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Cymbalta (Duloxetine) Discontinuation Syndrome

Issues of Scope, Severity, Duration & Management

Cymbalta Discontinuation Syndrome

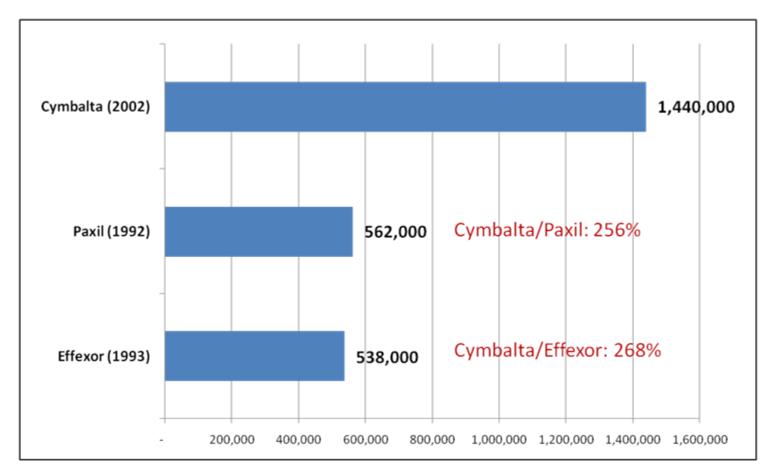
- Much anecdotal evidence has accumulated documenting the injury, distress and life management impacts caused by discontinuation of Cymbalta
 - The effects of discontinuation can be severe and extend for weeks or even months
 - Extreme mood swings (anger, irritability)
 - Debilitating "Brain Zaps"
 - Physical and neurological problems
 - Physical and psychological disturbances adversely affect job function and family/social relationships
 - Employment risk
 - Negative impacts on care of family members

Claims

- Cymbalta discontinuation syndrome is more severe and much more widespread than acknowledged by Eli-Lilly
- Lilly sales representatives and marketing materials do not adequately inform physicians about the likelihood and severity of discontinuation syndrome
- 3) Lilly Direct to Consumer (DTC) advertizing is misleading related to the probability, severity and complexity of Cymbalta discontinuation
- 4) Lilly has not developed and fielded a clinically proven protocol for safely discontinuing Cymbalta

1) Cymbalta discontinuation syndrome is more severe and much more widespread than acknowledged by Eli-Lilly

- Google search hit count on "Drug Name" AND "Withdrawal"
 - Note relative release dates



Many websites document Cymbalta withdrawal trauma anecdotally (1,000's of Entries)

- What Winners Do:
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/
- Cymbaltawithdrawal.com
 - http://www.cymbaltawithdrawal.com/
- Depressionforums:
 - http://www.depressionforums.org/forums/Cymbalta-Withdrawal-It-s-Prettyt13148.html
- Point of Return:
 - http://www.labelmesane.com/cymbalta_withdrawal.html
 - Third party withdrawal assistance
 - Why should a consumer need to pay to discontinue?
- Depression Hurts, Cymbalta Hurts More!
 - http://www.youtube.com/watch?v=yeq4gSfMXdo
 - Youtube video
 - Concise (2:30) description of the trauma and its effects
- Cafepharma:
 - http://www.cafepharma.com/boards/showthread.php?t=207484
 - (Not Lily sponsored) drug rep page The reps are aware of the issue
 - If the reps know, why don't the physicians know?

Typical Cymbalta Withdrawal Anecdotes*

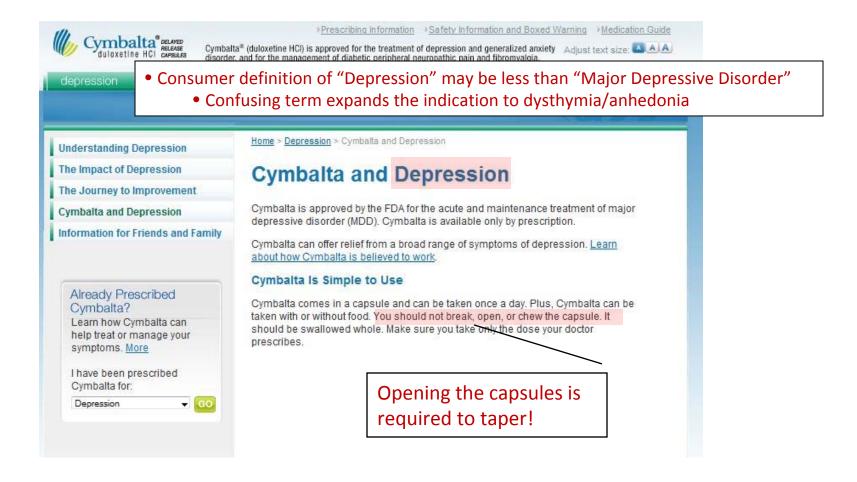
- "May 15th, 2009 at 4:24 pm Day 38. My Doctor didn't know or she didn't tell me that going off Cymbalta would be a serious life challenge. Perhaps there are patients that do not have the withdrawal side effects (like consistent suicidal thoughts, the inability to control incredible irritability that quickly turns to rage...over nothing...paranoia, dizziness, confusion, brain zaps, dramatic change in eating patterns, helplessness, hopelessness, dysphoria...) I guess there must be people out there that move easily back to a life without Cymbalta. But I sort of can't imagine it..."
- "May 16th, 2009 at 11:47 am "Hey everyon! Wow, I thought I was going crazy. I went clean and sober and to deal with the depression that comes with it, I was put on Cymbalta. I do sixty mg. a day. I had a mishap with my insurance and they wouldn't allow me to buy it unless I paid an outrageous price of 120.00 for thirty pills. Well I opted to wait it out. 10 days. Well I nearly went to jail. I was so confused I fought everyone in my family for no reason. I even suffered broken ribs. It was far better than them "brain-zaps" They will certainly kill me. I can't seem to move my eyes without the utterly horrible feelings that come with such a simple jesture. I tried explaining it to my family. (warning) Then I went to the doctor tried to explain my symptoms and he thought I was crazy."

*Verbatim abstracts from the What Winners Do web site

2) Lilly sales representatives and marketing materials do not adequately inform physicians about the likelihood and severity of Cymbalta discontinuation syndrome

- Unaware physicians unable to discuss Cymbalta benefit-risk profile (including discontinuation) with their patients
 - Physicians can not make an accurate comparative assessment of Cymbalta vs. alternatives
 - Patients can not make an fully informed choice to take the drug
- Practical effects (common in anecdotal reports):
 - Patient becomes totally distrustful of the physician who did not advise/warn them in the first place
 - Doctor /patient relationship is wrecked
 - · Patient in distress refuses to ingest Cymbalta under any pretext
 - Tapering is taken off the table
 - Patient fires the doctor or the doctor disengages from the patient
 - Syndrome mood swings militate anger directed at the physician
 - Physician may deny syndrome even exists
 - Physician may jettison a newly "difficult" patient
 - Physician seeks to avoid malpractice implications
 - Patient becomes deeply suspicious of any psychotropic medication
 - Underlying problem may go untreated
- This is a process flaw there is no excuse for it

3) Lilly Direct to Consumer (DTC) advertizing is misleading related to the probability, severity and complexity of Cymbalta discontinuation



Free sample may perversely require an extended and disruptive discontinuation

Commonly Asked Questions

- How does Cymbalta work?
- 2. When will Cymbalta begin to work?
- Who should NOT take Cymbalta?
- 4. What other important information should I discuss with my healthcare provider?
- 5. How should I take Cymbalta?
- 6. What are the possible side effects of Cymbalta?
- 7. What happens when I stop taking Cymbalta?
- 8. Can children take Cymbalta?



7. What happens when I stop taking Cymbalta?

Cymbalta should not be stopped without talking to your healthcare provider. Stopping Cymbalta may result in side effects that may include dizziness, nausea, headache, or other potential side effects. Your healthcare provider may wish to decrease the dose slowly to help avoid these kinds of side effects.

Text evades severity of side effects, complexity of a tapered discontinuation protocol, duration of discontinuation syndrome, life management impacts

Safety Information and Boxed Warning

Cymbalta® (duloxetine HCI) is approved for the treatment of depression and generalized anxiety disorder, and for the management of diabetic peripheral neuropathic pain and fibromyalgia.

What should I talk about with my healthcare provider?

Patients on antidepressants and their families or caregivers should watch for new or worsening depression symptoms, unusual changes in behavior, thoughts of suicide, anxiety, agitation, panic attacks, difficulty sleeping, irritability, hostility, aggressiveness, impulsivity, restlessness, or extreme hyperactivity. Call your healthcare provider right away if you have thoughts of suicide or if any of these symptoms are severe or occur suddenly. Be especially observant within the first few

months of antidepressant treatment or whene

You should also know that:

Suicide is a known risk of depression and so

No warning of discontinuation complexity, severity or duration prior to the start of Cymbalta treatment

- Antidepressants may increase suicidal thoug
 adolescents, and young adults especially within the first few months of treatment or
 when changing the dose. No increased risk has been shown for adults over age
 24, and risk decreased for those over age 65.
- All patients starting therapy should be monitored appropriately and observed closely for new or worsening depression symptoms, suicidal thoughts or behavior, or unusual changes in behavior.
- Cymbalta is not approved for use in patients under age 18.

Who should NOT take Cymbalta?

You should not take Cymbalta if:

- You have recently taken a type of antidepressant called a monoamine oxidase inhibitor (MAOI)
- You have uncontrolled narrow-angle glaucoma (an eye disease)
- You are taking Mellaril * (thioridazine)

"Missing" Bullets

- What is the discontinuation process?
- What are the discontinuation risks?
- How long can discontinuation symptoms last?
- How could discontinuation symptoms affect my daily functioning?

What other important information should I discuss with my healthcare provider?

Before starting Cymbalta, tell your healthcare provider:

- about all of your medical conditions, including kidney problems, glaucoma, or diabetes
- · about your alcohol use
- if you are taking nonprescription or prescription medicines, including those for migraine, to address a possible life-threatening condition
- if you are taking NSAID pain relievers, aspirin, or blood thinners. Use with Cymbalta may increase bleeding risk
- if you are pregnant, plan to become pregnant during therapy, or are breastfeeding an infant

While taking Cymbalta, tell your healthcare provider:

- if you have itching, right upper belly pain, dark urine, yellow skin/eyes, or unexplained flu-like symptoms, which may be signs of liver problems. Severe liver problems, sometimes fatal, have been reported
- if you have high fever, confusion, and stiff muscles to address a possible life-threatening condition
- · before stopping Cymbalta or changing your dose
- if you experience dizziness or fainting upon standing, especially when first starting Cymbalta or when increasing the dose. Your healthcare provider may periodically check your blood pressure while you are taking Cymbalta

If you have any questions, talk to your healthcare provider before taking Cymbalta.

What are the possible side effects of Cymbalta?

The most common side effect of Cymbalta was nausea. For most people who had it, the nausea was mild to moderate. Other common side effects included dry mouth, sleepiness, constipation, decreased appetite, and increased sweating. This is not a complete list of side effects.

Please read additional Safety Information and Boxed Warning for a complete list.

Merely cycles the consumer to the same (paucity of) information on several linked pages

Cymbalta PI

2.4 Discontinuing Cymbalta

Symptoms associated with discontinuation of Cymbalta and other SSRIs and SNRIs have been reported. A gradual reduction in the dose rather than abrupt cessation is recommended whenever possible [see Warnings and Precautions (5.6)].

5.6 Discontinuation of Treatment with Cymbalta

Discontinuation symptoms have been systematically evaluated in patients taking duloxetine. Following abrupt or tapered discontinuation in placebo-controlled clinical trials, the following symptoms occurred at a rate greater than or equal to 1% and at a significantly higher rate in duloxetinetreated patients compared to those discontinuing from placebo: dizziness, nausea, headache, fatigue, paresthesia, vomiting, irritability, nightmares, insomnia, diarrhea, anxiety, hyperhidrosis and vertigo. During marketing of other SSRIs and SNRIs (serotonin and norepinephrine reuptake inhibitors), there have been spontaneous reports of adverse events occurring upon discontinuation of these drugs, particularly when abrupt, including the following: dysphoric mood, irritability, agitation, dizziness, sensory disturbances (e.g., paresthesias such as electric shock sensations), anxiety, confusion, headache, lethargy, emotional lability, insomnia, hypomania, tinnitus, and seizures. Although these events are generally self-limiting, some have been reported to be severe. Patients should be monitored for these symptoms when discontinuing treatment with Cymbalta. A gradual reduction in the dose rather than abrupt cessation is recommended whenever possible. If intolerable symptoms occur following a decrease in the dose or upon discontinuation of treatment, then resuming the previously prescribed dose may be considered. Subsequently, the physician may continue decreasing the dose but at a more gradual rate [see Dosage and Administration (2.4)].

Consumer is referred to the PI. Can he be expected to parse this for a benefit-risk assessment?

4) Lilly has not developed and fielded a clinically proven protocol for safely discontinuing Cymbalta

- Onus for discontinuation management is placed on the physician
 - Many physicians are not aware of any protocol
- Lilly does not offer small dose Cymbalta formulations to facilitate tapering
 - Patient required to open capsules and count drug beads
 - Patient may require compounding pharmacy services
 - At his/her expense
 - Tapering may take weeks or months
- Lilly "Help" system provides no value to the distressed patient experiencing discontinuation syndrome
 - 800 number only/No E-mail possible
 - Precludes generation of an auditable electronic "paper trail" of complaints
 - Call center staff minimize the nature of discontinuation
 - Distressed patient is even more distressed by the encounter
 - Lilly will not provide copies of transcripts or notes taken during the phone calls
 - Calls are recorded
 - Agents will not disclose their names or the names of the their supervisors
 - Evasion of accountability

Cymbalta Discontinuation Process Observations/Objectives

Observations

- 1. Physicians still not aware of discontinuation scope, severity, protocols
- 2. Patients not fully informed about ALL potential side effects
- 3. Desperation support sought via the internet not Eli-Lilly
- 4. Lilly systemically evades the Cymbalta discontinuation issue
- 5. Fibromyalgia wave of Cymbalta discontinuation distress is inevitable
 - Fibromyalgia CME course presented by physician with financial ties to Eli-Lilly
 - Presentation emphasizes negative side effect profile of Pregabalin
 - http://www.cmellc.com/onlinesymposia/w08481/Slides 08USPC 13-0.pdf
 - Absolutely NO mention of similar and unique Duloxetine side effects

What's wrong with this picture?

Objectives

- This brief presentation catalyzes FDA to examine the Cymbalta benefit-risk profile
- FDA conduct a cross product comparative assessment that incorporates discontinuation as a risk factor
- FDA mandates more transparent Cymbalta benefit-risk information to physicians and consumers
- FDA mandates Lilly develop and propagate a clinically proven Cymbalta discontinuation protocol
- FDA mandates Lilly provide an auditable email system to collect comments and complaints related to Cymbalta

Cymbalta Discontinuation Representative Web Anecdotes

- I'm finally completely off Cymbalta. I can't believe I actually made it thru the horrible withdrawal symptoms. It took eight horrible weeks. ..The worst part for me was what I call brain zapping. It felt like electrical currents going through my brain every time I moved my head. I thought I was going crazy...I'm having a major problem with my anger towards Eli Lily. I even e-mailed the FDA about how awful the withdrawal was. Why don't the doctors warn us about this? I still have a problem with depression, but I'm scared to try another med...
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=35#comments
- I have been weening myself off cymbalta for the last 3 weeks and it has been hell!! Not only have I had crazy mood swings I have been having muscle spasms around my face... I was on 30mg, and started opening the caps and taking half, well I have been out for 3days and feel very uncomfortable. How can doctors perscribe meds without seriously thinking of the side effects. Cymbalta only made me more of a mess, I had mood swings daily. To anyone planning on taking this med please read all about it!!!!
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=35#comments
- I wonder why Cymbalta did not have more extensive "testing" before prescribed to us. I was slowly weaned under Doctor's care but stilled became extremely ill. I suffered "seizures" on top of every thing else. I'm still on my road to recovery (4 weeks completely off Cymbalta). I'm still weak and suffer withdrawals or the effects of seizures but I'm under a good Neurologist care. My situation was recorded and reported to the FDA. The FDA did call me (I was shocked). They appear to NOW be investigating Cymbalta (so report on their web site). I was on Cymbalta for a rare ear disease and ended up almost dying. Never again will I allow a drug to enter my body unless I have done research. Good luck to all going through this I hope it's easier than my 10 month journey. I hope to become a positive activist and I am researching every aspect of this drug to try to "comprehend" the impact this drug is having. It's real bad!

http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=35#comments

- Please tell me exactly how to report to the FDA what Cymbalta has done to me. I am so angry and need to
 let someone know that because of being on a high dose of Cymbalta (120mg) for two years, almost
 destroyed my life. I lost my job and my marriage because of it. I don't want anyone else to have to go
 through what I have gone through while taking it and coming off of it!
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=35#comments
- ...im on 10mg of prozac and have been taking it for 3 days. im leaving for college on Sept 20 and need this to go away. I feel horrible. i feel awful and sick-feeling and im getting HORRIBLE headaches. What should i do about the withdrawal symptoms? Im Female and 18 years old. i was taking cymbalta for generalized anxiety. same reason for the prozac. ANY help would be MORE than welcome
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=37#comments
- Also wanted to add that I went off it without my internist knowing. He would have just tried to convince me to stay on it. Right now I'm just slightly angry with him for not sharing "ALL" the information about the withdrawal symptoms but I think most doctors do that. Perhaps they themselves don't even know about the withdrawals or they downplay it. Easy to do when you have not experienced it.
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=38#comments
- I am so glad to have found this site!! I have been trying to get off of cymbalta for several months now. I am currently taking 30mg every other day...which I do somewhat okay with. Once I don't take it for 2 days the withdrawl begins. I have all the symptoms listed by previous "bloggers" and then some. A few months ago i stopped taking it for about 4 days and ended up having to leave work and go to the doctor. He hooked me up to an ekg and I was having severe heart palpatations. He asked me if anything in my daily routine had changed and we finally pinpointed the cymbalta. I hate this drug and want to be rid of it so so badly. I just don't know how to stop taking it!! I work full time and have 2 small children at home. I can't afford to be out of commission and I sure can't seem to function without taking this medication. Can anyone offer some solution?? I am so afraid to take the final "leap" and cut it out completely. HELP!!!

- let me tell you.. this site has been a savour to me.. I had to cold turkey stop taking Cymbalta.. due to unemployment and no insurance.. so couldn't afford it anymore..and it has been HELL... the brain shivers.. nausea..lack of interest in anything.. aches and pains.. the amount of emotions and instability I have and had.. has made the last month and a half.. rough.. to say the very smallest of words.. needless to say.. I signed the ipetition.. and anything else I can do.. I want to know.. people that are on this drug need to know prior to..the experience I have had.. felt like I was having a heart attack.. stroke.. couldn't make decisions.. that is HEll considering I am the one people come to for advise..and to help.. that I couldn't even help myself..or explain why I was feeling this way.. NEVER want anyone to feel that way.. see I am jumping all over the place with thoughts.. and still having effects.. after a month and a half...
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=37#comments
- i was placed on cymbalta 6 weeks ago.. first the lower dosage and then on the third week to the 60 milligrams... thought i was feeling better and then started to get brain zaps and felt numb.. i stopped taking it... i thought since i had just been on it a little over 6 weeks i would be fine.... i started having the sweats and the heart palpitations and the brain zaps and was crying.... this all happened at work... i came home and i was so sick i didn't know what to do.. my heart was beating so fast i could feel it in my neck... i laid on the sofa and asked God to help me think of something to do... i was not able to go to the doctor.. i had some benadryl and i took some... helped a little... i have not worked a day since last tuesday and then for only 2 hours. i have a doctors appointment 2 morning with a new doctor.. if he suggests any antidepressants i will not take them ever again. depression is better than this was. i actually thought i was dying.. this is the worst stuff in this world.... will be getting me some dramamine 2morrow just in case....
 - http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=44#comments
- I have only been on this drug for 2 months and missed a few doses by accident and on those days had real dizzy sick spells then realised it was down to not taking the drug and then got very worried that if this was after 1 2 days what would it be like after being on the durg long term so I stopped cold turkey as was only on 20 grams one days and 40g the next building up after a long time of being on prozac as was still suffering long term depression. But after feeling these vile obscene withdrawals it was like a wake up call to stop relying on drugs to solve my probems as life is to short to feel this horrible? I have so far on only day 4 of wihdrawing suffered, dizzy spells, nausea, sweats, flushes crying fits and constant buzzing in my ears not to mention horiffic nightmares and no concentration span. Am now feeling very cross with my G.P for not warning me at all about these effects i just feel like I am not safe to be left alone at the momoment feeling this dizzy. I am going to try Benadryl now asap. But just want to warn anyone NOT TO START TAKING THIS DRUG IT IS HARSH. I am now wondering how much longer i am likely to feel this way please can someone advise me when you stop feeling dizzy?

http://www.whatwinnersdo.com/severe-cymbalta-withdrawal-symptoms/?cp=38#comments