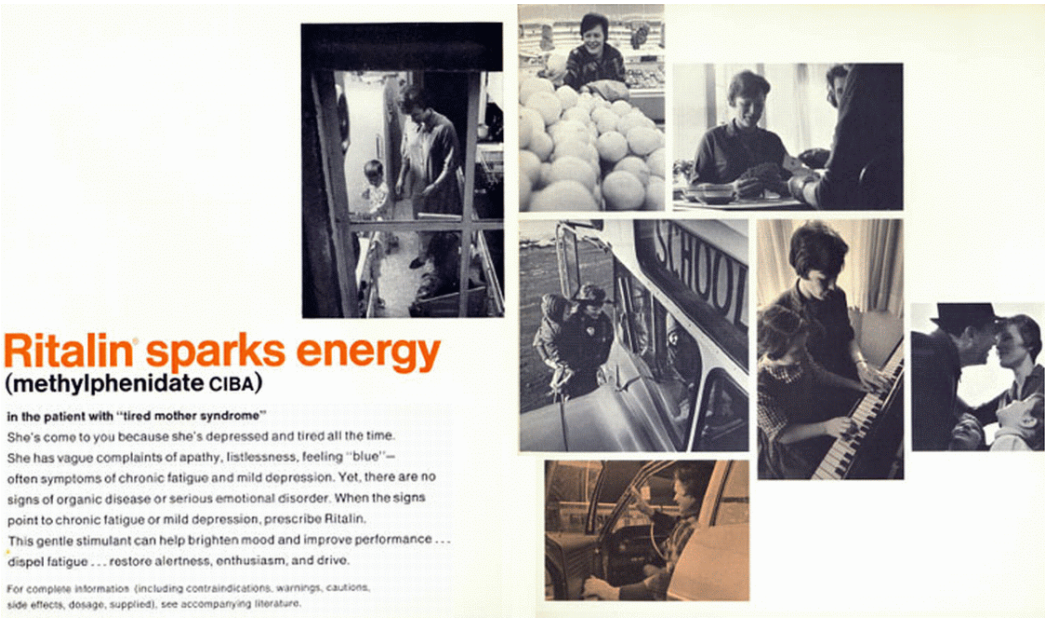


Det tyckte läkemedelsbolaget Ciba-Geigy (nu Novartis), som (1957) skrev att ”Ritalina hade visat sig var effektivt i att väcka patienter till verkligheten”.

Eller ska vi följa bolagets tips (1956) och ”lyfta den deprimerade psykiatriska patienten”?



Kanske följa tipset (1967) och ge energi till de kvinnor som lider av "trötta-modern-syndromet"?



Det är sant, det finns också trötta män, som kan behöva narkotika för att få lite mer energi (1969).



Vi får inte glömma de gamla – Ritalina (1966) kan få matlagningen att gå som en dans!



if chronic fatigue and mild depression make simple tasks seem this big...

Ritalin® (methylphenidate CIBA) relieves chronic fatigue that depresses and mild depression that fatigues

Ritalin gently overcomes mild depression and the fatigue so often associated with it. The drug brightens mood and improves performance, helps restore alertness, enthusiasm, and drive. Patients often report that fatigue and worry seem to vanish; they are able to go all day without getting tired.

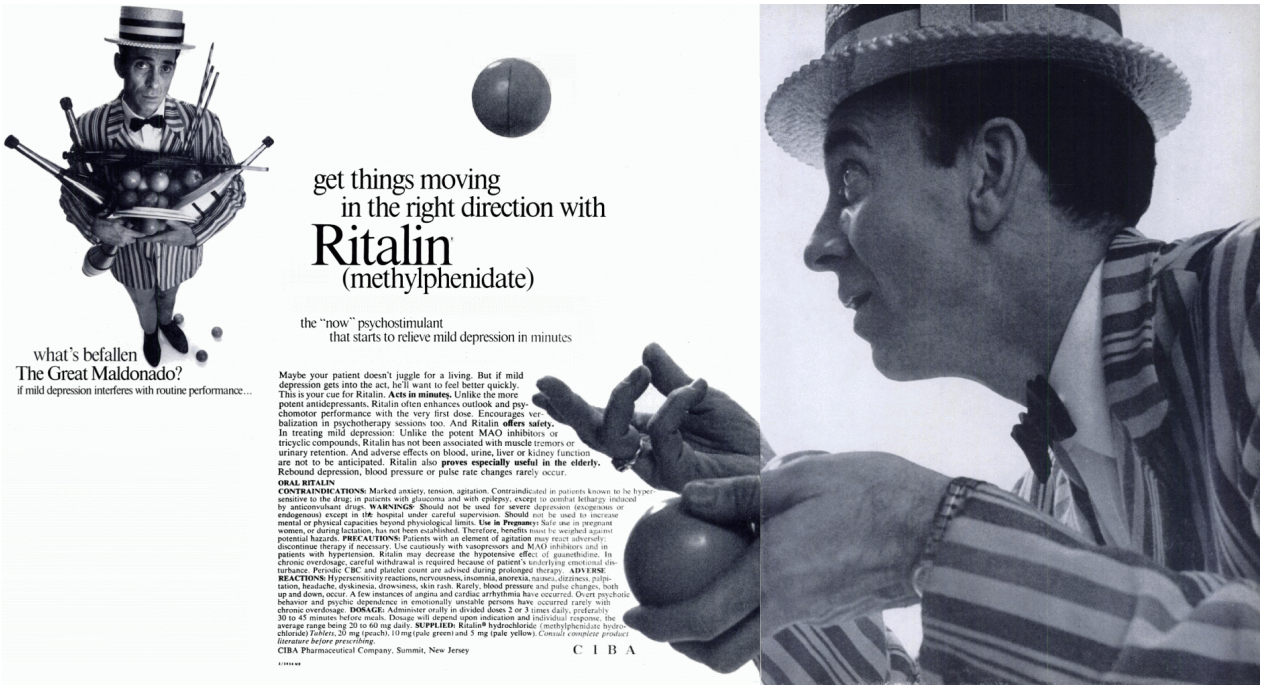
Widely cited for its outstanding record of safety, Ritalin is virtually free of the toxic effects of the more potent antidepressants. Its action is usually uncomplicated by excessive stimulation or sudden letdown.

Ritalin is exceptionally well tolerated, even by the elderly.

CONTRAINDICATIONS: Marked anxiety, tension, agitation. Contraindicated in patients with glaucoma and with epilepsy, except to combat lethargy induced by anticonvulsant drugs. WARNINGS: Should not be used for severe depression (exogenous or endogenous) except in the hospital under careful supervision. Should not be used to increase mental or physical capacities beyond physiological limits.
PRECAUTIONS: Patients with an element of agitation may react adversely; discontinue therapy if necessary. Use cautiously with vasopressors (*e.g.*, epinephrine, levarterenol, angiotensin amide) and in patients with hypertension.
SIDE EFFECTS: Nervousness, insomnia, anorexia, nausea, dizziness, palpitation, headache, drowsiness, skin rash. Rarely, blood pressure and pulse changes, both up and down, occur. Overt psychotic behavior and psychic dependence in emotionally unstable persons have occurred rarely.
DOSAGE: Administer orally in divided doses 2 or 3 times daily, preferably 30 to 45 minutes before meals. Dosage will depend upon indication and individual response, the average range being 20 to 60 mg daily.
SUPPLIED: Ritalin® hydrochloride (methylphenidate hydrochloride CIBA) *Tablets*, 20 mg (peach), 10 mg (pale green) and 5 mg (pale yellow).
Consult complete product literature before prescribing.
CIBA Pharmaceutical Company, Summit, N. J.

CIBA

Ritalina (1969) kan verkligen ”få fart på saker och ting” – pillret tar hand om depressionen ”på bara några minuter”!



what's befallen The Great Maldonado?
if mild depression interferes with routine performance...

get things moving in the right direction with Ritalin® (methylphenidate)

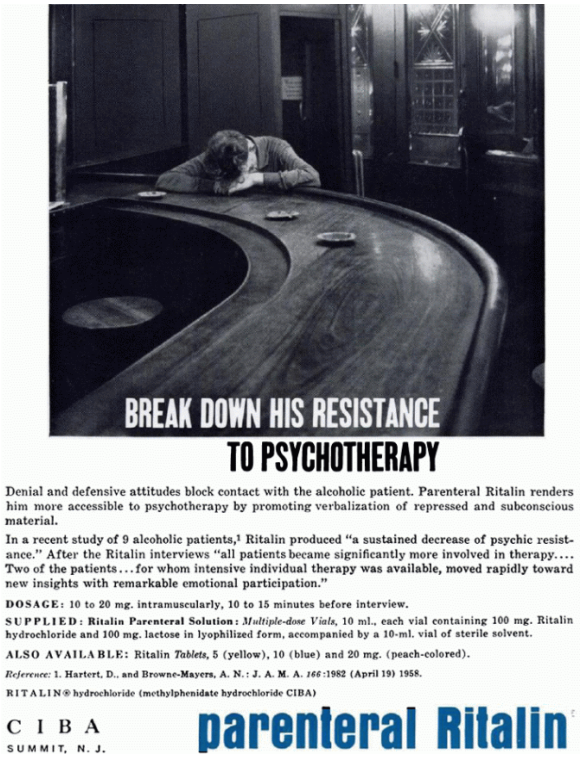
the "now" psychostimulant that starts to relieve mild depression in minutes

Maybe your patient doesn't juggle for a living. But if mild depression gets into the act, he'll want to feel better quickly. This is your cue for Ritalin. **Acts in minutes.** Unlike the more potent antidepressants, Ritalin often enhances outlook and psychomotor performance with the very first dose. Encourages verbalization in psychotherapy sessions too. And Ritalin **offers safety.** In treating mild depression: Unlike the potent MAO inhibitors or tricyclic compounds, Ritalin has not been associated with muscle tremors or urinary retention. And adverse effects on blood, urine, liver or kidney function are not to be anticipated. Ritalin also **proves especially useful in the elderly.** Rebound depression, blood pressure or pulse rate changes rarely occur.

ORAL RITALIN
CONTRAINDICATIONS: Marked anxiety, tension, agitation. Contraindicated in patients known to be hypersensitive to the drug; in patients with glaucoma and with epilepsy, except to combat lethargy induced by anticonvulsant drugs. **WARNINGS:** Should not be used for severe depression (exogenous or endogenous) except in the hospital under careful supervision. Should not be used to increase mental or physical capacities beyond physiological limits. **Use in Pregnancy:** Safe use in pregnant women, or during lactation, has not been established. Therefore, benefits must be weighed against potential hazards. **PRECAUTIONS:** Patients with an element of agitation may react adversely; discontinue therapy if necessary. Use cautiously with vasopressors and MAO inhibitors and in patients with hypertension. Ritalin may decrease the hypotensive effect of guanethidine. In chronic overdosage, careful withdrawal is required because of patient's underlying emotional disturbance. Periodic CBC and platelet count are advised during prolonged therapy. **ADVERSE REACTIONS:** Hypersensitivity reactions, nervousness, insomnia, anorexia, nausea, dizziness, palpitation, headache, dyskinesia, drowsiness, skin rash. Rarely, blood pressure and pulse changes, both up and down, occur. A few instances of angina and cardiac arrhythmia have occurred. Overt psychotic behavior and psychic dependence in emotionally unstable persons have occurred rarely with chronic overdosage. **DOSAGE:** Administer orally in divided doses 2 or 3 times daily, preferably 30 to 45 minutes before meals. Dosage will depend upon indication and individual response, the average range being 20 to 60 mg daily. **SUPPLIED:** Ritalin® hydrochloride (methylphenidate hydrochloride) *Tablets*, 20 mg (peach), 10 mg (pale green) and 5 mg (pale yellow). *Consult complete product literature before prescribing.*
CIBA Pharmaceutical Company, Summit, New Jersey

CIBA

Vi höll på att missa alkoholisten – där Ritalina (1959) ”bryter ner hans motstånd mot psykoterapi”.



Och sist men inte minst, ”de små busfröna”, vars bus Ciba-Geigy (1979) säger tidigare ”ofta betraktades med en tolerant attityd – som värst ansågs de vara ett mindre irritationsmoment”. Men den tiden är förbi. Nu bör man titta om det inte är så att de lider av MBD – Minimal Brain Dysfunction, så att den toleranta attityden kan ersättas med Ritalina.



Ja, Ritalina kunde enligt psykiatrin och läkemedelsbolaget bota nästan ALLT – och det på bara några minuter. Det var en ”quick fix” av det mesta av det som människor hade problem med.