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Paroxetine

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A Double-blind, Multicentre Placebo Controlled Study of Paroxetine in Adolescents with Unipolar Major Depression

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Final Clinical Report

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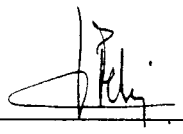
Signature Page

Report Title: A Double-blind, Multicentre Placebo Controlled Study of Paroxetine in Adolescents with Unipolar Major Depression

I have read this report and confirm that to the best of my knowledge it accurately describes the conduct and results of the study.



Report Synopsis

Study Title

A Double-blind, Multicentre Placebo Controlled Study of Paroxetine in Adolescents with Unipolar Major Depression

Investigator(s) and Center(s)

The study was carried out in 33 centres in Belgium, Italy, Spain, United Kingdom, Holland, Canada, South Africa, United Arab Emirates, Argentina and Mexico.

Publication

None published as of August 1998.

Study Dates

26th April 1995 to 15th May 1998.

Objective(s)

The primary objective of the study was to compare the efficacy of paroxetine and placebo in the treatment of adolescents with unipolar, major depression.

The secondary objective of this study was to assess the safety and tolerability of paroxetine in adolescents with unipolar, major depression.

Study Design

This was a multicentre, double-blind, randomised, parallel group, placebo controlled study to compare the efficacy and safety of paroxetine (20-40mg daily, flexible dose) and placebo in the treatment of adolescents with unipolar, major depression as defined by DSM-IV criteria. After Screening patients entered a 2 week, single-blind, placebo run-in period. Eligible patients were then randomised to receive paroxetine (20-40mg daily, flexible dose) or placebo (2:1 randomisation) for a period of 12 weeks. Patients returned to the clinic at the end

of Weeks 1, 2, 3, 4, 6, 8 and 12 for assessments of efficacy, safety, concomitant medications and general compliance with study procedures. Patients withdrawing prematurely from the study received 2 week run out medication. At the end of the study all patients were down-titrated off study medication over a period of 2 weeks and returned to the clinic for a last assessment of safety at the end of Week 14.

Study Population

Male or female patients aged between 13 years and 18 years 11 months at Screening, with a current diagnosis of unipolar, major depression as defined by DSM IV criteria, a C-GAS score <69 and a MADRS score ≥16 were eligible to enter the study.

Treatment and Administration

Study medication was formulated as capsules for oral administration twice a day. Batch numbers: paroxetine 10mg – M94002 and M96328; paroxetine 15mg – M94003; paroxetine 20mg – M94004, M95004 and M96330; placebo – CT2/4301 and M96332

Evaluation Criteria

Efficacy Parameters

The primary efficacy parameters were the proportion of patients with a 50% or greater reduction in MADRS score between baseline and study endpoint, and the change from baseline to study endpoint in K-SADS-L depression subscale. The secondary efficacy variables were: change from baseline in MADRS total score; change from baseline in CGI severity of illness score; CGI global improvement score; change from baseline in BDI and change from baseline in MFQ. All primary and secondary variables were analysed at Weeks 6, 8 and study endpoint. Please note: the protocol states analysis of the secondary variables at week 6 and endpoint only. An amendment to the reporting and analysis plan prior to database freeze added week 8 as a time point for analysis, this should have been reflected in the protocol as a protocol modification.

Safety Parameters

Safety parameters consisted of adverse experiences and assessment of vital signs and laboratory data.

Statistical Methods

The proportion of patients responding (≥50% reduction in MADRS total score) was analysed using logistic regression (PROC LOGISTIC of SAS). The model included treatment group, country group, and covariates of age and baseline score. Odds ratios and 95% confidence intervals were presented. The effect of adding treatment by country group interaction into the model was assessed with the above terms in the model. If the treatment by country group interaction was not statistically significant ($p \geq 0.1$), it was dropped from the model. Treatment by covariate and covariate by covariate interactions were assessed in a similar way.

The mean change from baseline in K-SADS-L depression subscale score, MADRS, BDI and MFQ total scores were analysed using analysis of covariance (PROC GLM of SAS) with factors treatment, country group, age and baseline score. Least squares means were compared at the 5% level and 95% confidence intervals presented for treatment differences. The effect of adding treatment by country group interaction into the model was assessed with the above terms in the model. If the treatment by country group interaction was not statistically significant ($p \geq 0.1$), it was dropped from the model. Treatment by covariate and covariate by covariate interactions were assessed in a similar way.

The changes from baseline in the CGI severity of illness (an ordered categorical rating scale) were analysed non parametrically using the Wilcoxon Rank Sum test (PROC NPAR1WAY of SAS). No adjustment was made for country grouping or covariates. The CGI global improvement scores were compared using Cochran-Mantel-Haenszel chi-square tests (stratifying by country group) at the 5% level using PROC FREQ of SAS.

Patient Disposition and Key Demographic Data

Patient disposition and key demographic data are shown below.

Patient Disposition and Key Demographic Data

	Treatment group		Total
	Paroxetine	Placebo	
Number of patients:			
Screened	-	-	324
Randomized	187	99	286
ITT populations	182	93	275
Per-protocol population	130	68	198
Completed the study (ITT)	127	69	196
Demography (ITT population)			
Females: number (%)	122 (67.0)	61 (65.6)	-
Mean age (sd): years	15.5 (1.6)	15.8 (1.6)	-
Age range: years	*12 - 19	13 – 18	-
Caucasian: number (%)	126 (69.2)	61 (65.6)	-

* Patients 377.026.00200, 377.029.00040, and 377.057.00532 were 12 years old when recruited into the study and were excluded from the per-protocol population as protocol violators.

A total of 324 patients were screened and 286 patients were randomised to study medication, 187 to paroxetine and 99 to placebo. The treatment groups were well matched for all demographic parameters. Eleven patients were not eligible to be included in the ITT population, 5 in the paroxetine group (2 due to AEs, 1 protocol violator, 1 lost to follow-up and 1 centre 007 patient) and 6 in the placebo group (2 centre 007 patients, 1 protocol violator, 1 lost to follow-up, 1 due to lack of efficacy and 1 for another reason). Of all randomised patients, similar numbers of patients withdrew during the study, 60 out of 187 in the paroxetine group (32.1%) and 30 out of 99 in the placebo group (30.3%), 55 (30.2%) and 24 (25.8%) respectively in the ITT population. Slightly more patients withdrew due to adverse experiences in the paroxetine group, 11.8% compared with 7.1% in the placebo group (11.0% and 7.5% respectively in the ITT population).

Please note that the data from the centre 007 patients was not included in the efficacy analyses due to clinical concerns over the validity of the data from this centre. The decision to exclude this data in the efficacy analysis was made prospectively, prior to database freeze.

Efficacy Results

Data Sets

Two sets of efficacy data were used, observed cases (OC) and last observation carried forward (LOCF). The OC dataset consisted of each patient's observations at each visit. The LOCF dataset was generated from the OC dataset whereby missing data were estimated by extending forward the data from the previous visit. The primary analysis population for the study was the intention-to-treat population using the LOCF dataset with the primary timepoint of interest being the Week 12 LOCF timepoint. A confirmatory analysis based on the per-protocol analysis was carried out on the primary efficacy variables.

Primary Efficacy Variable(s)

No clinically or statistically significant differences were detected between paroxetine and placebo in either of the primary efficacy variables.

The results are summarised below:-

Proportion of patients with a 50% or greater reduction from baseline in MADRS total score

Dataset Timepoint	**Treatment groups**						
	Paroxetine		**Placebo**		**Adjusted Odds Ratio**	**95% CI (Paroxetine/ Placebo**	**P-value**
	n/N	**%**	**n/N**	**%**			
LOCF dataset							
Week 12	107/177	60.45	53/91	58.24	1.109	(0.653,1.884)	0.702
OC dataset							
Week 12	94/126	74.60	47/66	71.21	1.161	(0.590, 2.285)	0.666

No statistically significant treatment differences were observed at any time point. At the week 12 endpoint in the ITT LOCF population, 60.5% of the paroxetine patients and 58.2% of the placebo patients had responded. These findings were confirmed by the OC dataset and in the per protocol population.

The only statistically significant interaction found was treatment by age ($p=0.002$). The results from re-analysis of the dataset split by age group (≤ 16 and > 16 years old) showed that in the younger group the proportion of responders was

higher in the placebo group, although this was not statistically significant. In the older age group, the proportion of responders was higher in the paroxetine group.

Proportion of Patients with a ≥ 50% reduction in MADRS Total Score by Age Group at Week 12:

Age Group ≤ 16 years Old

Dataset	Paroxetine Responders	Placebo Responders	Adjusted Odds Ratio	95% CI (Paroxetine /Placebo)	P-value
LOCF	65/118 (55.08%)	37/57 (64.91%)	0.609	(0.309,1.201)	0.153
OC	56/80 (70.00%)	33/45 (73.33%)	0.815	(0.355,1.870)	0.629

Age Group > 16 years Old

Dataset	Paroxetine Responders	Placebo Responders	Adjusted Odds Ratio	95% CI (Paroxetine /Placebo)	P-value
LOCF	42/59 (71.19%)	16/34 (47.06%)	-	-	-
OC	38/46 (82.61%)	14/21 (66.67%)	-	-	-

NB – Model could not be fitted due to lack of responders per treatment group.country group combination.

The odds ratios, confidence intervals and p-values were obtained using logistic regression adjusting for country group, baseline MADRS total score and age (in years).

The per-protocol population confirmed the ITT LOCF results i.e. that there was no overall evidence of treatment differences. However, the statistically signficant treatment by age interaction confirmed that there appeared to be differences between treatment groups depending on the patients age.

Kiddie-SADS-Lifetime Schedule depression subscale Score at Week 12:

Dataset	Treatment groups				
	Paroxetine N, adjusted mean, (S.E.)	**Placebo N, adjusted mean, (S.E.)**	**Difference in Adjusted Means**	**95% CI (Paroxetine/ Placebo**	**P-value**
LOCF	171, -9.330 (0.54)	88, -8.923 (0.70)	-0.408	(-2.007,1.192)	0.616
OC	126, -10.824 (0.49)	66, -10.167 (0.63)	-0.657	(-2.126,0.812)	0.379

The P-values were obtained using analysis of covariance adjusting for country group, baseline K-SADS-L depression subscale score and age (in years). The confidence intervals were obtained using adjusted means.

At Endpoint, the difference between the treatment groups in the adjusted means (see appendix I) of –0.41 in the ITT LOCF population did not achieve clinical or statistical significance. This was confirmed by the ITT OC dataset and the per protocol population.

Again, the only statistically significant interaction found was treatment by age (p=0.020 ITT LOCF). The dataset was re-analysed, split by age group. As with the other primary parameter, although there was no evidence of overall treatment differences, in the older age group, the mean change from baseline was larger in the paroxetine group.

Change from Baseline in K-SADS-L Depression Subscale Score by Age Group at Week 12:

Age Group ≤ 16 years Old

Dataset	Paroxetine N, Adjusted Mean (S.E.)	Placebo N, Adjusted Mean (S.E.)	Difference in Adjusted Means	95% CI (Paroxetine /Placebo)	P-value
LOCF	113, -8.416 (0.61)	55, -9.384 (0.83)	0.968	(-0.954, 2.891)	0.321
OC	80, -10.081 (0.61)	45 -9.797 (0.77)	-0.285	(-2.141, 1.571)	0.762

Age Group > 16 years Old

Dataset	Paroxetine N, Adjusted Mean (S.E.)	Placebo N, Adjusted Mean (S.E.)	Difference in Adjusted Means	95% CI (Paroxetine /Placebo)	P-value
LOCF	58, -11.163 (1.25)	33, -8.438 (1.47)	-2.725	(-5.641,0.192)	0.067
OC	46, -12.060 (0.93)	21, -10.899 (1.20)	-1.161	(-3.681,1.358)	0.360

The p-values were obtained using analysis of covariance adjusting for country group, baseline K-SADS-L depression subscale score and age (in years). The confidence intervals were obtained using adjusted means.

Results from the per protocol analyses confirmed those obtained from the ITT population.

Secondary Efficacy Variable(s)

No overall treatment differences between paroxetine and placebo were detected for any of the secondary efficacy variables. However, there did appear to be some evidence of treatment by age interactions as seen for the primary efficacy variables (See Appendix I), and hence for consistency all variables were additionally analysed by age group.

Safety Results

Adverse Experiences

Similar proportions of patients from both treatment groups experienced adverse events (65.4% of paroxetine patients compared with 59.1% of placebo patients; ITT population).

Serious Adverse Experiences

Twenty two (12.1%) patients in the paroxetine group and 6 (6.5%) patients in the placebo group experienced serious emergent adverse events in the ITT population. None of the SAEs were fatal.

Withdrawals Due to Adverse Experiences

For all randomised patients, 22 out of 187 (11.8%) patients in the paroxetine group withdrew due to adverse experiences compared to 7 out of 99 (7.1%) in the placebo group. This difference was not statistically significant.

Vital Signs

Changes in mean vital signs values between baseline and week 12 were small for both treatment groups and of no clinical concern, and there were no differences between the treatment groups regarding vital signs values meeting sponsor-defined clinical concern criteria.

Laboratory Tests

Similar proportions of patients in the two treatment groups had one or more laboratory value meeting sponsor-defined clinical concern criteria (paroxetine 29.1%, placebo 33.3%).

Conclusion(s)

The results failed to show any superiority for paroxetine over placebo in the treatment of adolescent depression. A significant age by treatment interaction was detected in both of the primary efficacy variables and most of the secondary, indicating evidence of a different treatment effect dependent on age. Therefore conclusions drawn on the data presented overall should be treated with caution.

Paroxetine was well tolerated with no unexpected finding regarding adverse experiences, vital signs or laboratory values.

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List of Abbreviations & Definitions

Abbreviation	Unabridged Term(s)
AE	adverse experience
ALT (SGPT)	alanine aminotransferase
AST (SGOT)	aspartate aminotransferase
BDI	Beck Depression Inventory
BP	blood pressure
bpm	beats per minute
BUN	blood urea nitrogen
CATMOD	Categorical Modeling
C-GAS	Child Global Assessment Scale
CGI	Clinical Global Impression
CI	confidence interval
CNS	Central Nervous System
CRF	Case Report Form
DBP	diastolic blood pressure
DSM-IV	Diagnostic and Statistical Manual of Mental Disorders-IV
ECG	electrocardiogram
ECT	electroconvulsive therapy
EEG	electroencephalogram
ERC	Ethics Review Committee
Euroqol	European Quality of Life Scale

FDA	Food and Drug Administration
GLM	General Linear Modeling
HR	heart rate
ITT	intention-to-treat
K-SADS-L	Kiddie-SADS-L; Schedule for affective disorders and schizophrenia for school age children (Lifetime)
LOCF	Last Observation Carried Forward
MADRS	Montgomery Asberg Depression Rating Scale
MAO	monoamine oxidase
MAO(I)	monoamine oxidase (inhibitor)
MFQ	Mood and Feelings Questionnaire
NA	not applicable
NHP	Nottingham Health Profile
OC	Observed Cases
OCD	Obsessive Compulsive Disorder
PID	patient identification
RBC	red blood cell
SAE	Serious Adverse Experience
SB	SmithKline Beecham Pharmaceuticals
SBP	systolic blood pressure
SD (sd)	standard deviation
SE (se)	standard error
SEM	standard error of the mean

SSRI	selective serotonin re-uptake inhibitor
WHO	World Health Organisation
WBC	white blood cell
adverse experience	An adverse experience includes any noxious, pathological or unintended change in anatomical, physiological or metabolic functions as indicated by physical signs, symptoms and/or laboratory changes occurring in any phase of the clinical study whether associated with the study drug or placebo and whether or not considered drug related. This includes an exacerbation of pre-existing conditions or events, intercurrent illnesses, drug interaction or the significant worsening of the disease under investigation that is not recorded elsewhere in the case record form under specific efficacy assessments.
Baseline	The last available value before administration of active study treatment.
serious adverse experience	A serious adverse experience is any event which is fatal, life threatening, disabling or incapacitating or results in hospitalisation, prolongs a hospital stay or is associated with congenital abnormality, cancer or overdose (either accidental or intentional). In addition any experience which the investigator regards as serious or which would suggest any significant hazard, contraindication, side effect or precaution that may be associated with the use of the drug was to be documented as a serious event.

1 Introduction

Depression in children and adolescents can be a chronic, debilitating condition with major impact on family, social and intrapsychic life. Early detection facilitates early treatment; a key to preserving a child's continued growth and development.

Similarities between adolescent and adult depression in symptomatology, family history and prospective course provide a compelling rationale for investigating the efficacy of antidepressant drug therapy in young patients with depression. However, the evidence from trials in adolescents does not support drug efficacy [1], [2], [3], although existing studies have collectively evaluated fewer than 200 patients.

This difference in response between adults and younger patients has been the subject of several reviews [4], [5], [6] and three main reasons have been suggested: (a) deficiencies in study design, methodology and conduct; (b) the adequacy of diagnostic criteria and various nosological problems; and (c) developmental issues in that children and adolescents who suffer from adult-like depression may respond in a pharmacologically different manner due to quantitative and/or qualitative developmental differences in neurotransmitter/receptor systems.

Paroxetine is a novel phenylpiperidine derivative developed by SB as an antidepressant. It belongs to the Selective Serotonin Reuptake Inhibitor (SSRI) class of antidepressants and registration approval for this indication has been granted in over 80 markets worldwide.

Pharmacological and biochemical studies *in vitro* and *in vivo* have shown that paroxetine, unlike conventional tricyclic antidepressants, exhibits a high degree of selectivity and potency for serotonin re-uptake processes with little affinity for catecholamine mechanisms.

Paroxetine is well tolerated, with nausea, headache, sweating and somnolence being the most commonly reported adverse effects, which are generally mild and transient in nature and rarely lead to discontinuation of therapy. Paroxetine is associated with significantly fewer anticholinergic effects than the tricyclic antidepressants and produces no clinically significant effects on the EEG or ECG in volunteers or in patients with depression [7].

Paroxetine has been studied in clinical trials in over 6000 adult patients with major depressive illness, but has not been systematically studied in adolescent depression in well controlled studies. The present study examines paroxetine therapy in adolescents with unipolar major depression and attempts to avoid the perceived flaws of previous studies.

2 Objectives

2.1 Primary Objective

To compare the efficacy of paroxetine and placebo in the treatment of adolescents with unipolar, major depression.

2.2 Secondary Objective

To assess the safety and tolerability of paroxetine in adolescents with unipolar, major depression.

3 Methodology

3.1 Study Design

This was a multicentre, double-blind, randomised, parallel group, placebo controlled study to compare the efficacy and safety of paroxetine (20-40mg daily, flexible dose) and placebo in the treatment of adolescents with unipolar, major depression as defined by DSM-IV criteria[1].

Patients who met the inclusion and exclusion criteria were enrolled into a 2 week, single-blind, placebo run-in period. Eligible patients were then randomised to receive paroxetine (20-40mg daily, flexible dose) or placebo (2:1 randomisation) for a period of 12 weeks. Patients returned to the clinic at the end of Weeks 1, 2, 3, 4, 6, 8 and 12 for assessments of efficacy, safety, concomitant medications and general compliance with study procedures. Patients withdrawing prematurely from the study received 2 weeks of run out medication. At the end of the study all patients were down-titrated off study medication over a period of 2 weeks and returned to the clinic for a last assessment of safety at the end of Week 14.

3.1.1 Protocol Amendment/Modification

The original protocol was approved on 6 February 1995. This was followed by one protocol amendment and one protocol modification[2].

Protocol Amendment

The protocol amendment, which applied to all centres, was approved on 16 January 1996 and was incorporated into the protocol.

Initial recruitment into the study was slow and this amendment was made to increase the rate of enrollment. Changes consisted of a small increase in the maximum allowed age of patients from 17 years 11 months to 18 years 11 months, limiting the wash-out period for psychotropic medication to two weeks, and allowing the K-SADS-L scale to be completed over Visits 2 and 3.

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[1] Appendix A contains the protocol and sample case report forms.

[2] Appendix A contains the protocol amendments/modifications

Protocol Modification

This modification, which applied to all centres, was approved on 21st April 1997.

The modification related to the Socio-Economic questionnaire data being collected as part of this study. Problems were arising because some questions were being asked at each visit but different answers were being recorded (e.g. Question 1 "Where does the patient live ?"), and there were also inconsistencies between the information collected in different questions (eg. Questions 2 and 3). As a result it was decided to modify some of the questions and data collected.

3.2 Investigators

The study was carried out in 33 centres in Belgium, Italy, Spain, United Kingdom, Holland, Canada, South Africa, United Arab Emirates, Argentina and Mexico (only 32 centres randomised patients to study medication). A list of investigators with their affiliations is shown in Appendix A. The investigators were chosen for their interest in the study and their ability to enter eligible patients[3]. The centres in Argentina, Mexico and the United Arab Emirates became involved approximately one year after study start in order to aid recruitment.

It was prospectively decided prior to database freeze not to include the data from centre 007 in the efficacy analyses due to concerns over the validity of the data from this centre. The CRFs for 3 of the patients could not be recovered from the site and this has resulted in the safety data from the patients not being reported. The data anomalies are explained in footnotes to the relevant tables where necessary.

3.3 Ethics

The study was conducted in accordance with Good Clinical Practices[4] and the Declaration of Helsinki as amended in Hong Kong in 1989. The protocol and statement of informed consent were approved by an Institutional Review Board (or Ethics Committee) prior to each center's initiation. Written informed consent[5]

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[3] Appendix A contains the CVs of the principal investigators.

[4] as stated in EU CPMP for European multi-national studies and 21 CFR for studies filed to the US IND.

[5] Appendix A contains the protocol and the sample informed consent is an appendix to the protocol.

was obtained from each patient and their legal guardian prior to entry into the study. Case report forms were provided for each patient's data to be recorded.

3.4 Eligibility Criteria

3.4.1 Inclusion Criteria

Patients had to fulfil the following criteria to be eligible to enter the study:

1 Male or female hospital outpatients aged between 13 years and 18 years 11 months at the time of Screening. “Day patients” or patients staying overnight to complete all study assessments for practical purposes e.g. traveling long distances, were permitted.

2 Current diagnosis of unipolar, major depression as defined by DSM IV criteria.

3 A score of under 69 on the C-GAS.

4 MADRS score of 16 or more.

5 Patients must have given written informed consent to participate in the study, and written informed consent was also to have been obtained from the patient’s legal guardian.

6 A negative pregnancy test for female patients if required by the local Ethical Committee or law.

3.4.2 Exclusion Criteria

Patients were excluded from the study for the following reasons:

1 Patients who had not yet, in the opinion of the investigator, entered puberty.

2 Patients with the following diagnosis;

- Persistent conduct disorder in childhood, i.e. as the primary disorder, or a history of non-compliance.
- Autism or pervasive mental disorder.
- Current organic psychiatric disorder including schizophrenia and epilepsy.

- Serious suicidal ideation. Patients with a history of suicide attempt but who were not considered a significant risk now, could be included.

- OCD, panic, social phobia or post traumatic stress disorder which had preceded the diagnosis of depression. i.e. depression was to be the primary diagnosis and not a subsequent occurrence to any of the above conditions.

3 Patients with medical illness which, in the opinion of the investigator, contraindicated the use of paroxetine e.g. uncontrolled diabetes, severe cardiovascular, renal, hepatic, gastrointestinal, metabolic (hyper- and hypothyroidism), neurological or autoimmune disease.

4 Patients who had previously responded to psychotherapy as treatment for depression.

5 Patients who were scheduled to undergo long-term, individualised, formal psychotherapy during the study period. Routine short-term supportive psychotherapy or family supportive therapy was permitted.

6 Patients who had received ECT in the previous 3 months or who were scheduled to receive ECT during the study period.

7 Patients who were currently dependent on illicit drugs or alcohol or with a history of dependency in the previous 6 months.

8 Patients who received psychotropics as from the date of the Screening visit, e.g. anticonvulsants, anxiolytics, neuroleptics, lithium or psychostimulants. Concomitant use of psychotropics was not permitted.

9 Current treatment with sumatriptan, oral anticoagulants or type 1C antiarrythmics, i.e. encainide, flecainide, lorcainide and propafenone.

10 Patients with long-term use of any other drug with CNS activity e.g. thyroxine, corticosteroids. Such medications used for short periods e.g. antihistamines, were to be avoided or used for the minimum length of time, at the discretion of the investigator, consistent with good medical care.

11 Patients who had received MAOIs within a 2 week period before Screening. Concurrent use of MAOIs was not permitted.

12 Patients who had previously received paroxetine.

13 Patients with a known sensitivity to SSRIs.

14 Patients who received SSRIs as from the date of the Screening visit. Concomitant use of other SSRIs during the study period was not permitted.

15 Sexually active females who were not using reliable contraception.

16 Patients who were pregnant or lactating. Patients who became pregnant while on the study were withdrawn.

17 Use of an investigational drug within 30 days or 5 half-lives of entering the study (the longer period applied). Use of an investigational drug during the study period was not permitted.

3.5 Study Medication and Administration

3.5.1 Study Medication

Details of study medication are shown below (see Table 1 Appearance, Formulation and Dosage Strength of Drugs used with Batch Numbers, page 21) .

Table 1 Appearance, Formulation and Dosage Strength of Drugs used with Batch Numbers

Study drug	Appearance	Formulation	Dose	Batch numbers
Paroxetine	Blue	Size 1 capsule	10mg	M94002, M96328
Paroxetine	Blue	Size 1 capsule	15mg	M94003
Paroxetine	Blue	Size 1 capsule	20mg	M94004, M95004, M96330
Placebo	Blue	Size 1 capsule	NA	CT2/4301, M96332

Data source: Appendix A contains the batch numbers and certificates of analysis for all doses of paroxetine and placebo

All study medication was provided in white opaque high density polyethylene (HDPE) bottles and sealed with tamper evident clic-loc closures. Both the active treatment phase and the run-out medication were presented in an outer box which comprised the patient pack. The active treatment medication and the run-out medication were separated by a fixed partition within the outer box. Bottles for the placebo run-in, active treatment phase and run-out medication were labelled with the following information:

- Protocol Number
- Patient Number (except run-in phase)
- Patient Initials (run-in phase only)
- Treatment Period
  - Day Number: (run-in phase and active treatment phase)
  - Week: (run-out phase)
- Batch Number
- Use By Date
- "Please return all unused medication at the next visit" (if appropriate)
- Dosing Instructions
- Dose Level (except run-in phase)
- Storage Instructions
- "Keep out of the reach of children under 12 years"
- Address

The study medication was to be stored at room temperature (below 25^{o}C) under secure conditions.

Placebo Run-in Phase Medication

Medication for the single-blind placebo run-in phase was supplied in one 60ml bottle containing 18 days medication. The placebo run-in phase medication was packed separately from the patient pack.

Active Treatment Phase and Run-out Phase Medication

Active treatment phase and run-out phase medication was contained in a patient pack. Each patient pack contained the entire study medication for all dose levels for one patient.

Active Treatment Phase Medication

The active treatment medication consisted of a total of 18 bottles. The bottles were labelled with plain white labels incorporating a white tear-off portion which indicated the dose level. The medication for the treatment period Day No. 1-56 was supplied in 60ml bottles and the medication for treatment period Day No. 57-84 was supplied in 120ml bottles.

Depending on the visit sequence, patients were supplied with one, two or four weeks of active treatment medication. An extra two days medication was supplied for every seven days of treatment.

The bottles were assembled in the patient pack with each treatment period in sequence from the top of the box to the fixed partition, and each dose level in sequence from left to right.

Run-out Phase Medication

Run-out medication comprised of one small box for each dose level. Each small box contained 2 x 60ml bottles of medication. The box was labelled with a white label incorporating a tear-off portion which indicated the dose level. The bottles were labelled with a plain white label and indicated the treatment period. Each bottle contained medication for an exact seven days.

3.5.2 Dosage and Administration

Patients were instructed to take 2 capsules each morning, with food, throughout the study. All patients received a 2 week period of placebo medication during the run-in phase of the study. After the placebo run-in period, patients who were randomly allocated to receive placebo continued to receive placebo during the whole phase of the study.

Patients who were randomly allocated to the paroxetine group started at dose level one. The dose could be uptitrated at weekly intervals (10 mg per week maximum) at the discretion of the investigator, according to clinical response and tolerability.

The dosage of paroxetine in the active phase of the study was identified by the following dose levels:

Dose level	Paroxetine dose	Study medication
1	20mg	2 x 10mg capsules
2	30mg	2 x 15mg capsules
3	40mg	2 x 20mg capsules

At the end of the study treatment period patients were down-titrated off study medication with a 2 week pack of “run-out” medication (blinded treatment). This was used in the following way:

Dose level at the end of treatment	Treatment during "run-out": Week 1	Week 2
Placebo	Placebo	Placebo
1 = 20mg	Placebo	Placebo
2 = 30mg	20mg	Placebo
3 = 40mg	30mg	20mg

3.5.3 Method of Blinding

Paroxetine and placebo capsules were identical in appearance and all packaging maintained the double-blind nature of the study.

Only in the event of a serious adverse experience which the investigator felt could not be adequately treated without knowing the identity of the study medication, was the medication code to be broken for a particular subject. Every effort was to be made to contact an SB Medical Monitor prior to breaking the code. If this was not possible and the situation was an emergency the investigator could break the code and contact the Medical Monitor as soon as possible thereafter.

3.6 Compliance with Study Medication

Every effort was to be made to encourage patient compliance with the dosage regimen as per protocol. All patients were instructed to return their medication pack, with any unused drug, to the investigator at their next visit. A record of the supplies dispensed, taken and returned was made in the CRF at each visit.

If there were any significant irregularities in compliance, the patient was to be withdrawn from the study. The investigator's judgement of compliance was accepted by SB (as a guideline, non-compliance is usually defined as less than 80% or more than 120% of the scheduled dose at each of 2 consecutive visits).

3.7 Prior and Concomitant Medication

All concomitant medication taken during the study was to be recorded in the CRF with indication, daily dose, and dates of administration.

3.7.1 Prior Medication

Patients were excluded from the study if they had previously responded to psychotherapy as treatment for depression, if they had received ECT in the

previous 3 months, if they were receiving long-term treatment with CNS active drugs such as thyroxine or corticosteroids (short term use could be permitted, see below), if they had received MAOIs within a 2 week period before Screening, if they had previously received paroxetine, if they had received an investigational drug within 30 days or 5 half-lives of entering the study (the longer period applied) or if they received psychotropics , (e.g. anticonvulsants, anxiolytics, neuroleptics, lithium or psychostimulants) or SSRIs from the date of the Screening visit.

3.7.2 Prohibited Medication

Patients were not permitted to receive concomitant therapy with sumatriptan, oral anticoagulants or type 1C antiarrythmics (i.e. encainide, flecainide, lorcainide and propafenone), psychotropics (e.g. anticonvulsants, anxiolytics, neuroleptics, lithium or psychostimulants) or SSRIs. Patients were also not to receive ECT or long-term, individualised, formal psychotherapy during the study period. Routine short-term supportive psychotherapy or family supportive therapy was permitted.

3.7.3 Allowed Medication

Whilst short-term use of drugs with CNS activity was to be avoided some medications e.g. antihistamines, could be used for the minimum length of time, at the discretion of the investigator, consistent with good medical care.

3.8 Study Procedures

3.8.1 Schedule of Assessments

The timing of the study visits, and the procedures to be carried out at each visit, are shown below (see Table 2 Outline of Study Assessments, page 26) .

Table 2 Outline of Study Assessments

	Placebo Run-in		Active Treatment Phase						Down Titration		EWD
Assessments	**Screen Day –14 Visit 1**	**Base Day 0 Visit 2**	**Wk 1 Day 7 Visit 3**	**Wk 2 Day 14 Visit 4**	**Wk 3 Day 21 Visit 5**	**Wk 4 Day 28 Visit 6**	**Wk 6 Day 42 Visit 7**	**Wk 8 Day 56 Visit 8**	**Wk 12 Day 84 Visit 9**	**Wk 14 Day 98 Visit 10**	
Demographic data & ECG	X										
Med/Pers/Psychiatric history	X										
DSM IV criteria & Informed consent	X										
Incl./Exclusion criteria	X	X*									
Physical examination	X								X		X
Psychotherapy evaluation	X	X	X	X	X	X	X	X	X		
Dispense study medication	Placebo	X	X	X	X	X	X	X	Run-out		Run-out
Assess compliance		X	X	X	X	X	X	X	X	X	X
C-GAS	X								X		X
MADRS & BDI	X**	X	X	X	X	X	X	X	X		X
CGI (parts 1 & 2)		X#		X		X	X	X	X		X
MFQ		X		X		X	X	X	X		X
K-SADS-L depression subscale		X##		X		X	X	X	X		X
Vital signs & AEs	X	X	X	X	X	X	X	X	X	X	X
Laboratory assessments	X	X$							X		X
Concomitant medication	X+	X	X	X	X	X	X	X	X	X	X
Euroqol		X							X		X
NHP (part I) & Socio-Economic ques		X				X		X	X		X

Data Source: Study Protocol in Appendix A of this report

EWD = Early withdrawal; Screen = Screening; Base = Baseline; Wk = Week; Med = Medical; Pers = Personal; Incl = Inclusion; ques = questionnaire

* Secondary inclusion criteria

** MADRS only

\# Part 1 only

\## Full K-SADS-L

\+ Prior and concomitant medications

$ Only if abnormal at screening

3.8.2 Prestudy Screening and Enrollment

Adolescent patients presenting with unipolar major depression were assessed as suitable candidates for this study against the inclusion and exclusion criteria (see Sections 3.4.1 and 3.4.2). A log was kept of all patients considered for the study but not entered in the trial. Reasons for excluding these patients were recorded.

The following assessments were performed at the initial Screening visit and recorded in the CRF. Written informed consent was obtained from all patients before any study specific procedures were carried out:

- Informed consent
- Demographic data
- Medical and psychiatric history
- Inclusion/exclusion criteria
- Psychotherapy evaluation
- Vital Signs (sitting and standing blood pressure and pulse, height and weight)
- Standard 12 lead ECG
- Physical examination
- Baseline adverse experiences
- Laboratory evaluation including haematology, clinical chemistry and urinalysis (abnormal values were checked by repeat testing before randomisation)
- Concomitant medication and medication discontinued in the month prior to Screening
- DSM IV criteria for unipolar major depression
- C-GAS
- MADRS

Patients who complied with the inclusion and exclusion criteria entered a single-blind run-in period of 2 weeks (± 4 days) during which they received placebo medication.

3.8.3 Baseline Phase

At the end of the run-in period, evaluations were conducted to determine eligibility to enter the treatment phase as follows:

- Secondary inclusion criteria
- Psychotherapy evaluation
- Check compliance with run-in medication
- Vital signs (sitting and standing blood pressure and pulse)
- Check the laboratory results of the Screening visit for abnormal findings
- Concomitant medication
- Assessment of adverse experiences
- MADRS
- CGI (part 1)

Patients who were still eligible for the study according to the secondary inclusion criteria i.e. fulfil MADRS >16, received no formal psychotherapy, had no clinically significant abnormal laboratory values and a negative pregnancy test continued in the study. The following Baseline assessments were then conducted:

- Full K-SADS-L (could also partly be completed at Visit 3, except for the depression subscale, which had to be completed at Visit 2)
- Beck Depression Inventory
- Mood and Feelings Questionnaire
- NHP (part I)
- Euroqol
- Socio-Economic questionnaire

3.8.4 Treatment Phases

Patients attended the clinic after 7, 14, 21, 28, 42, 56, 84 and 98 days of study medication when the following assessments were performed:

At every visit (except Day 98)

- Psychotherapy evaluation
- Dispense study medication
- Compliance with study medication
- MADRS
- Beck Depression Inventory
- Vital signs (sitting and standing blood pressure and pulse)
- Adverse experiences
- Concomitant medication

On Days 14 and 42

- CGI (parts 1 & 2)
- MFQ
- K-SADS-L depression subscale

On Days 28, 56

- CGI (parts 1 & 2)
- MFQ
- K-SADS-L depression subscale
- NHP (part I)
- Socio-Economic questionnaire

On Day 84

- CGI (parts 1 & 2)
- MFQ
- K-SADS-L depression subscale
- C-GAS
- Laboratory assessments
- Weight
- Physical examination
- Euroqol
- NHP (part I)
- Socio-Economic questionnaire

On Day 98

- Compliance with study medication
- Vital signs (sitting and standing blood pressure and pulse)
- Adverse experiences
- Concomitant medication

3.8.5 Reasons for Concluding Study

A patient was considered to have completed the study upon completion of 98 days (±4 days to allow for flexibility in scheduling of assessments) of dosing with active medication.

A patient could withdraw, or be withdrawn, from the study prematurely for the following reasons:

1 Adverse experience (Adverse experience section of the CRF was to be completed)

2 Lack of efficacy

3 Deviation from protocol

4 Lost to follow-up

5 Termination of the study by SB

6 Other

The primary reason for patient withdrawal was to be recorded in the CRF.

Every attempt was to be made to carry out the following assessments at the patient's last visit:

- Dispense run-out medication
- Compliance with study medication
- Concomitant medication
- Vital Signs (sitting and standing blood pressure and pulse)
- Physical examination
- Adverse experiences
- Laboratory assessments
- MADRS
- CGI (parts 1 & 2)
- Beck Depression Inventory
- Mood and Feelings Questionnaire
- K-SADS-L depression subscale
- C-GAS
- Euroqol
- NHP (part I)
- Socio-Economic questionnaire

3.9 Efficacy Assessments

3.9.1 Primary Efficacy Parameters

The primary efficacy parameters for this study were the proportion of patients with ≥50% reduction between baseline and endpoint in the Montgomery Asberg Depression Rating Scale (MADRS) and the change from baseline at endpoint in the Kiddie-Schedule for affective disorders and schizophrenia for school age children-Lifetime depression subscale (K-SADS-L).

MADRS

The MADRS scale consists of 10 items covering apparent sadness, reported sadness, inner tension, reduced sleep, reduced appetite, concentration difficulties, lassitude, inability to feel, pessimistic thoughts and suicidal thoughts, each of which is scored between 0 and 6 in defined steps. MADRS was assessed at every visit except at the end of the down titration phase (week 14, visit 10).

K-SADS-L Depression Subscale

The K-SADS-L questionnaire consists of 56 questions in 30 subsections relating to various aspects of the patients mood, self image, attitude to life, psychomotor agitation/retardation, sleep problems, appetite/weight loss/weight gain and suicidal ideation over the previous 2 weeks. The K-SADS-L Depression Subscale consists of 9 of these questions. Most questions are scored between 0 and a maximum of 4 to 7 in defined steps but some questions also have additional specific answers. K-SADS-L depression subscale was assessed at Baseline (full K-SADS-L scale), weeks 2, 4, 6, 8 12 and early withdrawal.

3.9.2 Secondary Efficacy Parameters

Secondary efficacy parameters were the proportion of patients with a ≥50% reduction in their baseline MADRS score at week 6 and 8, change from baseline in the MADRS score at week 6, week 8 and week 12, change from baseline in the K-SADS-L at week 6, 8 and 12, Clinical Global Impression (CGI) - severity of illness change from baseline at week 6, week 8 and week 12 and global improvement total score, Beck Depression Inventory (BDI) change from baseline at week 6, week 8 and week 12 and Mood and Feelings Questionnaire (MFQ) change from baseline at week 6, week 8 and week 12. Please note that the protocol states analysis of the secondary efficacy variables at week 6 and endpoint only. An amendment to the reporting and analysis plan prior to database freeze added week 8 as a timepoint for analysis for all the secondary efficacy variables

and added change from baseline in the K-SADS-L at weeks 6 and 8. This alteration should have been reflected in the protocol as a protocol modification.

MADRS

For details of MADRS see section above.

CGI

The CGI scale is composed of two parts:

- severity of illness, assessed on a 7-point scale and scored as follows:

1	Normal not at all ill	5	Markedly ill
2	Borderline mentally ill	6	Severely ill
3	Mildly ill	7	Among the most extremely ill patients
4	Moderately ill		

  CGI severity of illness was assessed at Baseline, weeks 2, 4, 6, 8, 12 and at early withdrawal.

- global improvement, assessed on a 7-point scale and scored as follows:

1	Very Much Improved	5	Minimally Worse
2	Much Improved	6	Much Worse
3	Minimally Improved	7	Very Much Worse
4	No Change		

CGI global improvement was assessed at weeks 2, 4, 6, 8, 12 and at early withdrawal.

BDI

The BDI scale consists of 21 items each of which is scored between 0 and 3 in defined steps. The scale is completed by the patient and relates to how they have been feeling during the past week including the day of completing the questionnaire. BDI was assessed at Baseline, weeks 1, 2, 3, 4, 6, 8, 12 and at early withdrawal.

MFQ

The MFQ consists of 34 questions which are answered by the patient by ticking boxes as true (scored as 2), sometimes (scored as 1) and not true (scored as 0). The questions relate to how they have been feeling or acting within the last 2 weeks. The MFQ was assessed at Baseline, weeks 2, 4, 6, 8, 12 and at early withdrawal.

3.10 Safety Assessments

3.10.1 Adverse Experiences

Adverse experiences (AEs) were elicited by the investigator asking the patient a non-leading question such as ***"Do you feel different in any way since the last visit?"*** If the patient responded "Yes", details of the treatment emergent AE and its severity including any change in study drug administration, investigator attribution to study drug, any corrective therapy given and outcome status were documented on the case report form. Attribution or relationship to study drug was judged by the investigator to be unrelated, probably unrelated, possibly related or related. All adverse experiences were coded from the verbatim term according to the WHO Adverse Reaction Terminology (ART) dictionary by body system and preferred term. Any patients who withdrew prematurely or completed the study with an ongoing AE or out of range labortory values, where scheduled to return for a follow-up visit 14 days after their last visit.

Serious Adverse Experiences

A serious adverse experience was defined as any event which was fatal, life threatening, disabling/incapacitating or resulted in hospitalisation, prolonged a hospital stay or was associated with congenital abnormality, cancer or overdose (either accidental or intentional). In addition any experience which the investigator regarded as serious or which would suggest any significant hazard, contraindication, side effect or precaution that may be associated with the use of the drug was to be documented as a serious event.

Any serious adverse experiences which occurred at any time during the clinical study or within 30 days (or five half lives, whichever was the longer) of receiving the last dose of study medication, whether or not related to the study drug, were to be reported by the investigator to the study monitor by telephone within 24 hours.

Investigators were not to wait to receive additional information to fully document the event before notifying SmithKline Beecham of a serious adverse experience. The telephone report was to be followed by a full written summary detailing relevant aspects of the adverse experiences in question. Where applicable, information from relevant hospital case records and autopsy reports was to be obtained.

Instances of death, cancer or congenital abnormality if brought to the attention of the Investigator at any time after cessation of study medication and linked by the investigator to the clinical trial, were to be reported to the study monitor.

Any instance of overdosage (suspected or confirmed) was to be communicated to SmithKline Beecham within 24 hours and be fully documented as a serious adverse experience. Details of any signs or symptoms and their management were to be recorded including details of any antidote(s) administered.

Patients who became pregnant during the study were to discontinue the study immediately. Patients were instructed to notify the investigator if it was determined after completion of the study that they became pregnant either during the treatment phase of the study or within 30 days or five half lives after the treatment period, whichever was longer. Whenever possible a pregnancy was to be followed to term, any premature terminations reported, and the status of the mother and child reported to SmithKline Beecham after delivery.

3.10.2 Vital Signs

Sitting and standing blood pressure (systolic and diastolic) and pulse rate were measured at each clinic visit. Body weight were measured at Screening and at Week 12.

3.10.3 Laboratory Monitoring

Blood and urine samples were taken for laboratory tests (haematology, clinical chemistry and urinalysis) at Screening, Baseline (only if abnormal at screening), Week 12 and early withdrawal.

The haematology variables measured were haemoglobin, haematocrit (PCV), red blood cell counts, total and differential white blood cell counts and platelets. The clinical chemistry variables measured were urea, creatinine, total bilirubin, alkaline phosphatase, SGPT (ALT), SGOT (AST), total protein, globulin and albumin. At the same study visits, dipstick urinalysis (blood, protein and glucose)

was to be performed, and if any results were abnormal the sample was to be sent for further analysis.

In addition a pregnancy test, where required by the local ethical committee or law, was to be performed at the Screening Visit.

Laboratory assessments were to be repeated if clinically significant abnormalities were detected and followed up until resolved or stabilised. Clinically significant abnormalities in laboratory parameters were to be recorded as adverse experiences in the patient's CRF.

3.10.4 Medical, Personal, Psychiatric History and Physical Examination

A full medical, personal and psychiatric history and physical examination was to be carried out at Screening. The physical examination was to be repeated at Week 12 and, if applicable, early withdrawal. Any adverse changes in the physical examination were to be recorded in the adverse experience pages of the patient's CRF.

3.10.5 ECG

A standard 12-lead ECG was to be carried out at Screening and all clinically significant abnormalities were to be identified.

3.11 Pharmacoeconomic Assessments

The patient completed the Euroqol at Baseline, Week 12 and, if applicable, at early withdrawal, and the NHP and Socio-Economic questionnaire at Baseline, weeks 4, 8 and 12 and, if applicable, at early withdrawal. The pharmacoeconomic data are discussed in a separate report.

3.12 Data Quality Assurance

To ensure that study procedures across all investigator sites were consistent, the protocol, case report from and safety reporting were reviewed with the investigator and his/her personnel responsible for the conduct of the study by the Company representative(s) at the investigator site. Investigator meetings were held on 3/4th April 1995 in Rome, Italy, 5th October 1996 in Dubai, United Arab Emirates and 17th December 1996 in Monterrey, Mexico.

Adherence to the protocol requirements and verification of data generation accuracy was achieved through monitoring visits to each investigator site. Subsequent data handling and reporting processes were subject to in-process Quality Control and this final clinical report has, in addition, been subject to an end-stage Quality Control review. All the above procedures were performed according to methodologies detailed in SmithKline Beecham Standard Operating Procedures (SOPs).

A Contract Research Organization (CRO), xxx xxxxxxxxxxxxx xxxx, was employed to perform the data management of the study according to an agreed contract. The CRO responsibilities were conducted according to their SOPs.

Independent Audit Statement:

This study was subject to audit by SmithKline Beecham's department of Worldwide Regulatory Compliance-GCP (WRC-GCP). A list of audited sites can be found in Appendix A.

3.13 Statistical Evaluation

3.13.1 Target Sample Size

The number of patients required for comparison of the two treatment groups in the efficacy analysis was based upon the following statistical assumptions:

- Significance level (α) = 0.05
- Power ($1-\beta$) = 0.9
- Detectable difference between paroxetine and placebo = 25%
- Response rate of paroxetine = 70%
- Response rate of placebo = 45%
- Allocation of patients (paroxetine:placebo) = 2:1

Response was defined as a decrease from baseline of 50% or greater in the MADRS score.

The number of patients completing the study period and valid for inclusion in the analysis, required under the given assumptions, was 120 paroxetine patients and 60 placebo patients, i.e. 180 patients for the entire study. Assuming an attrition

rate of 30% over the 12-week study, it was estimated that 264 patients in blocks of 6 would be randomised.

3.13.2 Method of Randomization

A computer generated randomisation list (see appendix A) was used in which treatments were allocated 2:1, paroxetine:placebo. Each investigator/centre was allocated medication in blocks of 6 consecutively numbered patient packs which were to be allocated in strict sequential order.

Randomised patients were numbered 1-286. The master randomisation list was held by SB. Individual sealed code break envelopes were held by the investigator. Treatment codes for an individual patient could be broken in case of emergency, (see Section 3.5.3 of this report).

3.13.3 Planned Efficacy Evaluations

Primary Efficacy Variables

The primary efficacy variables were:

- The proportion of patients with a 50% or greater reduction in MADRS score between baseline and study endpoint
- The change from baseline to study endpoint in K-SADS-L depression subscale

Secondary Efficacy Variables

The secondary efficacy variables were:

- The proportion of patients with a 50% or greater reduction in MADRS score between baseline, weeks 6 and 8
- Change from baseline in KSADS depressive subscale score at week 6 and 8
- Change from baseline in MADRS total score at week 6, 8 and study endpoint
- Change from baseline in CGI severity of illness score at week 6, 8 and study endpoint
- CGI global improvement score at week 6, 8 and study endpoint
- Change from baseline in BDI at week 6, 8 and study endpoint

- Change from baseline in MFQ at week 6, 8 and study endpoint

3.13.4 Methods of Analysis

Statistical Analyses

For MADRS, BDI and MFQ where any of the items were not scored, provided at least 60% were answered, the total score was calculated as follows:

$$\text{score} = \frac{\text{Number of items in the scale X Score for items answered}}{\text{Number of items answered}}$$

The proportion of patients responding (≥50% reduction in MADRS total score) was analysed using logistic regression (PROC LOGISTIC of SAS). The model included treatment group, country group, and covariates of age and baseline score. Odds ratios and 95% confidence intervals were presented. The effect of adding treatment by country group interaction into the model was assessed with the above terms in the model. If the treatment by country group interaction was not statistically significant ($p \geq 0.1$), it was dropped from the model. Treatment by covariate and covariate by covariate interactions were assessed in a similar way.

The mean change from baseline in K-SADS-L depression subscale score, MADRS, BDI and MFQ total scores were analysed using analysis of covariance (PROC GLM of SAS) with factors treatment, country group, age and baseline score. Least squares means were compared at the 5% level and 95% confidence intervals presented for treatment differences. The effect of adding treatment by country group interaction into the model was assessed with the above terms in the model. If the treatment by country group interaction was not statistically significant ($p \geq 0.1$), it was dropped from the model. Treatment by covariate and covariate by covariate interactions were assessed in a similar way.

The changes from baseline in the CGI severity of illness (an ordered categorical rating scale) were analysed non parametrically using the Wilcoxon Rank Sum test (PROC NPAR1WAY of SAS). No adjustment was made for country grouping or covariates. The CGI global improvement scores were compared using Cochran-Mantel-Haenszel chi-square tests (stratifying by country group) at the 5% level using PROC FREQ of SAS.

Visit windows

Visit days were defined by visit windows for reporting purposes. Day 0 was defined as the day on which the randomised medication was started. Assessments

taken at every visit (Vitals, MADRS, Psychotherapy evaluation, BDI) were included in the analyses at a particular timepoint if they occurred within the following visit windows relative to Day 0 (NOTE: Assessments made at baseline and Week 12 (or early withdrawal) only i.e Euroqol and CGAS scales, were also slotted as below for the purposes of listings. However, only Week 12 was tabulated)

Pre-treatment = < day -3
Baseline = days -3 to 0
Week 1 = days 1 to 10
Week 2 = days 11 to 17
Week 3 = days 18 to 24
Week 4 = days 25 to 35
Week 6 = days 36 to 49
Week 8 = days 50 to 70
Week 12 = days 71 to 91
>Week 12 = > day 91

Assessments taken fortnightly initially, then monthly (CGI, KSADS, MFQ) were included in the analyses at a particular timepoint if they occurred within the following visit windows relative to Day 0:

Pre-treatment = < day -3
Baseline = days -3 to 0
Week 2 = days 1 to 21
Week 4 = days 22 to 35
Week 6 = days 36 to 49
Week 8 = days 50 to 70
Week 12 = days 71 to 91
> Week 12 = > day 91

Assessments taken monthly (Socioeconomic questionnaire, NHP) were included in the analyses at a particular timepoint if they occurred within the following visit windows relative to Day 0:

Pre-treatment = < day -3
Baseline = days -3 to 0
Week 4 = days 1 to 49
Week 8 = days 50 to 70
Week 12 = days 71 to 91

> Week 12 = > day 91

If multiple observations for a patient fell into one visit window, then the last (furthest from the start of the study) observation was used to represent the patient's visit for that time period in the tabulations and analyses; however, all values are presented in the data listings. If a patient had an assessment falling into the pre-treatment window but none into the baseline window, then the pre-treatment value was used as the baseline.

Efficacy assessments performed more than 7 days after the last dose of randomised medication and safety assessments performed more than 14 days after the last dose of randomised medication were excluded from the tabulations and analyses but are presented in the data listings.

3.13.5 Populations/Data Sets to be Evaluated

Patient Populations

Two patient populations, intention to treat (ITT) and per protocol, were defined as follows. The intention to treat population was the primary population in the analysis.

Intention to Treat

All patients who were randomised and received at least one dose of double-blind study medication and for whom at least one on-treatment assessment was available were included in the intention to treat population.

Per Protocol

Those intent to treat patients who met the criteria below were included in the per protocol population. The identification of patients thus excluded was done blind to treatment allocation. The per protocol population was only analysed with respect to the primary efficacy variables.

The criteria for inclusion in the per protocol population were:

a No major protocol violations exist with respect to inclusion and exclusion criteria

b Duration of active treatment was at least 6 weeks (36 days) (please note: an amendment to the reporting and analysis plan on 26th June 1996 prior to

database freeze lengthened the duration of active treatment from 3 weeks to 6 weeks, this should have been incorporated into the protocol as a protocol modification)

c There was no concomitant use during the study of the following medications:

- MAO inhibitors
- Psychotropics e.g. anticonvulsants, anxiolytics, neuroleptics, lithium, psychostimulants
- Long-term use of other drugs with CNS activity e.g. thyroxine
- Short-term use of such drugs e.g. antihistamines, should be avoided or used, at the discretion of the investigator, with the minimum length of time consistent with good medical care
- Other SSRIs
- Hypnotics
- Investigational drug i.e. without a product licence

d Patient was compliant (non-compliance was defined as less than 80% or more than 120% of the scheduled dose at each of 2 consecutive visits)

Datasets

Two datasets were considered in the analysis of the efficacy data - the OC dataset and the LOCF dataset. The primary analysis was performed on the ITT LOCF dataset with the LOCF Week 12 timepoint being the primary timepoint of interest. A confirmatory analysis based on the per protocol analysis was carried out on the primary efficacy variables.

The OC dataset consisted of each patient's observations at each visit (Observed Cases). The LOCF dataset was generated from the OC dataset whereby missing data were estimated by extending forward the data from the previous visit (Last Observation Carried Forward). If the first visit on active treatment was missing then the baseline visit was not used to extend forward.

3.13.6 Safety Evaluations

Adverse Experiences

Adverse experiences (AEs) were coded using the ADECS (COSTART based) classification to give a body system and preferred term for each event. Proportions of patients with emergent adverse events are presented by treatment group. An emergent event was defined as one with a start date on or after the first day of randomised medication.

Experiences are categorised according to onset day as follows:

- onset during active treatment phase (and prior to start of down titration phase)
- onset during the down titration phase

Gender specific AEs contain a correction for gender in the calculation of percentages for the preferred term tables.

Numbers of patients with serious adverse experiences (for definition see Section 6.10.1), patients who died, patients with emergent events rated severe by the investigator, patients with events thought to be drug related by the investigator and patients withdrawn from the study due to adverse experiences were recorded.

Vital Signs

Mean changes from baseline in blood pressure, pulse rate and weight have been tabulated. In addition, abnormalities were flagged using normal ranges and changes from Baseline (Day 0) as shown below (see Table 3 Criteria for Assessment of Vital Signs, page 44) .

Table 3 Criteria for Assessment of Vital Signs

Parameter	Normal range	Pre-determined change from baseline	
		Decrease	Increase
Systolic BP (mmHg)	90-180	≥30	≥40
Diastolic BP (mmHg)	50-105	≥20	≥30
Pulse rate (bpm)	50-120	≥30	≥30
Weight	NA	≥7%	≥7%

Laboratory evaluations

Abnormal values were flagged using the limits detailed in Section 6.10.1 and counts made by treatment group of the flagged values.

3.13.7 Other Evaluations

The following pharmacoeconomic data were summarised. No statistical analysis was carried out.

Euroqol

Total and change from baseline in Euroqol score.

Nottingham Health Profile (NHP)

Change from baseline in the (unweighted) domain scores: energy, pain, emotional reactions, sleep, social isolation, physical mobility.

Socio-Economic Questionnaire

Socio-economic data including living arrangements, employment status, school attendance and freetime activity were summarised by treatment group.

4 Study Population

4.1 Study Dates

The study started on 26th April 1995 and the last study visit was on 15th May 1998.

4.2 Patient Disposition

4.2.1 Number and Distribution of Patients

A total of 324 patients entered the study at 33 centres in Belgium, Italy, Spain, UK, Holland, Canada, South Africa, United Arab Emirates, Argentina and Mexico. Of these, 286 patients were randomized, 187 to receive paroxetine and 99 to receive placebo. 38 patients were not randomised due to protocol violations, improvement on placebo, withdrawal of consent, lost to follow-up and 1 case of an adverse experience. 11 patients were not eligible to be included in the ITT population making 182 patients in the paroxetine group and 93 in the placebo group. The reasons for patient exclusion from the per-protocol population are discussed in Section 4.3 (Protocol Violations). Further details for the patients in the study are summarised in the tables below (see Table 4 The Number of Patients Screened, Randomized Into the Study and the Number Who Completed the Study, page 46) (see Table 5 The Number of Patients who were Randomised (R) to each Treatment Group by Centre, as well as those who Completed (C) the Study, page 47) .

Table 4 The Number of Patients Screened, Randomized Into the Study and the Number Who Completed the Study

Number of patients	Treatment group		Total
	Paroxetine	Placebo	
Screened	-	-	324
Randomized	187	99	286
ITT populations*	182	93	275
Per-protocol populations	130	68	198
Completed the study ITT	127	69	196

Data Source: Tables 13.01 and 13.13b in Section 10; Appendices 13.1 and 13.13 in Appendix B
* 377.

Table 5 The Number of Patients who were Randomised (R) to each Treatment Group by Centre, as well as those who Completed (C) the Study

Centre No.	Investigator Last Name	Number of Patients			
		Paroxetine		Placebo	
		R	C	R	C
002	xxxx	0	0	1	1
005	xxxxxxxx	8	4	3	2
007	xxxxxxx	5	2	4	2
008	xxxxxxxx	2	2	1	1
009	xxxxxxxx	11	9	6	2
010	xxxxxxxxx	4	4	2	1
011	xxxxxxxxxx	4	3	1	0
014	xxxxxxx	4	4	2	2
015	xxxxxxxx	4	4	2	2
022	xxxxxxxx	0	0	0	0
023	xxxx	3	2	1	0
024	xxxxxx	2	2	1	1
026	xxxxxxxx	1	1	0	0
029	xxxxxxx	32	16	15	10
030	xxxxxx	5	1	2	0
033	xxxxxx	0	0	1	1
038	xxxxx	2	2	1	1
040	xxxxxxxxxx	2	1	2	2
041	xxxxxxx	4	3	2	2
042	xxxxxxx	24	10	13	9
044	xxxxxxxxx	1	1	1	0
045	xxxxxxxxx	6	13	8	8
046	xxxxxxxx	0	0	1	0
047	xxxxxxx	5	4	3	3
049	xxxxxxxxx	15	12	8	6
050	xxxxxxxxxxx	4	3	3	2
052	xxxxxxx	1	1	0	0
053	xxxxx	2	1	1	1
054	xxxxxxx	1	1	1	0
056	xxx	10	10	4	3
057	xxxxx	8	6	5	4
058	xxxxxxxxx	5	3	2	1
059	xxxxxx	2	2	2	2

Data source: Table 13.02 and Table 13.13b in Section 10; Appendix 13.13 in Appendix B

4.2.2 Number of Patients Present at Each Visit

The numbers of patients in the ITT population who were present at each visit during the study are shown below (see Table 6 The Number (%) of ITT Patients Present at each Visit, page 48) .

Table 6 The Number (%) of ITT Patients Present at each Visit

Study Visit	Treatment group	
	Paroxetine n=182	Placebo n=93
Week 1	182 (100)	93 (100)
Week 2	176 (96.7)	91 (97.8)
Week 3	166 (91.2)	88 (94.6)
Week 4	164 (90.1)	84 (90.3)
Week 6	155 (85.2)	81 (87.1)
Week 8	149 (81.9)	78 (83.9)
Week 12	136 (74.7)	73 (78.5)
Completed	127 (69.8)	69 (74.2)

Data Source: Table 13.13b in Section 10; Appendix 13.13 in Appendix B

The proportion of patients remaining at each visit was similar for both treatment groups.

4.2.3 Withdrawal Reasons

In the ITT population, 55 (30.2%) patients in the paroxetine group and 24 (25.8%) patients in the placebo group, withdrew during the study. The reasons for withdrawal in each group are summarised below (see Table 7 The Number (%) of Patients in the ITT population who Completed the Study or were Withdrawn by the Reason for Study Withdrawal, page 49) .

Table 7 The Number (%) of Patients in the ITT population who Completed the Study or were Withdrawn by the Reason for Study Withdrawal

	Treatment Group	
Study Conclusion Reason	Paroxetine n=182	Placebo n=93
COMPLETED STUDY	127 (69.8)	69 (74.2)
Withdrawal Reason		
Adverse Experiences	20 (11.0)$	7 (7.5)*
Lack of efficacy	9 (4.9)	6 (6.5)
Protocol Violation	7 (3.8)	4 (4.3)*
Lost to Follow-up	13 (7.1)	6 (6.5)
Other	6 (3.3)	1 (1.1)
TOTAL WITHDRAWN	55 (30.2)	24 (25.8)

Data Source: Table 13.13b Section 10; Appendix 13.13 in Appendix B

PID 041.00289 withdrew due to AE of kidney pain during down titration period. This patient is not included in appendix 13.13

* Patient 377.029.00030 experienced an AE leading to withdrawal but was wrongly recorded as withdrawing due to protocol violation. To correct for this and to ensure consistency with table 15.061b, the number of patients withdrawing due to an AE has been increased to 7 and the number withdrawing due to protocol violation reduced to 4.

$ Patient 377.023.00170 in the paroxetine group was recorded as withdrawing due to an AE but did not have an AE with an action of drug stopped recorded. In order to assume the worst case scenario, the figure of withdrawal due to an AE has been left as 20 although only 19 patients have been recorded as withdrawing due to an AE in table 15.061b.

The most common reason for withdrawal in the paroxetine group was due to adverse experiences (11.0%). The patients withdrawing from the placebo group were evenly distributed across the categories.

Data Anomalies: Table 13.13b in Section 10 and Appendix 13.13 in Appendix B detailing patient withdrawals by reason for withdrawal in the ITT population states 20 patients withdrawing from the paroxetine group and 6 patients withdrawing from the placebo group due to adverse experiences. Table 15.061b in Section 12 detailing the adverse experiences leading to withdrawal states 19 patients withdrawing from the paroxetine group and 7 patients withdrawing from the placebo group. Patient 023.00170 in the paroxetine group was recorded as withdrawing due to an adverse experience, however, did not have an adverse experience with an action of drug stopped recorded. As such, this patient does not appear in table 15.061b but does appear in table 13.13b. In the placebo group, patient 029.00030 had an adverse experience with an action of drug stopped, but the reason for withdrawal was recorded as protocol violation. Consequently, this patient appears in table 15.061b but is recorded in table 13.13b as withdrawing due to protocol violation, not due to an AE. In order to assume the worst case scenario, where withdrawals from the ITT population due to adverse experiences

are discussed, the figures used are 20/182 patients (11.0%) in the paroxetine group and 7/93 patients (7.5%) in the placebo group.

Details of the cumulative percentage ITT population patients withdrawn by visit during the study are shown below (see Table 8 The Cumulative Percentage Patients Withdrawn During the Study by the Reason for Withdrawal, page 50) .

Table 8 The Cumulative Percentage Patients Withdrawn During the Study by the Reason for Withdrawal, ITT population

Study Visit When Withdrawn	Cumulative (%) Withdrawn							
	Paroxetine n=182				Placebo n=93			
	AE	LOE	Other	Total	AE	LOE	Other	Total
Week 1	1.6	0.5	1.1	3.3	2.2	0.0	0.0	2.2
Week 2	4.4	1.1	3.3	8.8	3.2	1.1	1.1	5.4
Week 3	4.9	1.1	3.8	9.9	3.2	2.2	4.3	9.7
Week 4	7.7	1.6	5.5	14.8	4.3	3.2	5.4	12.9
Week 6	7.7	2.7	7.7	18.1	4.3	4.3	7.5	16.1
Week 8	8.8	4.9	11.5	25.3	6.5	6.5	8.6	21.5
Week 12	11.0	4.9	14.3	30.2	7.5*	6.5	11.8*	25.8
Endpoint								

Data Source: Table 13.13b in Section 10; Appendices 13.13 in Appendix B
KEY: AE = adverse experiences; LOE = Lack of efficacy; Other = Protocol violation, lost to follow-up and other reason
*Patient 377.029.00030 has been added to the AE column at week 1, and removed from the other colomn (protocol violation) to ensure consistency with the other tables

4.3 Protocol Violations

4.3.1 Protocol Violations Excluded from the Per Protocol Analyses

See Section 3.13.5 for a definition of the per protocol population. Randomised patients excluded from the per protocol populations and their reasons for exclusion are detailed in Appendix 13.20 in Appendix B and summarised below (see Table 9 Randomised Patients Excluded from the Per-protocol Analyses by Protocol Violation. Number (%) of Patients, page 51). Fifty-seven patients in the paroxetine randomised population (30.5%) and 31 patients in the placebo randomised population (31.3%) were excluded from the per-protocol populations.

Table 9 Randomised Patients Excluded from the Per-protocol Analyses by Protocol Violation. Number (%) of Patients

	Treatment group	
Protocol violation	**Paroxetine n=187**	**Placebo n=99**
Long term psychotherapy during study period	18 (9.6)	8 (8.1)
Patient received psychotropic medication	3 (1.6)	0 (0.0)
Duration of active treatment less than 6 weeks*	32 (17.1)	17 (17.2)
Concomitant use of prohibited medications	9 (4.8)	5 (5.1)
Not compliant on two consecutive visits	3 (1.6)	3 (3.0)
Did not fulfill inclusion criteria	5 (2.7)	0 (0.0)
Out of range screening lab values	2 (1.1)	1 (1.0)

Data Source: Tables 13.20 in Section 10; Appendix 13.20 in Appendix B
* reporting and analysis plan amendment lengthened duration of active treatment from 3 to 6 weeks, this should have been reflected in the protocol as a modification

4.4 Demographic and Baseline Characteristics

4.4.1 Demographic Characteristics

Demographic data for the ITT and per protocol populations are summarised below (see Table 10 Demographic Data for the ITT and Per Protocol Populations, page 52) . The treatment groups were well matched for all demographic parameters. Tables 13.6b, 13.7b and 13.10b in Section 10 give further details of the patient population's baseline demographics.

Table 10 Demographic Data for the ITT and Per Protocol Populations

Demography	Treatment groups			
	ITT		Per-protocol	
	Paroxetine n=182	Placebo n=93	Paroxetine n=130	Placebo n=68
Sex: number (%)				
Females	122 (67.0)	61 (65.6)	92 (70.8)	43 (63.2)
Males	60 (33.0)	32 (34.4)	38 (29.2)	25 (36.8)
Race: number (%)				
Black	2 (1.1)	4 (4.3)	2 (1.5)	4 (5.9)
Caucasian	126 (69.2)	61 (65.6)	88 (67.7)	41 (60.3)
Oriental	2 (1.1)	0 (0.0)	2 (1.5)	0 (0.0)
Other	52 (28.6)	28 (30.1)	38 (29.2)	23 (33.8)
Age: years				
Mean age (sd)	15.5 (1.6)	15.8 (1.6)	15.5 (1.6)	15.7 (1.5)
Age range	*12-19	13-18	13-18	13-18
Height				
Mean height (sd)	163.6 (9.1)$	164.5 (8.5)	162.7 (8.7)$	164.2 (9.0)
Height range	140-185	131-184	142-185	131-184

Data source: Tables 13.2b and 13.2c in Section 10; Appendix 13.2 in Appendix B

* Patients 377.026.00200, 377.029.00040, and 377.057.00532 were 12 years old when recruited into the study and were excluded from the per-protocol population as protocol violators.

$ n = 180 and 128 for the ITT and PP populations respectively

4.4.2 Baseline Characteristics

The psychiatric history of the patients is summarised in table 13.4b in Section 10. 29.1% of patients in the paroxetine treated group and 31.2% in the placebo group had had a previous episode or suspected previous episode of major depression. Table 13.5b in Section 10 summarises the family composition and shows that 50.5% of patients in the paroxetine group and 51.6% in the placebo group resided at home with both parents. The mean baseline MADRS scores for both the paroxetine group and the placebo group at baseline were 25.9 (s.e. = 0.5 and 0.6 respectively). This score indicates a moderately to severely ill population. At baseline, 33.7% of patients in the paroxetine group and 39.3% of patients in the placebo groups (ITT LOCF) were either markedly or severely ill as measured by the CGI Severity of illness item.

4.5 Presenting Conditions and Medical History

4.5.1 Medical/Surgical History and Physical Examination at Baseline

Table 13.3b (Section 10) contains a summary of ITT patients medical/surgical history data at Baseline, and Appendix 13.3 in Appendix B contains the data listing by patient.

Table 13.3.2b contains a summary of ITT patients significant medical/surgical history data which were past, ongoing or past and ongoing. In the paroxetine group, 64 patients (35.2%) had a medical history compared with 37 patients (39.8%) in the placebo group. The most common condition in the paroxetine group was asthma (5.5%). In the placebo group the most common conditions were headache and nose/mouth operations, both 5.4%.

Active medical conditions on entry to the study were recorded for 45 paroxetine patients (24.7%) and 27 placebo patients (29.0%). The most common condition for paroxetine patients was asthma (4.9%). For placebo patients the most common conditions were allergic rhinitis (4.3%) and skin disorders (4.3%).

4.5.2 Previous Psychiatric History

The previous psychiatric conditions for ITT patients by treatment group are summarised below (see Table 11 Psychiatric History. Number (%) of Patients , page 53) .

Table 11 Psychiatric History. Number (%) of Patients

	Treatment group			
	Paroxetine n=182		Placebo n=93	
Disorder	Yes	Suspected	Yes	Suspected
Major episode of depression	39 (21.4)	14 (7.7)	19 (20.4)	10 (10.8)
Schizophrenia	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)
Alcoholism or drug/medication abuse*	4 (2.2)	0 (0.0)	3 (3.2)	1 (1.1)
Anxiety/obsessional disorder	13 (7.1)	6 (3.3)	9 (9.7)	2 (2.2)
Personality disorder	2 (1.1)	3 (1.6)	0 (0.0)	0 (0.0)

Data Source: Tables 13.4b in Section 10; Appendix 13.4 in Appendix B

* not within the previous 6 months

4.6 Baseline Signs and Symptoms

Baseline signs and symptoms i.e. adverse experiences that occurred prior to randomisation, were not reported for this study.

4.7 Prior and Concomitant Medications

Appendix 13.11 in Appendix B details prior and concomitant medications by WHO ATC classification and generic term, and by treatment group and patient respectively, and the results are summarised for the ITT populations in Tables 13.11b (prior medications) and 13.12b (concomitant medications) in Section 10. Prior medications are those which were received prior to starting the study including those that were continued into the study. Concomitant medications are those that were initiated during the study.

In the paroxetine group, 18.7% of patients received at least one prior medication compared with 20.4% of placebo patients, and 42.9% of paroxetine patients received at least one concomitant medication compared with 41.9% of placebo patients. The most common prior and concomitant medications are presented below (see Table 12 Prior and Concomitant Medications used by 3 or More Patients in Either Treatment Group. Number (%) of Patients, page 55) .

Table 12 Prior and Concomitant Medications used by 3 or More Patients in Either Treatment Group. Number (%) of Patients

Medications	Treatment groups	
	Paroxetine n=182	Placebo n=93
Prior medications		
Ethinylestradiol	13 (7.1)	7 (7.5)
Salbutamol	7 (3.8)	0 (0.0)
Cyproterone Acetate	5 (2.7)	1 (1.1)
Paracetamol	5 (2.7)	2 (2.2)
Beclomethasone Dipropionate	4 (2.2)	0 (0.0)
Gestodene	3 (1.6)	2 (2.2)
Desogestrel	2 (1.1)	3 (3.2)
Concomitant Medications		
Paracetamol *	31 (17.0)	20 (21.5)
Codeine Phosphate*	13 (7.1)	3 (3.2)
Acetylsalicylate Acid	11 (6.0)	6 (6.5)
Caffeine	6 (3.3)	1 (1.1)
Pseudoephedrine Hydrochloride	6 (3.3)	1 (1.1)
Ibuprofen *	6 (3.3)	9 (9.7)
Phenylephrine hydrochloride	5 (2.7)	4 (4.3)
Cyclizine Hydrochloride*	4 (2.2)	1 (1.1)
Amoxicillin	4 (2.2)	0 (0.0)
Amoxicillin Trihydrate	3 (1.6)	1 (1.1)
Ampicillin	3 (1.6)	1 (1.1)
Ascorbic Acid	3 (1.6)	0 (0.0)
Chlorphenamine Maleate	3 (1.6)	2 (2.2)
Dextromethorphan hydrobromide	3 (1.6)	0 (0.0)
Dimenhydrinate	3 (1.6)	1 (1.1)
Ethinylestradiol	3 (1.6)	1 (1.1)
Etilefrine Hydrochloride	3 (1.6)	2 (2.2)
Guaifenesin	3 (1.6)	0 (0.0)
Levonorgestrel	3 (1.6)	0 (0.0)
Triprolidine Hydrochloride	3 (1.6)	1 (1.1)

Data source: Tables 13.11b and 13.12b in Section 10; Appendix 13.11 ,in Appendix B
* medication appears under more than 1 ATC classification so numbers have been added together

Nine paroxetine patients and 5 placebo patients received prohibited medications (SSRIs, benzodiazepines and other psychoactive medication) after the screening date.

4.8 Treatment Compliance

Details of study medication taken during the study are shown in Appendix 13.21 in Appendix B. As a guideline, non-compliance was defined in the protocol as taking <80% or >120% of the prescribed paroxetine or placebo study medication at each of 2 consecutive visits. Three paroxetine patients (1.6% of the ITT population) and 3 placebo patients (3.2% of the ITT population) were non-compliant.

5 Efficacy Results

5.1 Efficacy Evaluation

5.1.1 Data Sets Analysed

Definitions of the ITT and per-protocol efficacy populations are given in Section 3.13.5.

The primary analysis population for the study was the intention-to-treat population using the LOCF datasets, with the LOCF Week 12 timepoint being the primary timepoint of interest. In the OC dataset, efficacy data were evaluated only for the timepoint when it was collected. In the LOCF dataset, the last available on-therapy observation for a patient was used to estimate missing data points (last observation carried forward, or LOCF). A confirmatory analysis based on the per protocol analysis was carried out on the primary efficacy variables.

Fifty-two paroxetine patients and 25 placebo patients were excluded from the respective ITT populations to make the per-protocol population (see Section 4.3.1 for details of reasons for exclusion).

5.2 Primary Efficacy Parameters

5.2.1 Montgomery Asberg Depression Rating Scale (MADRS)

Full details of the MADRS results are given in Appendix 14.01 in Appendix C and summaries of MADRS scores are shown in Tables 14.01b, c, d and e; 14.02b, c, d and e; 14.03b and d; 14.05b and d; 14.06b and d and 14.07b and d in Section 11. Appendix 14.01.01 contains the details of the MADRS scores from the patients recruited in centre 007 only. These patients were excluded from the efficacy analyses for all efficacy parameters.

One of the primary efficacy parameters for this study was the proportion of ITT patients with a 50% or greater reduction in MADRS score between baseline and study endpoint. The results for the ITT and per-protocol populations are shown below (see Table 13 The Proportions of Patients with ≥50% Reduction from Baseline in Total MADRS Score at Study Endpoint (ITT and Per-protocol Populations), page 58)

Table 13 The Proportions of Patients with ≥50% Reduction from Baseline in Total MADRS Score at Study Endpoint (ITT and Per-protocol Populations)

Dataset	Treatment groups				
	Paroxetine Proportion of responders n/N	Placebo Proportion of responders n/N	Adjusted Odds Ratio	95% CI (Paroxetine/ Placebo	P-value
ITT					
LOCF	107/177 (60.45%)	53/91 (58.24%)	1.109	(0.653, 1.884)	0.702
OC	94/126 (74.60%)	47/66 (71.21%)	1.161	(0.590, 2.285)	0.666
Per-Protocol					
LOCF	91/130 (70.00%)	45/68 (66.18%)	1.171	(0.613,2.237)	0.633
OC	82/108 (75.93%)	40/56 (71.43%)	1.195	(0.567,2.516)	0.639

Data Source: Tables 14.01b, c,d and e in Section 11; Appendix 14.01 in Appendix C; Appendix I
n = Number of patients with ≥50 reduction in MADRS score at study endpoint
N = Total number of patients in the treatment group at that time

Despite a 60.5% response rate in the ITT LOCF paroxetine treated group, 58.2% of placebo treated patients also achieved a 50% reduction in their baseline MADRS score and as such paroxetine was not statistically or clinically superior to placebo. These results were confirmed by the per protocol LOCF analysis where 70.0% of the paroxetine group responded and 66.2% of the placebo treated patients (See Appendix I).

The following assessment of interactions were performed; treatment by country group, treatment by baseline score, treatment by age, age by country group, age by baseline score and baseline score by country group. The only statistically significant interaction found was treatment by age (p=0.002; ITT LOCF). When this was analysed further by splitting the data by prospectively defined age groups (≤ 16 and > 16 years old) it appears that in the younger age group, the proportion of responders was higher in the placebo group than in the paroxetine group at each visit, although these differences were not statistically significant. However in the older age group, the proportion of responders was higher in the paroxetine group at each visit, although the numbers of patients were too low for a formal statistical analysis using the final model. This was confirmed in the OC dataset and in the per-protocol population. Details of all the covariate analyses can be found in the Statistical Appendix in Appendix I.

Table14 Proportion of Patients with a >= 50% reduction in MADRS Total Score by Age Group at Week 12

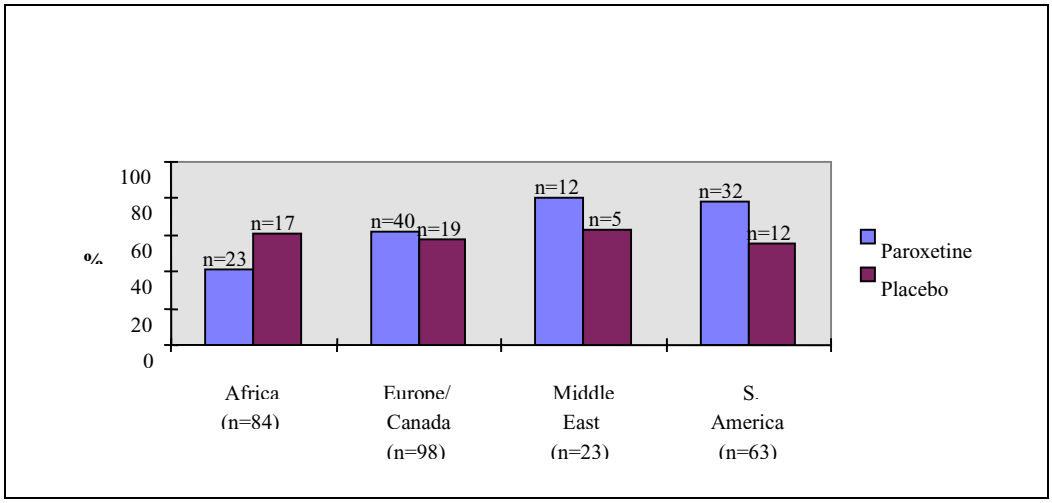
Age Group ≤ 16 years Old					
Dataset	Paroxetine Proportion of Responders	Placebo Proportion of Responders	Adjusted Odds Ratio	95% CI (Paroxetine /Placebo)	P-value
LOCF	65/118 (55.08%)	37/57 (64.91%)	0.609	(0.309,1.201)	0.153
OC	56/80 (70.00%)	33/45 (75.33%)	0.815	(0.355,1.870)	0.629
Age Group > 16 years Old					
Dataset	Paroxetine Proportion of Responders	Placebo Proportion of Responders	Adjusted Odds Ratio	95% CI (Paroxetine /Placebo)	P-value
LOCF	42/59 (71.19%)	16/34 (47.06%)	-	-	-
OC	38/46 (82.61%)	14/21 (66.67%)	-	-	-

NB – Model could not be fitted due to lack of responders per treatment group/country combination.

The odds ratios, confidence intervals and p-values were obtained using logistic regression adjusting for country group, baseline MADRS total score and age (in years).

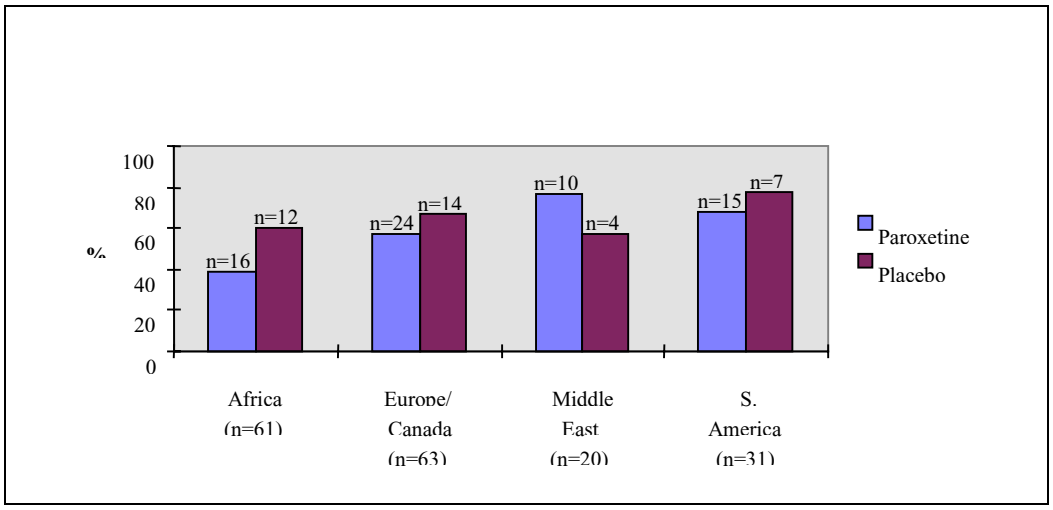
To further understand the data and the age by treatment interaction observed, the response data were plotted by country group. Figure 1 represents the proportion of patients responding by treatment and country group and it can be seen that the proportion of patients responding is higher in the paroxetine group in all country groups except Africa, where the proportion is higher on placebo (See Appendix I).

Figure 1 Proportion of patients responding (achieving >= 50% reduction in MADRS total score) (ITT)



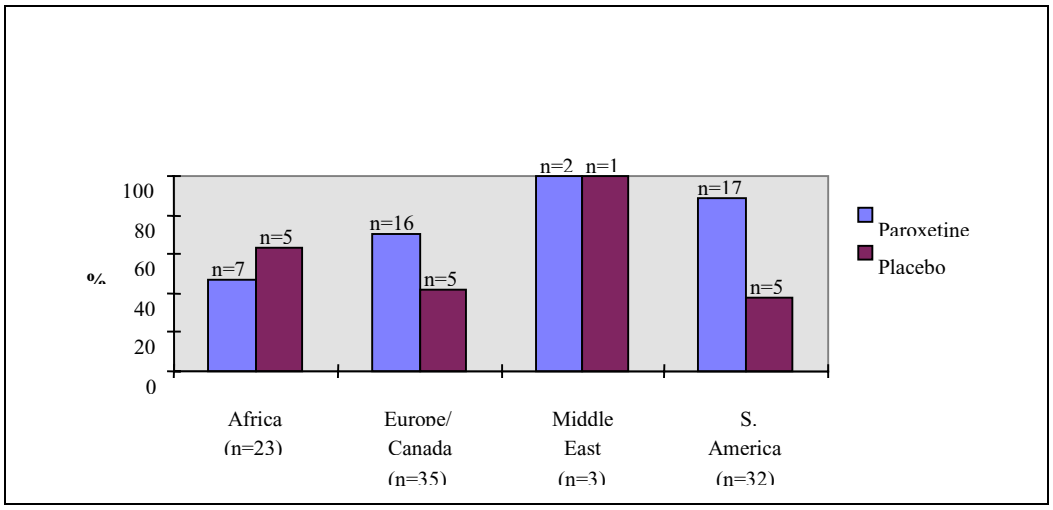
In contrast, when analysing the proportion of younger patients (<=16 years) responding by treatment group and country group (see Figure 2) it can be seen that the proportion of younger patients responding is higher in the placebo group in all country groups except the Middle East, where the proportion remains higher on paroxetine (See Appendix I).

Figure 2 Proportion of patients responding age <= 16 (achieving >= 50% reduction in MADRS total score) (ITT)



However, in the older age group (see Figure 3) the proportion of patients responding is higher in the paroxetine group in Europe/Canada and South America, but in Africa, the proportion of older patients responding remains higher on placebo. In the Middle East, all the patients responded although caution should be exercised when interpreting results from this country group due to the low numbers, particularly in the placebo group (See Appendix I).

Figure 3 Proportion of patients responding age >16 (achieving >= 50% reduction in MADRS total score) (ITT)



Although no country by treatment group interaction was detected, these figures show the considerable variability in the response pattern observed within different country groups and age groups.

5.2.2 Kiddie-SADS-Lifetime (K-SADS-L) Depression Subscale

Full details of the K-SADS-L results are given in Appendix 14.04 in Appendix C and summaries of mean change from baseline in the K-SADS L depressive subscale are shown in Tables 14.04b, c, d and e; 14.08b and d; 4.09b and d and 14.010b and d in Section 11. The full details of the K-SADS-L for patients from centre 007 are given in Appendix 14.04.01 in Appendix C.

One of the primary efficacy parameters for this study was the change from baseline to study endpoint in K-SADS-L depression subscale. The results for the ITT and per-protocol populations and the Baseline K-SADS-L depression subscale scores are shown below (see Table 15 Change from Baseline to Study Endpoint in K-SADS-L Depression Subscale (ITT and Per Protocol Populations), page 63) .

Table 15 Change from Baseline to Study Endpoint in K-SADS-L Depression Subscale (ITT and Per Protocol Populations)

Dataset	Treatment groups				
	Paroxetine N, adjusted mean (S.E.)	**Placebo N, adjusted mean (S.E.)**	**Difference in Adjusted Means**	**95% CI (Paroxetine/ Placebo**	**P-value**
ITT					
LOCF	171, -9.330 (0.54)	88,-8.923 (0.70)	-0.408	(-2.007,1.192)	0.616
OC	126, -10.824 (0.49)	66,-10.167 (0.63)	-0.657	(-2.126,0.812)	0.379
Per-Protocol					
LOCF	130,-9.949 (0.51)	68,-9.603 (0.68)	-0.347	(-1.952,1.259)	0.671
OC	108,-10.600 (0.49)	56,-10.295 (0.64)	-0.304	(-1.831,1.223)	0.694

Data source: Tables 14.04b, c,d and e in Section 11; Appendices 14.04 and 14.04.01 in Appendix C; Appendix I

The p-values were obtained using analysis of covariance adjusting for country group, baseline K-SADS-l depression subscale score and age (in years). The confidence intervals were obtained using adjusted means.

Again despite a 9.3 point drop from baseline in the K-SADS-L score in the paroxetine treated patients, the placebo group score decreased by 8.9 points (ITT LOCF). The difference in the adjusted means of –0.41 (see appendix I) was not clinically or statistically significant. This was reflected in the per-protocol population.

As with the other primary efficacy variable (see appendix I) the only statistically significant interaction found was treatment by age (p=0.020; ITT LOCF). In the older age group (>16 years of age) the mean change from baseline was larger in the paroxetine group at each visit and this was statistically significant at week 8 (p=0.019). In the younger age group (<=16 years of age), mean change from baseline was larger in the placebo group than in the paroxetine group although observed differences were not statistically significant. These results support those observed for the other primary efficacy variable.

Table 16 Change from Baseline in K-SADS-L Depression Subscale Score by Age Group, ITT LOCF Population

Age Group ≤ 16 years old					
Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine/ Placebo)	P-value
6	113,-6.664 (0.57)	55, -7.846 (0.78)	1.182	(-0.621, 2.985)	0.197
8	113, -7.828 (0.57)	55,-8.876 (0.78)	1.049	(-0.766, 2.863)	0.256
12	113,-8.42 (0.61)	55,-9.38 (0.83)	0.968	(-0.954, 2.891)	0.321
Age Group > 16 years old					
Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine – Placebo)	P-value
6	58,-9.454 (1.15)	33,-6.864 (1.35)	-2.590	(-5.266, 0.085)	0.058
8	58,-10.127 (1.17)	33,-6.850 (1.37)	-3.277	(-5.997, -0.558)	0.019*
12	58,-11.163 (1.25)	33,-8.438 (1.47)	-2.725	(-5.641, 0.192)	0.067

Data Source: Appendix I
* = significance at the 5% level

Table 17 Change from Baseline in K-SADS-L Depression Subscale Score by Age Group, ITT OC Population

Age Group ≤ 16 years old					
Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine – Placebo)	P-value
6	97,-7.285 (0.59)	51,-7.930 (0.78)	0.645	(-1.208, 2.498)	0.493
8	93,-8.796 (0.55)	49,-8.98 (0.73)	0.183	(-1.558, 1.923)	0.836
12	80,-10.081 (0.61)	45,-9.797 (0.77)	-0.285	(-2.141, 1.571)	0.762
Age Group > 16 years old					
Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine – Placebo)	P-value
6	49,-9.980 (1.06)	26,-7.974 (1.31)	-2.006	(-4.689, 0.677)	0.140
8	50-11.148 (0.87)	23,-9.166 (1.13)	-1.983	(-4.293, 0.328)	0.091
12	46,-12.060 (0.93)	21,-10.899 (1.20)	-1.161	(-3.681, 1.358)	0.360

Data Source: Appendix I

The p-values were obtained using analysis of covariance adjusting for country group, baseline K-SADS-L depression subscale score and age 9in years). The confidence intervals were obtained using adjusted means.

5.3 Secondary Efficacy Parameters

5.3.1 MADRS

Full details of the MADRS results are given in Appendix 14.01 in Appendix C and summaries of MADRS scores are shown in Tables 14.01b, c, d and e; 14.02b, c, d and e; 14.03b and d; 14.05b and d; 14.06b and d and 14.07b and d in Section 11. Appendix 14.01.01 contains the details of the MADRS scores from the patients recruited in centre 007 only.

≥50% Reduction in MADRS Score

The proportion of patients with a 50% or greater reduction in MADRS score between baseline and weeks 6 and 8 was a secondary efficacy parameter. The results are shown below .

Table 18 Proportion of Patients with a 50% or Greater Reduction in MADRS Total Score at Weeks 6 and 8, ITT LOCF Population

(see Patient Disposition and Key Demographic Data, page 5)

Week	Paroxetine Proportion of responders	Placebo Proportion of responders	Adjusted Odds Ratio	95% C.I. (Paroxetine/ Placebo)	P-value
6	73/177 (41.24%)	33/91 (36.26%)	1.242	(0.728, 2.119)	0.427
8	97/177 (54.80%)	45/91 (49.45%)	1.261	(0.750, 2.121)	0.382

Data Source: Tables 14.01b and d and 14.03b and d in Section 11; Appendix 14.01 and 14.01.01 in Appendix C; Appendix I
N = Number of patients with ≥50 reduction in MADRS score at study endpoint
n = Total number of patients in the treatment group at that time

Again, despite 41.2% of paroxetine patients achieving a 50% reduction in their MADRS score at week 6, this was in comparison with 36.3% of patients in the placebo group. At week 8, these figures were 54.8% and 49.5% for paroxetine and placebo respectively. These differences were not statistically significant (see appendix I).

Change from Baseline in MADRS Score

Change from baseline in MADRS total score was analysed at weeks 6, 8 and study endpoint. Results are shown below (see (see Table 19 Change from Baseline in MADRS Total Score at Weeks 6, 8 and Study Endpoint (ITT Population), page 67)) .

Table 19 Change from Baseline in MADRS Total Score at Weeks 6, 8 and Study Endpoint (ITT Population)

Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine – Placebo)	P-value
6	177,-10.466 (0.73)	91,-9.926 (0.95)	-0.540	(-2.725, 1.645)	0.627
8	177,-12.383 (0.80)	91, 11.009 (1.05)	-1.374	(-3.773, 1.025)	0.260
12	177, -13.604 (0.82)	91, -12.796 (1.08)	-0.809	(-3.278, 1.661)	0.520

Data source: Tables 14.03b and 14.03d in Section 11; Appendices 14.01 and 14.01.01 in Appendix C; Appendix I

No overall statistically significant treatment differences were observed.

Again, a statistically significant interaction was found with the treatment by age covariate, (p=0.059; ITT LOCF), see Appendix I. As for the primary efficacy variables, an analysis by age group was performed. In the >16 years of age group, the difference in the adjusted means at week 8 of –5.870 was statistically significant in favour of paroxetine (p=0.006). In the <=16 years of age group, a similar pattern to the primary efficacy variables was observed i.e a greater mean change was observed in the placebo group than in the paroxetine group although again these differences were not statistically significant.

Table 20 Change from Baseline in MADRS Total Score by Age Group, ITT LOCF Population

Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine - Placebo)	P-value
Age Group ≤ 16 years old					
6	118, -9.394 (0.86)	57, -10.252 (1.19)	0.859	(-1.894, 3.610)	0.539
8	118,-11.124 (0.92)	57, -12.411 (1.27)	1.287	(-1.649, 4.223)	0.388
12	118, -12.584 (0.95)	57, -13.50 (1.30)	0.910	(-2.108, 3.929)	0.552
Age Group > 16 years old					
6	59, -12.503 (1.60)	34, -9.755 (1.90)	-2.748	(-6.43, 0.94)	0.142
8	59, -14.351 (1.81)	34, -8.481 (2.15)	-5.870	(-10.045, -1.696)	0.006*
12	59, -15.515 (1.93)	34, -11.788 (2.28)	-3.728	(-8.164, 0.708)	0.098

Data source: Appendix I
* = signficant at the 5% level

Results from the OC analyses confirmed those observed in the LOCF dataset. However, a treatment by age interaction was not detected for this OC dataset but to maintain consistency, analyses by age group were performed and results can be found in the Statistical Appendix I.

5.3.2 Clinical Global Impression (CGI)

Severity of Illness

Full details of the CGI severity of illness results are given in Appendices 14.10 and 14.10.01 (centre 007 only) in Appendix C and summaries of CGI severity of illness results are shown in Tables 14.10b and d and 14.11b and d in Section 11.

Change from baseline in CGI severity of illness score was analysed at weeks 6, 8 and study endpoint. The results are shown below (see Table 21 Change from Baseline in CGI Severity of Illness Score, ITT LOCF Population, page 69) .

Table 21 Change from Baseline in CGI Severity of Illness Score, ITT LOCF Population

Week	Paroxetine			Placebo			P-value
	N	Mean	Median	N	Mean	Median	
6	172	-1.41	-1.0	89	-1.28	-1.0	0.38
8	172	-1.65	-2.0	89	-1.46	-1.0	0.35
12	172	-1.91	-2.0	89	-1.82	-2.0	0.85

Data source: Tables 14.11b and d in Section 11; Appendices 14.10 and 14.10.01 in Appendix C; Appendix I

N.B. The means and medians are based on the changes in the actual CGI Severity of Illness scores. However, the p-values were obtained using the Wilcoxon rank-sum test (i.e the analysis was performed on the ranked values)

As for the other efficacy variables, the change from baseline for the LOCF paroxetine group at week 6 (-1.4), week 8 (-1.6) and week 12 (-1.9) was not statistically significantly different from that in the placebo group (-1.3, -1.5 and –1.8 respectively). This was also reflected in the OC dataset.

Due to the non-parametric analysis performed (see appendix I), treatment by age interaction could not be assessed for this parameter. However, to maintain consistency with the other variables, the results were also presented by age group. In the >16 age group at week 8, there was a statistical difference in favour of paroxetine (p=0.043).

Table 22 Change from Baseline in CGI Severity of Illness Score by Age Group, ITT LOCF Population

Age Group ≤ 16 years old							
Week	Paroxetine			Placebo			P-value
	N	Mean	Median	N	Mean	Median	
6	114	-1.32	-1.0	56	-1.29	-1.0	0.80
8	114	-1.50	-2.0	56	-1.55	-1.0	0.68
12	114	-1.78	-2.0	56	-1.93	-2.0	0.34
Age Group > 16 years old							
Week	Paroxetine			Placebo			P-value
	N	Mean	Median	N	Mean	Median	
6	58	-1.60	-2.0	33	-1.27	-1.0	0.24
8	58	-1.93	-2.0	33	-1.30	-1.0	0.04*
12	58	-2.16	-2.5	33	-1.64	-1.0	0.14

Data Source: Appendix I

N.B. The means and medians are based on the changes in the actual CGI Severity of Illness scores. However, the p-values were obtained using the Wilcoxon rank-sum test (i.e the analysis was performed on the ranked values)

Global Improvement

Full details of the CGI global improvement results are given in Appendices 14.10 and 14.10.01 in Appendix C and summaries of CGI global improvement results are shown in Tables 14.12b and d and 14.13b and d in Section 11.

CGI global improvement score was analysed at weeks 6, 8 and study endpoint . The results are shown below (see Table 23 CGI Global Improvement Score, ITT LOCF Population, page 71) .

Table 23 CGI Global Improvement Score, ITT LOCF Population

Week	Category	Paroxetine	Placebo
Week 6 (p=0.279)	Very much improved	35 (20.35%)	15 (16.85%)
	Much improved	63 (36.63%)	29 (32.58%)
	Minimally improved	38 (22.09%)	25 (28.09%)
	No change	22 (12.79%)	13 (14.61%)
	Minimally worse	5 (2.91%)	6 (6.74%)
	Much worse	9 (5.23%)	1 (1.12%)
	Very much worse	0 (0.00%)	0 (0.00%)
	Total	172	89
Week 8 (p=0.416)	Very much improved	52 (30.23%)	22 (24.72%)
	Much improved	53 (30.81%)	27 (30.34%)
	Minimally improved	32 (18.60%)	18 (20.22%)
	No change	20 (11.63%)	13 (14.61%)
	Minimally worse	5 (2.91%)	7 (7.87%)
	Much worse	9 (5.23%)	2 (2.25%)
	Very much worse	1 (0.58%)	0 (0.00%)
	Total	172	89
Week 12 (p=0.283)	Very much improved	71 (41.28%)	32 (35.96%)
	Much improved	48 (27.91%)	19 (21.35%)
	Minimally improved	20 (11.63%)	15 (16.85%)
	No change	18 (10.47%)	16 (17.98%)
	Minimally worse	8 (4.65%)	6 (6.74%)
	Much worse	6 (3.49%)	1 (1.12%)
	Very much worse	1 (0.58%)	0 (0.00%)
	Total	172	89

these p values were obtained from a Cochran Mantel-Haenszel test stratified by country group

There were no statistically significant treatment differences observed (see appendix I). Due to the non-parametric analysis performed (see appendix I), treatment by age interaction could not be assessed for this parameter. However, to maintain consistency with the other variables, the results were also presented by age group (See Appendix i).

5.3.3 Beck Depression Inventory (BDI)

Full details of the BDI results are given in Appendices 14.20 and 14.20.01 in Appendix C and summaries of BDI results are shown in Tables 14.20b and 14.20d in Section 11.

Change from baseline in BDI scores were analysed at week 6, 8 and study endpoint. The results are shown below (see Table 24 Change from Baseline in BDI Score at Weeks 6, 8 and Study Endpoint (ITT LOCF Population), page 72) .

Table 24 Change from Baseline in BDI Score at Weeks 6, 8 and Study Endpoint (ITT LOCF Population)

Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine - Placebo)	P-value
6	174, -10.179 (0.80)	90, -10.272 (1.05)	0.093	(-2.316, 2.502)	0.940
8	174, -11.573 (0.82)	90, -11.182 (1.08)	-0.391	(-2.864, 2.082)	0.756
12	174, -12.504 (0.82)	90, -12.074 (1.08)	-0.430	(-2.923, 2.062)	0.734

Data source: Tables 14.20b and d in Section 11; Appendices 14.20 and 14.20.01 in Appendix C; Appendix I

As for the other efficacy variables, the difference in the adjusted means (Appendix I) was not statistically significant at week 6, 8 or 12.

In the ITT LOCF dataset, a statistically significant treatment by country group interaction was observed at week 12 (p=0.094). When split by country group at week 12 it can be seen that in the African country group, the mean change from baseline was larger in the placebo group that in the paroxetine group at week 12. However, in the other country groups, the mean change from baseline was larger in the paroxetine group. This effect was also seen, to a lesser degree, in the primary parameters (see appendix I), and supports the idea of some evidence of variability across country groups. No treatment by country group interaction was observed in the OC dataset analysis.

A statistically significant baseline score by country group interaction was also observed at week 12. (p=0.064). The mean baseline score in the Middle Eastern country group was much smaller in the placebo group than in the paroxetine group but due to the low numbers of patients, particularly in the placebo group, this was not investigated further.

No significant treatment by age interaction was observed. However, to maintain consistency with other variables, results by age group can be found in the Statistical Appendix I.

5.3.4 Mood and Feelings Questionnaire (MFQ)

Full details of the MFQ results are given in Appendices 14.30 and 14.30.01 (centre 007 only) in Appendix C and summaries of MFQ results are shown in Tables 14.30b and 14.30d in Section 11.

Change from baseline in MFQ score at weeks 6, 8 and study endpoint was analysed. The results are shown below (see Table 25 Change from Baseline in MFQ Score at Weeks 6, 8 and Study Endpoint (ITT LOCF Population), page 73) .

Table 25 Change from Baseline in MFQ Score at Weeks 6, 8 and Study Endpoint (ITT LOCF Population)

Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine/ Placebo)	P-value
6	169, -12.777 (1.10)	88, 12.185 (1.44)	-0.592	(-3.893, 2.708)	0.724
8	169, -15.240 (1.20)	88, -15.257 (1.56)	0.018	(-3.573, 3.608)	0.992
12	169, -16.416 (1.18)	88, -15.678 (1.54)	-0.738	(-4.271, 2.794)	0.681

Data source: Tables 14.30b and d in Section 11; Appendices 14.30 and 14.30.01 in Appendix C; Appendix I

As for the other efficacy variables, the difference in the adjusted means at week 12 ITT LOCF of –0.74, was not statistically significant.

A statistically significant baseline score by country group interaction was observed at week 12 (p=0.054). As for the previous efficacy parameter, the mean baseline score in the Middle Eastern country group was much smaller in the placebo group than in the paroxetine group but for the reasons discussed earlier, this imbalance was not investigated further.

As for the primary efficacy variables, a statistically significant treatment by age interaction was observed (p=0.055) at week 12 LOCF. As before, analyses were repeated by age group and similar patterns of response to the primary efficacy

parameters were observed i.e in the older age group, the mean change from baseline was larger in the paroxetine group at each visit although these differences from baseline were not statistically significant, and in the younger age group, the mean change from baseline was larger in the placebo group This interaction was not observed in the OC dataset.

A statistically significant baseline score by country group interaction was observed at week 12 (p=0.054). As for the analysis of BDI scores, an imbalance of baseline scores in the Middle East country group appeared to be the cause of this observed interaction. This interaction was not investigated further due to low numbers (particularly in the placebo group)

Table 26 Change from Baseline in MFQ Total Score by Age Group, ITT LOCF Population

Age Group ≤ 16 years old					
Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine – Placebo)	P-value
6	112, -11.385 (1.31)	56, -12.503 (1.77)	1.118	(-3.014, 5.249)	0.594
8	112, -13.478 (1.47)	56, -16.361 (1.98)	2.882	(-1.749, 7.514)	0.221
12	112, -15.121 (1.38)	56, -16.609 (1.87)	1.489	(-2.885, 5.862)	0.502

Age Group > 16 years old

Week	Paroxetine N, adjusted mean (S.E.)	Placebo N, adjusted mean (S.E.)	Difference in adjusted means	95% C.I. (Paroxetine – Placebo)	P-value
6	57, -15.268 (2.37)	32, -12.186 (2.85)	-3.082	(-8.717, 2.553)	0.280
8	57, -18.502 (2.43)	32, -13.660 (2.92)	-4.842	(-10.616, 0.931)	0.099
12	57, -19.116 (2.60)	32, -15.009 (3.12)	-4.107	(-10.276, 2.062)	0.189

Data source: Appendix I

5.4 Pharmacoeconomic Variables

5.4.1 Nottingham Health Profile (NHP)

Full details of the NHP are given in Appendices 14.41, 14.42 and 14.43 (14.41.01, 14.42.02 and 14.43.01 give details for the centre 007 patients only) in Appendix C and summaries of NHP results are shown in tables 14.50b and d, 14.51b and d, 14.52b and d, 14.53b and d, 14.54b and d, 14.55b and d and 14.56b and d in section 11.

The mean change (s.e.) from baseline at endpoint in the total scores was –0.17 (0.02) for paroxetine compared with –0.19 (0.02) for placebo in the ITT LOCF dataset. This result was mirrored in all the separate domains of the scale, with no difference being found between paroxetine and placebo in the energy, emotional reaction, pain, physical mobility, sleep or social isolation domains. No statistical analyses were performed on this data.

5.4.2 Euroqol

Full details of the Euroqol are given in Appendices 14.60 and 14.60.01 (details for centre 007 patients only) in Appendix C and summaries of Euroqol results are shown in tables 14.60b and 14.61b in Section 11.

The Euroqol data was collected at baseline and Week 12 only, hence no LOCF dataset was constructed for this variable. In the paroxetine group there was a mean increase (improvement) from baseline of 22.1 points at Week 12 versus a mean increase of 24.0 points in the placebo group. There was no clinically relevant difference between paroxetine and placebo.

5.4.3 Socio-Economic Questionnaire

Appendices 14.70 to 14.75 in Appendix C give full details of the socio-economic questionnaire and summaries can be found in Tables 14.70b, 14.71b, 14.72b, 14.73b, 14.74b, 14.75b and 14.76b in Section 11. The two treatment groups were well matched at baseline .

Again, both groups were well matched at baseline with respect to the patients current employment status. Slightly more patients in the paroxetine group than the placebo group were attending school and slightly more patients in the placebo group than the paroxetine group attending college or further education. These differences were not clinically significant. No differences between the groups were detected at endpoint.

5.5 Psychotherapy Evaluation

Appendices 14.81, 14.81.01, 14.82 and 14.82.01 give full details of the psychotherapy evaluation and summaries of the ITT population can be found in Tables 14.81b and 14.82b. At baseline, no clinically significant differences were seen between the groups in either the number of patients receiving professional involvement or in the therapy that they were receiving. At week 12, the proportion of patients receiving psychotherapy had reduced in both groups to 1.5%.

5.6 Child Global Assessment Scale

Appendices 14.90 and 14.9.1 give full details of the child global assessment scale and summaries of the ITT population can be seen in Table 14.90b. At week 12, the mean score in both groups had decreased, by 52.1% in the paroxetine group and 55.5% in the placbo groups. There was difference between the groups either at baseline or at week 12.

6 Safety Results

Throughout this section, results for the ITT population have been presented (see section 3.13.5 Populations/Data sets to have Evaluated). Table 13.00 in Section 10 lists the patients for whom narratives have been written, which include non-fatal serious adverse experiences and withdrawals due to adverse experiences. There were no deaths on study.

6.1 Extent of Exposure

Details of study medication data are shown in Appendix 13.14 in Appendix B. The doses and summary statistics of dose levels during the study are summarised in Tables 13.14b, 13.15b, 13.16b, 13.17b, 13.18b in Section 10 and shown below (see Table 27 Extent of Exposure to Study Drug, page 77) .

Table 27 Extent of Exposure to Study Drug

	Treatment group					
	Paroxetine n=181*			Placebo n=93		
Maximum dose level	**20mg**	**30mg**	**40mg**	**1**	**2**	**3**
n (%)	103 (56%)	46 (25%)	32 (17%)	52 (55%)	18 (19%)	23 (24%)
Mean (SD)		26.1mg (7.7)				
Mean dose on active treatment (SD)		23.9mg (5.2)				
Dose level at endpoint	**20mg**	**30mg**	**40mg**	**1**	**2**	**3**
n (%)	107 (59%)	43 (23%)	31 (17%)	56 (60%)	17 (18%)	20 (21%)
Mean (SD)		25.8mg (7.7)				

Data source: Tables 13.14b, 13.15b, 13.16b, 13.17b, 13.18b in Section 10 ; Appendix 13.14 in Appendix B

* Patient 377.023.000170 was included in the ITT population in error. This patient did not take any active medication and as such is not included in the above table

More than half the patients (56%) remained on the lowest dose of paroxetine, and the mean maximum daily dose was 26.1mg. Only 17% had dose increases to the maximum dose of 40mg. At the end point 59% were on the lowest dose of 20mg. Patient 005.00232 had a dose reduction from 40mg to 30mg. Patients 009.00226, 029.00022, 030.00185 and 056.00520 had dosage reductions of 30mg to 20mg.

These reductions were at some point during the study period, not necessarily at endpoint.

The numbers of patients at the different dose levels in the placebo group were very similar to those of the paroxetine group.

6.2 Adverse Experiences

Treatment emergent adverse experiences are detailed in Appendices 15.1 in Appendix D. These emergent adverse experiences are summarised by body system in Table 15.01B in Section 12

In the paroxetine group, 120 patients (65.9%) experienced at least one emergent adverse experience during the active treatment phase compared with 55 (59.1%) patients in the placebo group. The most commonly occuring adverse experiences in both treatment groups were in the digestive system (paroxetine 35.2%; placebo 22.6%) and in the nervous system (paroxetine 35.2%; placebo 23.7%)

The most commonly occurring individual experiences (i.e. those occurring in at least 3% of patients in any group) during active treatment are shown (see Table 28 The Number (%) of Patients with the Most Frequent (i.e. at least 3%) Reported Treatment Emergent Adverse Experiences (AEs) During Active Treatment Regardless of Treatment Attribution in Descending Order for Paroxetine, page 79).

Table 28 The Number (%) of Patients with the Most Frequent (i.e. at least 3%) Reported Treatment Emergent Adverse Experiences (AEs) During Active Treatment Regardless of Treatment Attribution in Descending Order for Paroxetine

AEs by Preferred Term	Treatment group	
	Paroxetine n=182	Placebo n=93
Patients with at least 1 AE	**120 (65.9%)**	**55 (59.1%)**
Nausea	44 (24.2%)	14 (15.1%)
Headache	34 (18.7%)	21 (22.6%)
Dizziness	19 (10.4%)	7 (7.5%)
Somnolence	17 (9.3%)	6 (6.5%)
Decreased appetite	14 (7.7%)	3 (3.2%)
Infection	14 (7.7%)	6 (6.5%)
Asthenia	12 (6.6%)	9 (9.7%)
Insomnia	9 (4.9%)	3 (3.2%)
Emotional Lability	8 (4.4%)	3 (3.2%)
Vomiting	7 (3.8%)	3 (3.2%)
Abdominal pain	6 (3.3%)	9 (9.7%)
Tremor	6 (3.3%)	1 (1.1%)
Respiratory disorder	5 (2.7%)	3 (3.2%)
Diarrhea	4 (2.2%)	3 (3.2%)
Rhinitis	3 (1.6%)	3 (3.2%)
Nervousness	2 (1.1%)	3 (3.2%)
Pharyngitis	2 (1.1%)	5 (5.4%)
Bronchitis	1 (0.5%)	3 (3.2%)
Cystitis	1 (0.5%)	3 (3.2%)

Data source: Table 15.011b in Section 12; Appendix 15.1 in Appendix D

The most common adverse experiences for both paroxetine and placebo patients were nausea and headache.

The number of patients with adverse experiences are shown by baseline body weight by body system on Table 15.10B and by prefered term on Table 15.101B, Section 12. Gender specific figures are given on Tables 15.102B and 15.103B in Section 12. The percentages show no clear relationship between body weight and adverse experience.

The majority of the adverse experiences in both groups had been reported within the first two weeks of active treatment . The figures are summarised in Tables

15.08B 15.081B, 15.082B and 15.083B in Section 12. Ninety patients (49.5%) in the paroxetine group and 35 (37.6%) in the placebo group had reported adverse experiences within this period (Table 15.081B; Section 12). The most common experiences early in treatment were nausea, somnolence and headache. The adverse experiences during the first two weeks of active treatment are shown by body weight and body system in Table 15.09B, and by body weight and preferred term in Table 15.091B, Section 12. The figures show no clear relationship between body weight and adverse experience.

Few adverse experiences were reported in either group during the down titration phase of treatment (Table 15.11B, Section 12). Only 19 patients in the paroxetine group (14.3%), and six patients in the placebo group (8.3%) reported adverse experiences during this phase. Adverse experiences during the down titration phase are shown by preferred term in Table 15.111B.

6.2.1 Adverse Experiences by Severity

The numbers of patients with emergent adverse experiences during the active treatment phase, classed as severe in each treatment group are shown in Tables 15.04B, 15.041B, 15.042B and 15.043B in Section 12. In the paroxetine group 20 patients (11.0%) had severe adverse experiences as did six placebo group patients (6.5%). The number of severe experiences in both treatment groups was low, the most common being of the nervous system with 10 patients (5.5%) in the paroxetine group and three patients (3.2%) in the placebo group reporting severe adverse experiences of the nervous system.

The distribution of the most common adverse experiences occurring in two or more patients for each treatment group is shown below (see Table 29 The Distribution of the Most Common Severe Adverse Experiences for each Treatment Group. Number (%) of Patients, page 81)

Table 29 The Distribution of the Most Common Severe Adverse Experiences for each Treatment Group. Number (%) of Patients

AEs by Preferred Term	Treatment group	
	Paroxetine n=182 Severe AEs	Placebo n=93 Severe AEs
Headache	3 (1.6%)	0
Nausea	3 (1.6%)	0
Emotional lability	2 (1.1%)	2 (2.2%)
Agitation	2 (1.1%)	0
Insomnia	2 (1.1%)	0
Somnolence	2 (1.1%)	0

Data source: Table 15.041b in Section 12; Appendix 15.1 in Appendix D

There were few adverse experiences that were classed as severe throughout the study. The majority of events were mild or moderate in severity for both treatment groups. The most common severe adverse experiences for paroxetine patients were headache and nausea and for placebo patients emotional lability, but all these only occurred in approximately 2% of the patients.

6.2.2 Adverse Experiences Thought to be Drug-related

In this study 31 (17.0%) patients treated with paroxetine and 4 (4.3%) patients treated with placebo experienced one or more adverse experiences which were thought to be drug-related (see Tables 15.05B, 15.051B, 15.052B and 15.053B in Section 12). In the paroxetine group the most commonly reported drug related adverse experiences were of the digestive system with 20 patients (11.0%), followed by the nervous system with 14 patients (7.7%), compared with 1 patient (1.1%) and 2 patients (2.2%) in the placebo group, respectively.

Emergent AEs considered to be related to study medication during the active treatment phase of the study are detailed in Table 15.051b. The most common drug-related adverse experiences in the paroxetine group during active treatment were nausea, (16 patients, 8.8%), somnolence (six patients, 3.3%) and headache, decreased appetite and insomnia each in four patients (2.2%). These same events during active treatment were considered drug related in the placebo group in two or fewer patients (2.2% or less).

6.3 Dose Reduction for Adverse Experiences

Four patients on paroxetine and one on placebo required a dose reduction for adverse experiences (Appendix 15.1 in Appendix D).

Paroxetine

Patient 377.005.00232, a 15 year old Caucasian male. On day 19 the patient experienced mild dizziness and mild headache both considered possibly related to study drug. The patients dose was reduced from 40mg to 30mg. No corrective therapy was administered. On day 77 the patient experienced Myoclonus/repetitive involuntary muscle contractions of moderate intensity in the neck and arm. The AE was considered to be serious and possibly related study medication. The study medication was stopped. No corrective therapy was administered.

Patient 377.029.00022, a 17 year old Caucasian female. On day 22 the patient experienced moderate dizziness and nausea considered possibly related to study drug. The patient was on 30 mg paroxetine and a dose reduction was implemented.

Patient 377.030.000185, a 15 year old Caucasian female. On day 5 the patient felt dazed and "spaced out", a feeling which lasted six days and was considered possibly related to study drug. The dose of study drug, 30 mg, was decreased to 20mg but increased again back to 30mg one week later. On day 20 the patient felt physically tired, a feeling which lasted 19 days. The investigator considered this event to be probably unrelated to study medication, but the dose was again decreased from 30 mg back to 20mg She remained on this dose until the end of the study.

Patient 377.049.00490, a 14 year old oriental female. On day 11 the patient experienced a rash which lasted 31 days and was considered moderate in intensity and probably unrelated to study drug. The patient was on 20 mg paroxetine at the onset of the rash. A dose increase to 30 mg took place during the time she had the rash, but the dose was reduced again down to 20 mg after four days. Ten days later the dose was again increased to 30 mg. The patient remained on this dose until the down titration period ot Week 12.

Placebo

Patient 377.041.00293, a 15 year old Caucasian female. On day 15 the patient experienced moderate somnolence considered possibly related to study drug. A dose reduction was implemented.

6.4 Adverse Experiences Requiring Corrective Treatment

There are no summary tables for patients who required corrective therapy. However, most of the experiences reflected the normal collection of problems in adolescents and very few were considered related or possibly related to study drug (Appendix 15.1, Appendix D).

6.5 Deaths

There were no deaths during the study or within 30 days of the last dose of study drug (Table 15.12b, Section 12 and Appendix 15.12 in Appendix D).

6.6 Serious Adverse Experiences

A serious adverse experience was defined as any event which was fatal, life threatening, disabling or incapacitating or resulted in hospitalisation, prolonged a hospital stay or was associated with congenital abnormality, cancer or overdose (either accidental or intentional).

Tables 15.07B, 15.071B, 15.072B and 15.073B in Section 12 and Appendix 15.1 in Appendix D give details of serious adverse experiences. Twenty two (12.1%) patients in the paroxetine group, and six (6.5%) patients in the placebo group experienced serious treatment emergent adverse events, which occurred during the treatment phase.

A summary of the serious adverse experiences which started during active treatment and occurred in more than one patient are shown below (see Table 30 The Number (%) of Patients with Serious Adverse Experiences, page 84) .

Table 30 The Number (%) of Patients with Serious Adverse Experiences Occurring in More than One Patient

AE Body system Preferred term	Treatment group Paroxetine n=15 (8.2%)	 Placebo n=4 (4.3%)
Digestive system		
Nausea	2 (1.1%)	0
Nervous system		
Agitation	3 (1.6%)	0
Depression	2 (1.1%)	0
Emotional lability	6 (3.3%)	3 (3.2%)

Data source: Appendix 15.1 in Appendix D; Table 15.071B, Section 12.
The number of patients within a body system are not additive since a patient can have more than one withdrawal reason within a Body System

In addition, a few patients experienced serious adverse experiences either before any study drug was dispensed but after consent was given, during the placebo screening phase, or after study medication was stopped. None of the SAEs which occurred during this study was fatal.

Narratives for all patients who had a serious adverse experience are presented in Table 16 (Section 12) and brief details for all patients who experienced non-fatal serious events are given below (see tables Tables 13.2 and 13.2b and Appendices 13.2 in Appendix B and 15.1 in Appendix D). These include an additional patient in the placebo group (patient 377.041.00294) whose adverse expeience was classified under Body as a Whole although she suffered also from emotional lability.

Paroxetine

Patient 377.005.00232, a 15 year old Caucasian male. On day 77 the patient experienced myoclonus, described by the investigator as repetitive involuntary muscle contractions in his neck and arm. The investigator considered the experience to be moderate in severity and possibly related to study medication. It lasted 14 hours. The patient was on 30 mg paroxetine when the adverse experience started. Study drug was stopped but no corrective therapy was given.

Patient 377.005.00234, a 15 year old Caucasian female. On day 32, three days post-treatment the patient experienced worsening depression which required

hospitalization and lasted 11 days. The investigator considered the experience to be severe but unrelated to study medication.

Patient 377.009.00225, a 17 year old female of other race. On day 79 the patient attempted suicide. The investigator considered the experience to be unrelated to study medication. The patient was on 20 mg paroxetine when the attempt occurred. Study drug was stopped but no other corrective therapy was given.

Patient 377.011.00061, a 17 year old Caucasian female. On day 74 the patient took an intentional overdose of drug. The investigator considered the experience to be severe and possibly related to study medication. It lasted 2 days. The patient was on 40 mg paroxetine when the adverse experience started. Study drug was stopped and appropriate therapy was given.

Patient 377.023.00170, a 16 year old Caucasian male. On day 9, and two days post-treatment, the patient became hostile and aggressive leading to assault following alcohol abuse and requiring police intervention. The patient experienced amnesia. The investigator considered the experience which lasted two days to be moderate in severity. No corrective therapy was given.

Patient 377.029.00006, a 13 year old Caucasian male. On day 67 the patient came down with tick fever lasting 10 days resulting from a tick bite. The investigator considered the event to be severe but unrelated to study medication. The patient was on 20 mg paroxetine when the adverse experience started. There was no change in study drug treatment and other appropriate therapy was given for the infection.

Patient 377.029.00015, a 13 year old Caucasian male. On day 66 the patient experienced tonic clonic convulsions The investigator considered the experience to be moderate in severity and unrelated to study medication. The convulsions lasted five minutes. The patient was on 20 mg paroxetine when the adverse experience started. Study drug was stopped but no corrective therapy was given. A second episode of convulsions occurred on Day 68, two days after study drug was stopped. This was again considered unrelated to study drug and no corrective therapy was given.

Patient 377.030.00181, a 17 year old Caucasian female. On day 56 the patient experienced emotional lability and worsening depression and was considered a suicide risk. The investigator considered the experience to be moderate in severity and unrelated to study medication. It lasted 25 days. The patient was on 40 mg paroxetine when the adverse experience started. Study drug was stopped and other corrective therapy was given.

Patient 377.040.00298, a 17 year old Caucasian female. On day 13 the patient experienced worsening depression which the investigator considered to be severe but unrelated to study medication. It lasted 22 days. The patient was on 20 mg paroxetine when the adverse experience started. The patient continued on study drug and other corrective therapy was given.

Patient 377.041.00289, a 18 year old Oriental female. On day 87, during the down titration dosing period, the patient experienced severe renal colic which lasted two days. The investigator considered the experience to be probably unrelated to study medication. The patient was on 30 mg paroxetine when the adverse experience started. Study drug was stopped and no other corrective therapy was given.

Patient 377.041.00290, a 15 year old Caucasian female. On day 83, during the down titration dosing period the patient experienced moderate anxiety which required hospitalisation because the patient was unable to cope at home. The investigator considered the experience, which lasted 106 days, to be unrelated to study medication. The patient was on 20 mg paroxetine when the adverse experience started. Study drug was continued.

Patient 377.041.00292, a 15 year old Caucasian female. On day 8 of the treatment period the patient experienced a severe fit of hysterics lasting one day, which was considered by the investigator unrelated to study medication. The patient was on 30 mg paroxetine when the adverse experience started. Study drug was stopped but no other corrective therapy was given.

Patient 377.042.00310, a 15 year old female of other race. On day 23 the patient experienced emotional lability and was parasuicidal for one day. The investigator considered the experience to be mild in severity and possibly related to study medication. The patient was on 20 mg paroxetine when the adverse experience started. Study drug was stopped but no other corrective therapy was given.

Patient 377.042.00315, a 15 year old female of other race. On day 7 the patient experienced agitation and anxiety lasting 16 days. The investigator considered the experiences to be severe and related to study medication. The patient was on 20 mg paroxetine when the adverse experience started. Study drug was stopped on Day 13, and other corrective therapy was given for insomnia, but three days later the patient experienced emotional lability leading to an intentional overdose. This was considered moderately severe and possible related to study drug. No action or other corrective therapy was given.

Patient 377.042.00317, an 18 year old female of other race. On day 9 the patient experienced mild nausea, and on day 14, one day after treatment with study medication was stopped, the patient was found to be pregnant. The investigator considered the experience to be unrelated to study medication. No corrective therapy was given.

Patient 377.042.00554, a 16 year old female of other race. On day 67 the patient took an overdose of study medication which was described as Neurosis and an Accidental Overdose. The investigator considered the experience to be mild in severity and unrelated to study medication. The patient was on 30 mg paroxetine when the adverse experience started. Study drug was continued. Other corrective therapy was given for a non-serious AE of infection.

Patient 377.042.00555, a 16 year old Caucasian female. On day 13 the patient experienced severe emotional lability in the form of agitation, accompanied by decreased appetite, moderate dizziness, severe insomnia and nausea, which continued. The investigator considered the experiences to be related to study medication. The patient was on 30 mg paroxetine when the adverse experience started. Study drug was stopped but no other corrective therapy was given.

Patient 377.042.00557, a 17 year old female of other race. The patient experienced facial angiodema during the placebo screening phase of the study. The investigator considered the experience to be related to study medication, and because the patient would have been randomised to paroxetine, this case is listed under that drug rather than placebo. Study drug was stopped and other corrective therapy was given.

Patient 377.042.00561, a 14 year old Caucasian female. On day 0 the patient experienced severe nausea and vomiting accompanied by moderate tremor and agitation all of which were considered by the investigator to be related to study medication. At the same time the patient also experienced mild blurring of vision, dry mouth and postural hypotension which were considered possibly related to study drug. The patient was on 20 mg paroxetine when the adverse experiences started. Study drug was stopped and other corrective therapy was given were appropriate.

Patient 377.049.00479, a 17 year old male of other race. On day 35 the patient experienced severe irritability and nervousness considered possibly related to study drug. This was followed on day 37 by severe emotional lability with suicidal intent, considered unrelated to study drug. The patient had been on 40 mg

paroxetine the week before the first event occurred but on Day 35 study medication was stopped. No other corrective therapy was given.

Patient 377.053.00508, a 14 year old Caucasian female. On day 53 the patient experienced mild emotional lability and made a suicide attempt. The investigator considered the experience to be unrelated to study medication. The patient was on 20 mg paroxetine when the adverse experience occurred and the investigator increased the dose of study drug.

Patient 377.057.00539, a 17 year old Caucasian female. On day 99, the day after treatment with study drug was stopped, the patient experienced acute appendicitis, considered to be unrelated to study drug. Other corrective therapy was given.

Placebo

Patient 377.005.00231, a 14 year old Caucasian female. On day 30 the patient experienced severe emotional lability and attempted suicide. The investigator considered the experiences to be possibly related to study medication. Study drug was stopped. No other corrective therapy was given. The following day the patient experienced moderate somnolence, considered unrelated to study drug, and on day 51 had the gastrointestinal disorder appendicitis also considered unrelated to study drug.

Patient 377.010.00068, a 14 year old Caucasian female. On day 82 the patient experienced mild emotional lability and tried to overdose on benzodiazepines. The investigator considered the experiences to be unrelated to study medication, but study drug was stopped and no other corrective therapy was given.

Patient 377.029.00024, a 16 year old Caucasian female. On day 29 the patient experienced emotional lability which was continuing and attempted self damaging acts and suicide. The investigator considered these experiences to be unrelated to study medication, but study drug was stopped and no other corrective therapy was given.

Patient 377.041.00294, a 14 year old Caucasian female. On day 86 the patient experienced moderate emotional lability and took a tentative overdose in a suicide attempt. The investigator considered the event to be possibly related to study medication. The patient continued in the study and other corrective therapy was given.

Patient 377.047.00619, a 17 year old Caucasian female. During the screening period the patient experienced moderate emotional lability and tried to overdose

on bromazepam. The relationship to study medication was not given, but the patient continued in the study. No other corrective therapy was given.

Patient 377.049.00458, an 18 year old female of other race. On day 24 the patient experienced severe irritability which was considered to be unrelated to study medication. The patient continued in the study and no other corrective therapy was given.

In addition two patients experienced serious adverse events before study medication was dispensed that lead to the patients being withdrawn from the study.

Patient 377.005.09286, a 17 year old Caucasian female, experienced severe worsening depression which lasted 12 days,

Patient 377.049.09576, a 17 year old male of other race, experienced severe psychosis. Both were given corrective therapy.

6.7 Withdrawals Due to Adverse Experiences

Twenty patients in the active treatment phase and 1 patient in the down titration phase in the paroxetine group (11.0%) and seven patients in the placebo group (7.5%) experienced one or more emergent adverse experiences during active treatment with study drug resulted in withdrawal from the study. In both groups the majority of these were of the nervous system; paroxetine 15 patients (8.2%) and placebo 5 patients (5.4%) (Table 15.06B; Section 12). Details of the adverse experiences which started during active treatment and resulted in the withdrawal of more than one patient from the study are shown below (see Table 31 The Number (%) of Patients Withdrawn for At Least One AE Occurring in More Than One Patient in the ITT population, page 90) .

Data anomalies: Table 13.13b in Section 10, records 20 patients in the paroxetine group and 6 in the placebo group withdrawing from the ITT population due to an adverse experience whereas table 15.061b in Section 12 details 19 patients in the paroxetine group and 7 patients in the placebo group. For the purpose of stating the worst case scenario for paroxetine the numbers used where applicable are 20 patients in the paroxetine group and 7 patients in the placebo group withdrawing from the ITT population. Two further patients who withdrew due to an AE (377.005.00263 and 377.042.557) were randomised to receive

paroxetine but were excluded from the ITT population. Therefore, the figures for the all randomised patient population used are 22 patients in the paroxetine and 7 patients in the placebo group withdrawing due to adverse experiences .

Table 31 The Number (%) of Patients Withdrawn for At Least One AE Occurring in More Than One Patient in the ITT population

AE Body system Preferred term	Treatment group Paroxetine n=20* (11.0%)	Placebo n=7 (7.5%)
Body as a whole general		
Headache	2 (1.1%)	0
Digestive system*		
Nausea	6 (3.3%)	1 (1.1%)
Vomiting	2 (1.1%)	0
Nervous system		
Agitation	3 (1.6%)	0
Anxiety	2 (1.1%)	0
Emotional lability	5 (2.7%)	3 (3.2%)
Somnolence	4 (2.2%)	1 (1.1%)

Data source: Appendix 15.1 in Appendix D; Table 15.061B, Section 12.

* patient 377.042.00317 withdrew 1 day after last dose due to unintended pregnancy, not included in above table

Narratives for 7 paroxetine patients and 4 placebo patients who were withdrawn for non-serious adverse events are included in Table 17 in Section 12 and brief details are given below. The remaining patients had also experienced serious adverse experiences as discussed above and their narratives are presented in Table 16 Section 12 (non-fatal serious adverse experiences) as shown above (see 6.6 Serious Adverse Experiences, page 83).

Paroxetine

Patient 377.029.00013, a 14 year old Caucasian male. On day 1 the patient felt tiredness which lasted 14 days, followed on day 5 by heartburn lasting ten days, with severe nausea on day 11 for three days and again on day 15 of moderate intensity, all considered related to study drug. Also on day 11 the patient had an upper respiratory tract infection, considered unrelated to study drug and did not lead to withdrawal, and dyspnoea, considered probably unrelated. By day 16 the dyspnoea was described as severe, and the patient was taken off study drug. The patient was on 20 mg study drug. Other medication was given.

Patient 377.029.00016, a 15 year old Caucasian female. On day 0 the patient felt daytime sleepiness which lasted 8 days, By day 8 the daytime sedation was becoming worse and was now severe. As the effect was considered related to study drug the patient, who had been on 20 mg, was taken off study drug and withdrawn from the study.

Patient 377.029.00035, a 16 year old Caucasian male. On day 7 the patient experienced moderate nausea which lasted 13 days and was considered possibly related to study drug. The patient was on 20 mg study drug when medication was stopped and the patient withdrawn from the study.

Patient 377.029.00040, a 12 year old Caucasian male. On day 0 the patient felt moderate nausea and mild somnolence, both considered related to study drug. The patient was on 20 mg study drug when medication was stopped.

Patient 377.029.00047, a 16 year old Caucasian female. On day 11 the patient experienced moderately severe daytime sedation which lasted 24 days, was considered possibly related to study drug and lead to withdrawal. In addition the patient experienced headache on Day 17 which was mild, and again on Day 24 which was described as moderately severe. The patient was on 20 mg study drug when medication was stopped on Day 27, and the patient withdrawn from the study.

Patient 377.047.00620, an 18 year old Caucasian male. On day 0 the patient experienced moderate diarrhoea and palpitations considered possibly related to study drug. The patient had just started on 20 mg paroxetine when study drug was stopped and the patient withdrawn from study.

Patient 377.058.00195, a 17 year old Caucasian female. On day 72 the patient experienced moderately severe vomiting which was considered possibly related to study drug. The patient was on 40 mg paroxetine. Study drug was stopped and the patient withdrawn from study.

Placebo

Patient 377.009.00227, an 18 year old Caucasian female. On the day treatment started the patient experienced mild nervousness lasting six days considered possibly related to study drug, Study drug was stopped after two days, and the patient withdrawn from study.

Patient 377.029.00030, a 13 year old Caucasian male. On the day the patient started treatment he experienced mild nausea and stopped the treatment. This was considered to be probably unrelated to study drug and no corrective therapy was administered

Patient 377.054.00512, a 13 year old Caucasian female. On day 56 the patient had a pharyngeal abscess considered probably unrelated to study drug. Study drug was stopped and other corrective therapy given.

Patient 377.056.00518, an 18 year old Caucasian male. On day 7 the patient experienced moderate drowsiness lasting six days considered possibly related to study drug, followed the next day by severe asthenia lasting five days and considered related to study drug. Study drug was stopped, and the patient withdrawn from study.

6.8 Vital Signs

Appendix 15.2 (Appendix E) details vital signs values by treatment group and patient, and vital signs values meeting sponsor-defined clinical concern criteria by treatment group and parameter respectively. Table 15.22b in Section 12 summarises mean vital signs values during the study and these are further summarised by changes from baseline to Week 12 in Table 15.23b Section 12.

The table below summarises the mean vital signs at baseline and at Week 12 for both treatment groups (see Table 32 Mean (s.d.) Vital Signs at Baseline and Week 12, page 93).

Table 32 Mean (s.d.) Vital Signs at Baseline and Week 12

Vital Sign / Time Period	Treatment group			
	Paroxetine		Placebo	
	n	Mean (s.d.)	n	Mean (s.d.)
Sitting DBP (mm Hg)				
Baseline	179	70.2 (9.12)	92	69.3 (9.27)
Week 12	130	69.6 (10.15)	69	67.2 (8.39)
Standing DBP (mm Hg)				
Baseline	178	71.6 (9.91)	92	70.9 (9.21)
Week 12	129	70.6 (9.69)	69	69.6 (8.64)
Sitting SBP (mm Hg)				
Baseline	179	110.7 (11.52)	92	108.5 (11.43)
Week 12	130	109.1 (12.67)	69	107.1 (11.77)
Standing SBP (mm Hg)				
Baseline	178	109.8 (12.41)	92	108.7 (13.21)
Week 12	129	108.5 (12.39)	69	107.2 (11.33)
Sitting Pulse Rate (bpm)				
Baseline	178	76.6 (10.57)	91	75.5 (9.30)
Week 12	129	77.1 (9.96)	69	76.4 (9.68)
Standing Pulse Rate (bpm)				
Baseline	177	82.2 (12.01)	91	80.4 (10.98)
Week 12	129	81.8 (10.31)	69	81.7 (9.87)
Weight (kg)				
Baseline	180	57.6 (13.51)	92	58.2 (11.53)
Week 12	118	57.8 (14.01)	62	57.6 (11.13)

Data source: Table 15.22b in Section 12; Appendix 15.2 in Appendix E
DBP = Diastolic blood pressure; SDP = Systolic blood pressure
n = total number of patients assessed at that visit

Changes in mean vital signs values from Baseline to Week 12 were small for both treatment groups and of no clinical concern (Table 15.23b, Section 12).

Table 15.21b in Section 12 summarises the number of patients in the treatment groups with vital signs values meeting sponsor-defined clinical concern criteria and these are shown in the table below (see Table 33 The Number (%) of Patients with Vital Signs Values Meeting Sponsor-defined Clinical Concern Criteria During the Study, page 94).

Table 33 The Number (%) of Patients with Vital Signs Values Meeting Sponsor-defined Clinical Concern Criteria During the Study

Vital Sign Sponsor-defined Clinical Concern Criteria	Treatment group Paroxetine n=182	 Placebo n=93
Sitting Diastolic BP (mm Hg)		
H (>105mmHg and increase≥30mmHg)	8 (4.4%)	5 (5.4%)
L (<50mmHg and decrease≥20mmHg)	27 (14.8%)	17 (18.3%)
Standing Diastolic BP (mm Hg)		
H (>105mmHg and increase≥30mmHg)	8 (4.4%)	4 (4.3%)
L (<50mmHg and decrease≥20mmHg)	24 (13.2%)	17 (18.3%)
Sitting Systolic BP (mm Hg)		
H (>180mmHg and increase≥40mmHg)	0	0
L (<90mmHg and decrease≥30mmHg)	24 (13.2%)	17 (18.3%)
Standing Systolic BP (mm Hg)		
H (>180mmHg and increase≥40mmHg)	0	2 (2.2%)
L (<90mmHg and decrease≥30mmHg)	33 (18.1%)	16 (17.2%)
Sitting Pulse Rate (bpm)		
H (>120bpm and increase≥30bpm)	12 (6.7%)	4 (4.3%)
L (<50bpm and decrease≥30bpm)	7 (3.8%)	1 (1.1%)
Standing Pulse Rate (bpm)		
H (>120bpm and increase≥30bpm)	18 (9.9%)	10 (10.8%)
L (<50bpm and decrease≥30bpm)	9 (5.1%)	4 (4.3%)
Weight (kg)*		
H (increase≥7%)	12 (8.2%)	5 (6.8%)
L (decrease≥7%)	5 (3.4%)	4 (5.5%)

Data source: Table 15.21b in Section 12; Appendix 15.2 in Appendix E

* weight changes based only on patients with both baseline and post-baseline values i.e paroxetine n=146, placebo n=73

Very few patients experienced an increase in sitting or standing blood pressure values meeting sponsor-defined clinical concern criteria. For both paroxetine and placebo groups 13 to 18% of patients showed a decrease in sitting or standing blood pressure values which met sponsor-defined clinical concern criteria. However, there were no differences between the paroxetine and placebo treatment groups. Ten percent of patients showed raised pulse rates meeting sponsor-defined clinical concern criteria, but again these were the same in both treatment groups. Similarly the flagged changes in weight during the study were similar in the two treatment groups. Paroxetine showed a similar safety profile to that of placebo in terms of vital signs of clinical concern.

6.9 Electrocardiograph Data

Table 13.31 in Section 10 and Appendix 13.31 in Appendix B detail the the number of patients with clinically significant abnormalities in their ECGs at screening. Only 1 patient (0.5%) in the paroxetine group and no patients in the placebo group were recorded as having an abnormal ECGs.

6.10 Laboratory Tests

6.10.1 Laboratory Values Meeting Sponsor-defined Clinical Concern Criteria

The table below shows the values of laboratory parameters meeting sponsor-defined clinical concern criteria that were used in the study (see Table 34 Laboratory Values of Potential Clinical Concern, page 96).

Please note: Due to a calibration error at the xxxxxxxxxxxxxxxxxxxxxxx in the xx the creatinine values for 13 patients in this study were incorrectly reported as 17 micromoles/L higher than the true values. As a consequence of this, the creatinine values for 3 of these patients, placebo patients 377.042.00562 and 377.042.00397 and paroxetine patient 377.058.0589, were incorrectly reported to be in range when they should in fact have been reported as low. The correct laboratory values have been forwarded to the investigators concerned and are not considered to be of clinical significance.

Table 34 Laboratory Values of Potential Clinical Concern

Laboratory parameter	Units	Levels of potential clinical concern
Hematology		
Hemoglobin	g%	≤9.5
Hematocrit	%	≤32
White blood cells	$x10^9$/L	≤2.8 or≥16
Neutrophils	%	≤15
Lymphocytes	%	≥75
Monocytes	%	≥15
Basophils	%	≥10
Eosinophils	%	≥10
Platelets	$x10^9$/L	≤75 or ≥700
Bands	%	≥10
Segmented neutrophils	%	≤15
Red blood cells males	%	≥8
females	%	≥10
Clinical Chemistry		
Urea	mmol/L	≥10.71
Serum creatinine	µmol/L	≥176.80
Total bilirubin	mmol/L	≥34.20
SGOT (AST)	U/L	≥150
SGPT (ALT)	U/L	≥165
Alkaline phosphatase	U/L	≥390
Albumin	g/l	≤25.0
Calcium	mmol/l	2.05-3.00
Protein	g/l	45-100
Urine		
RBC	hpf	≥8.01
WBC	hpf	≥10.01

Data source: Appendix Lab 001 in Appendix F

As references ranges differed by age and by centre they are not included on this table, but the full listings of references ranges used in the study are in Appendix F.

The proportions of patients with laboratory values meeting sponsor-defined clinical concern criteria are summarised in Table 15.3b and 15.34B in Section 12 and are presented below for those parameters with one or more value of concern in either treatment group (see Table 35 Number (%) of Patients with Laboratory Values Meeting Sponsor-defined Clinical Concern Criteria During the Study, page 97).

Table 35 Number (%) of Patients with Laboratory Values Meeting Sponsor-defined Clinical Concern Criteria During the Study

		Treatment group	
Laboratory Parameter	**High/Low**	**Paroxetine n=182**	**Placebo n=93**
Clinical Chemistry			
Alkaline phosphatase	H	11 (6.1%)	2 (2.2%)
Calcium	L	1 (0.6%)	0
Total Bilirubin	H	0	1 (1.1%)
Haematology			
Haematocrit	L	3 (1.7%)	2 (2.2%)
White blood cell count	H	1 (0.6%)	0
Eosinophils	H	9 (5.0%)	4 (4.3%)
Monocytes	H	0	1 (1.1%)
Neutrophils (segmented)	L	0	1 (1.2%)
Others			
Serum BHCG pregnancy test	+ve	1 (1.1%)	0
Urine blood	+ve	16 (19.3%)	12 (25.5%)
Urine glucose	+ve	0	1 (2.1%)
Urine protein	+ve	11 (13.3%)	7 (14.9%)

Data source: Table 15.3b and 15.34B in Section 12; Appendices 15.31, 15.32, 15.33 in Appendix F

A total of 53 paroxetine patients (29.1%) had one or more laboratory values meeting sponsor-defined clinical concern criteria compared with 31 placebo patients (33.3%). The most common clinical chemistry parameter was high alkaline phosphatase levels, occurring in 11 paroxetine patients and two in the placebo group. A high eosinophil count occurred in 5% and 4.3% of patients in the paroxetine and placebo groups, respectively; this was probably due to the few patients who had concomitant infections during the study. As shown in the above table (see Table 35 Number (%) of Patients with Laboratory Values Meeting Sponsor-defined Clinical Concern Criteria During the Study, page 97) paroxetine showed as good a safety profile as placebo in terms of laboratory values of clinical concern.

7 Discussion

The primary objective of this study was to compare the efficacy of paroxetine with that of placebo in the treatment of adolescent depression. The secondary objective was to compare the safety of the two treatments.

The 12 week study was of double-blind, randomized, multicentre design. Two hundred and sixty four patients were to be randomised in a 2:1 ratio of paroxetine to placebo. The final ITT population consisted of 182 paroxetine patients and 93 placebo patients.

The two treatment groups were well matched for all baseline characteristics, demographic variables and medical history. From the ITT population, there was no difference between the treatment groups in the proportions of patients who withdrew during the study (30.2% on paroxetine treatment Vs 25.8% of placebo treatment).

None of the primary or secondary efficacy variables indicated any clinical or statistical significant treatment effect. A statistically significant treatment by age interaction was observed for both primary efficacy parameters and most of the secondary parameters where numerical trends indicated that for patients greater than 16 years of age, patients on paroxetine had better response rates.

Similar proportions of patients from both treatment groups experienced adverse experiences (65.9% of paroxetine treated patients Vs 59.1% of placebo patients). The proportion of patients in the ITT population with serious adverse experiences was slightly higher for the paroxetine group compared with placebo patients (12.1% paroxetine Vs 6.5% placebo). No patients died during the course of the study. The proportion patient withdrawing from the ITT population due to adverse experiences was slightly higher in the paroxetine group (11.0%) compared to placebo (7.5%) but this difference was not statistically significant.

Regarding other aspects of the safety analysis, changes in mean vital signs values from baseline to week 12 were small for both treatment groups and of no clinical concern. Similar proportions of patients in the two treatment groups had one or more laboratory value meeting sponsor defined clinical concern criteria (paroxetine 29.1% Vs placebo 33.3%).

8 Conclusions

The results failed to show any superiority for paroxetine over placebo in the treatment of adolescent depression. A significant age by treatment interaction was detected in both of the primary efficacy variables and most of the secondary, indicating evidence of a different treatment effect dependent on age. Therefore conclusions drawn on the data presented overall should be treated with caution.

Paroxetine was well tolerated with no unexpected finding regarding adverse experiences, vital signs or laboratory values.

9 References

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10 Source Tables: Study Population

Confidential

SmithKline Beecham

Peroxetine

BRL-029060

Narrative Location Table

377

Table 13.00

SB Document Number: BRL-029060/RSD-100WFW/1

Table 13.00 List of Patient Narratives

PID	Deaths	Non-Fatal Serious AEs	AE leading to withdrawal
Paroxetine			
377.005.00232		Y	Y
377.005.00234		Y	
377.005.00263			Y
377.009.00225		Y	Y
377.011.00061		Y	Y
377.023.00170		Y	
377.029.00006		Y	
377.029.00013			Y
377.029.00015		Y	Y
377.029.00016			Y
377.029.00035			Y
377.029.00040			Y
377.029.00047			Y
377.030.00181		Y	Y
377.040.00298		Y	
377.041.00289		Y	Y
377.041.00290		Y	
377.041.00292		Y	Y
377.042.00310		Y	Y
377.042.00315		Y	Y
377.042.00317		Y	Y
377.042.00554		Y	

377.042.00555		Y	Y
377.042.00557		Y	Y
377.042.00561		Y	Y
377.047.00620			Y
377.049.00479		Y	Y
377.053.00508		Y	
377.057.00539		Y	
377.058.00195			Y
Placebo			
377.005.00231		Y	Y
377.009.00227			Y
377.010.00068		Y	Y
377.029.00024		Y	Y
377.041.00294		Y	
377.047.00619		Y	
377.049.00458		Y	
377.054.00512			Y
377.056.00518			Y
No therapy dispensed			
377.005.09286		Y	Y
377.049.09576		Y	Y

Table 13.01

Summary of Patients Evaluated

	Treatment			
	Paroxetine	Placebo	No Therapy Dispensed	Total
Total Patients Entered	187	99	38	324
Intention to Treat Population	182	93		275
Per Protocol Population	130	68		198

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
South America	Argentina	052	Total Patients Entered	1		1
			Intention to Treat Population	1		
			Per Protocol Population	1		
		053	Total Patients Entered	2	1	
			Intention to Treat Population	2	1	
			Per Protocol Population	2	1	
		054	Total Patients Entered	1	1	
			Intention to Treat Population	1	1	
			Per Protocol Population	1	1	

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment		
				Paroxetine	Placebo	No Therapy Dispensed
South America	Argentina	056	Total Patients Entered	10	4	2
			Intention to Treat Population	10	4	
			Per Protocol Population	9	3	
		057	Total Patients Entered	8	5	1
			Intention to Treat Population	8	5	
			Per Protocol Population	7	4	
	Mexico	049	Total Patients Entered	15	8	4
			Intention to Treat Population	15	8	
			Per Protocol Population	13	6	

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
South America	Mexico	050	Total Patients Entered	4	3	
			Intention to Treat Population	4	3	
			Per Protocol Population	3	2	
Europe / Canada	Belgium	002	Total Patients Entered		1	
			Intention to Treat Population		1	
			Per Protocol Population		1	
		005	Total Patients Entered	8	3	2
			Intention to Treat Population	7	3	
			Per Protocol Population	5	2	

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
Europe / Canada	Belgium	007	Total Patients Entered	5	4	
			Intention to Treat Population	4	2	
			Per Protocol Population			
		008	Total Patients Entered	2	1	
			Intention to Treat Population	2	1	
			Per Protocol Population			
		009	Total Patients Entered	11	6	
			Intention to Treat Population	11	5	
			Per Protocol Population	10	3	

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
Europe / Canada	Belgium	040	Total Patients Entered	2	2	1
			Intention to Treat Population	2	2	
			Per Protocol Population	1	2	
		041	Total Patients Entered	4	2	
			Intention to Treat Population	4	2	
			Per Protocol Population	2	2	
		044	Total Patients Entered	1	1	
			Intention to Treat Population	1		
			Per Protocol Population	1		

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
Europe / Canada	Belgium	047	Total Patients Entered	5	3	
			Intention to Treat Population	5	3	
			Per Protocol Population	4	3	
	Canada	030	Total Patients Entered	5	2	1
			Intention to Treat Population	5	2	
			Per Protocol Population	3	1	
		058	Total Patients Entered	5	2	
			Intention to Treat Population	5	2	
			Per Protocol Population	5	1	

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

				Treatment		
				Paroxetine	Placebo	No Therapy Dispensed
Country Groupings	Country	Centre				
Europe / Canada	Italy	010	Total Patients Entered	4	2	
			Intention to Treat Population	4	2	
			Per Protocol Population	2	1	
		011	Total Patients Entered	4	1	
			Intention to Treat Population	4	1	
			Per Protocol Population	4	1	
		014	Total Patients Entered	4	2	
			Intention to Treat Population	4	2	
			Per Protocol Population	4	2	

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment		
				Paroxetine	Placebo	No Therapy Dispensed
Europe / Canada	Italy	015	Total Patients Entered	4	2	
			Intention to Treat Population	4	2	
			Per Protocol Population	1		
		022	Total Patients Entered			2
			Intention to Treat Population			
			Per Protocol Population			
		038	Total Patients Entered	2	1	
			Intention to Treat Population	2	1	
			Per Protocol Population			

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
Europe / Canada	Netherlands	023	Total Patients Entered	3	1	
			Intention to Treat Population	3	1	
			Per Protocol Population			
		024	Total Patients Entered	2	1	
			Intention to Treat Population	2	1	
			Per Protocol Population	2		
		046	Total Patients Entered		1	1
			Intention to Treat Population		1	
			Per Protocol Population			

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
Europe / Canada	Spain	033	Total Patients Entered		1	
			Intention to Treat Population		1	
			Per Protocol Population		1	
	United Kingdom	026	Total Patients Entered	1		
			Intention to Treat Population	1		
			Per Protocol Population			
Africa	South Africa	029	Total Patients Entered	32	15	16
			Intention to Treat Population	32	14	
			Per Protocol Population	25	10	

(CONTINUED)

Table 13.02

Summary of Patients Evaluated by Country Groupings

Country Groupings	Country	Centre		Treatment: Paroxetine	Treatment: Placebo	Treatment: No Therapy Dispensed
Africa	South Africa	042	Total Patients Entered	24	13	7
			Intention to Treat Population	22	12	
			Per Protocol Population	9	11	
		059	Total Patients Entered	2	2	
			Intention to Treat Population	2	2	
			Per Protocol Population	2	2	
Middle East	United Arab Emirates	045	Total Patients Entered	16	8	
			Intention to Treat Population	15	8	
			Per Protocol Population	14	8	

Table 13.10b

Kiddie-SADS-Lifetime Diagnostic Criteria
Summary of Past and Continuing Episodes

Intention To Treat Population

	Paroxetine						Placebo					
	Number of Patients in Group:						Number of Patients in Group:					
	182						93					
	Continuing		Past		Both		Continuing		Past		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Major Depressive Episode	152	83.5	9	4.9	21	11.5	77	82.8	1	1.1	15	16.1
Hypomanic Episode	0	0	0	0	0	0	0	0	1	1.1	0	0
Manic Episode	0	0	0	0	0	0	0	0	0	0	0	0
Anorexia Nervosa	1	0.5	2	1.1	0	0	0	0	2	2.2	0	0
Bulimia Nervosa	2	1.1	1	0.5	0	0	0	0	1	1.1	0	0
Specific Phobia	6	3.3	3	1.6	0	0	3	3.2	1	1.1	1	1.1
Separation Anxiety Disorder	5	2.7	8	4.4	0	0	3	3.2	6	6.5	0	0
Panic Disorder without Agoraphobia	3	1.6	5	2.7	0	0	0	0	2	2.2	0	0
Panic Disorder with Agoraphobia	0	0	1	0.5	0	0	0	0	1	1.1	0	0
Agoraphobia without History of Panic Disorder	0	0	1	0.5	0	0	0	0	1	1.1	0	0
Social Phobia	3	1.6	1	0.5	1	0.5	4	4.3	1	1.1	0	0

(CONTINUED)

Table 13.10b

Kiddie-SADS-Lifetime Diagnostic Criteria
Summary of Past and Continuing Episodes

Intention To Treat Population

	Paroxetine						Placebo					
	Number of Patients in Group:						Number of Patients in Group:					
	182						93					
	Continuing		Past		Both		Continuing		Past		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Obsessive Compulsive Disorder	0	0	3	1.6	0	0	0	0	1	1.1	0	0
Generalised Anxiety Disorder	13	7.1	7	3.8	0	0	4	4.3	4	4.3	1	1.1
Post-Traumatic Stress Disorder	1	0.5	7	3.8	0	0	3	3.2	4	4.3	0	0
Attention-Deficient/Hyperactivity Disorder	3	1.6	1	0.5	0	0	0	0	3	3.2	0	0
Conduct Disorder	0	0	0	0	0	0	0	0	0	0	0	0
Antisocial Personality Disorder	0	0	0	0	0	0	0	0	0	0	0	0
Oppositional Defiant Disorder	1	0.5	1	0.5	0	0	1	1.1	0	0	0	0
Alcohol Dependence	0	0	0	0	0	0	0	0	0	0	0	0
Alcohol Abuse	0	0	1	0.5	0	0	0	0	2	2.2	0	0
Substance Dependence	0	0	0	0	0	0	0	0	0	0	0	0

(CONTINUED)

Table 13.10b

Kiddie-SADS-Lifetime Diagnostic Criteria
Summary of Past and Continuing Episodes

Intention To Treat Population

	Paroxetine						Placebo					
	Number of Patients in Group:						Number of Patients in Group:					
	182						93					
	Continuing		Past		Both		Continuing		Past		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Substance Abuse	0	0	4	2.2	0	0	1	1.1	2	2.2	0	0
Tic Disorders	0	0	0	0	0	0	0	0	2	2.2	0	0
Schizophrenia	0	0	0	0	0	0	0	0	0	0	0	0
Schizoaffective Disorder	0	0	0	0	0	0	0	0	0	0	0	0
Brief Psychotic Disorder	0	0	0	0	0	0	0	0	0	0	0	0
Delusional Disorder	0	0	0	0	0	0	0	0	0	0	0	0
No History	6	3.3	0	0	0	0	1	1.1	0	0	0	0

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Table 13.11b

Summary of Concomitant Medication Present at Baseline and Continued

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS :	34	18.7%	19	20.4%	53	19.3%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
ALIMENTARY TRACT/METAB:	5	2.7	5	5.4	10	3.6
ALUMINIUM HYDROXIDE	0	0.0	1	1.1	1	0.4
AMINOBENZOIC ACID	1	0.5	1	1.1	2	0.7
ASCORBIC ACID	1	0.5	0	0.0	1	0.4
BIOTIN	1	0.5	1	1.1	2	0.7
BISACODYL	0	0.0	1	1.1	1	0.4
CALCIUM PANTOTHENATE	1	0.5	0	0.0	1	0.4
CHOLINE BITARTRATE	1	0.5	1	1.1	2	0.7
CISAPRIDE	1	0.5	0	0.0	1	0.4
DIMETICONE	0	0.0	1	1.1	1	0.4
HESPERIDIN	1	0.5	1	1.1	2	0.7
INOSITOL	1	0.5	1	1.1	2	0.7
INSULIN	0	0.0	1	1.1	1	0.4
INSULIN INJECTION, ISOPHANE	0	0.0	1	1.1	1	0.4
MESALAZINE	1	0.5	0	0.0	1	0.4
METOCLOPRAMIDE HYDROCHLORIDE	0	0.0	1	1.1	1	0.4
MINERALS NOS	1	0.5	1	1.1	2	0.7
NICOTINAMIDE	1	0.5	0	0.0	1	0.4
PYRIDOXINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
RETINOL	0	0.0	1	1.1	1	0.4
RIBOFLAVIN	1	0.5	0	0.0	1	0.4
RUTOSIDE	1	0.5	1	1.1	2	0.7
SULFASALAZINE	1	0.5	0	0.0	1	0.4
THIAMINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
VITAMINS NOS	1	0.5	1	1.1	2	0.7
ANTIINFECTIVES,SYSTEMIC:	2	1.1	2	2.2	4	1.5
CLINDAMYCIN	1	0.5	0	0.0	1	0.4
LYMECYCLINE	1	0.5	0	0.0	1	0.4
MINOCYCLINE HYDROCHLORIDE	0	0.0	1	1.1	1	0.4

This table includes patients with no recorded start date for the Conmed

Table 13.11b

Summary of Concomitant Medication Present at Baseline and Continued

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	34	18.7%	19	20.4%	53	19.3%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
TETRACYCLINE PHOSPHATE COMPLEX	0	0.0	1	1.1	1	0.4
ANTINEOPLASTIC & IMMUNOSUP:	1	0.5	0	0.0	1	0.4
MEDROXYPROGESTERONE ACETATE	1	0.5	0	0.0	1	0.4
BLOOD/BLOOD FORM ORGANS:	2	1.1	0	0.0	2	0.7
FERROUS SULFATE	2	1.1	0	0.0	2	0.7
CARDIOVASCULAR:	0	0.0	1	1.1	1	0.4
ETILEFRINE HYDROCHLORIDE	0	0.0	1	1.1	1	0.4
CENTRAL NERVOUS SYSTEM:	8	4.4	4	4.3	12	4.4
ALPRAZOLAM	1	0.5	0	0.0	1	0.4
BROMAZEPAM	0	0.0	1	1.1	1	0.4
CAFFEINE	0	0.0	1	1.1	1	0.4
CODEINE PHOSPHATE	0	0.0	1	1.1	1	0.4
HYDROXYZINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
LORMETAZEPAM	1	0.5	1	1.1	2	0.7
MEPROBAMATE	0	0.0	1	1.1	1	0.4
OLSALAZINE SODIUM	1	0.5	0	0.0	1	0.4
PARACETAMOL	5	2.7	2	2.2	7	2.5
DERMATOLOGICALS:	1	0.5	2	2.2	3	1.1
DIPHENHYDRAMINE	1	0.5	0	0.0	1	0.4
DIPHENHYDRAMINE HYDROCHLORIDE	0	0.0	1	1.1	1	0.4
RETINOL	0	0.0	1	1.1	1	0.4
TETRACYCLINE PHOSPHATE COMPLEX	0	0.0	1	1.1	1	0.4
GU SYSTEM/SEX HORMONES:	15	8.2	7	7.5	22	8.0
CYPROTERONE ACETATE	5	2.7	1	1.1	6	2.2

This table includes patients with no recorded start date for the Conmed

Table 13.11b

Summary of Concomitant Medication Present at Baseline and Continued

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	34	18.7%	19	20.4%	53	19.3%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
DESOGESTREL	2	1.1	3	3.2	5	1.8
ETHINYLESTRADIOL	13	7.1	7	7.5	20	7.3
GESTODENE	3	1.6	2	2.2	5	1.8
LEVONORGESTREL	2	1.1	1	1.1	3	1.1
MEDROXYPROGESTERONE ACETATE	1	0.5	0	0.0	1	0.4
NORETHISTERONE ENANTATE	1	0.5	0	0.0	1	0.4
NORGESTIMATE	1	0.5	0	0.0	1	0.4
MUSCULO-SKELETAL:	2	1.1	2	2.2	4	1.5
IBUPROFEN	0	0.0	1	1.1	1	0.4
NAPROXEN	0	0.0	1	1.1	1	0.4
PHENYLBUTAZONE	1	0.5	0	0.0	1	0.4
PIROXICAM	1	0.5	0	0.0	1	0.4
RESPIRATORY:	12	6.6	2	2.2	14	5.1
BECLOMETASONE DIPROPIONATE	4	2.2	0	0.0	4	1.5
CETIRIZINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
CROMOGLICATE SODIUM	0	0.0	1	1.1	1	0.4
DIMENHYDRINATE	1	0.5	0	0.0	1	0.4
DIPHENHYDRAMINE	1	0.5	0	0.0	1	0.4
DIPHENHYDRAMINE HYDROCHLORIDE	0	0.0	1	1.1	1	0.4
OXYMETAZOLINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
SALBUTAMOL	7	3.8	0	0.0	7	2.5
XYLOMETAZOLINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
SENSORY ORGANS:	2	1.1	2	2.2	4	1.5
CROMOGLICATE SODIUM	0	0.0	1	1.1	1	0.4
OXYMETAZOLINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
TETRACYCLINE PHOSPHATE COMPLEX	0	0.0	1	1.1	1	0.4
XYLOMETAZOLINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4

This table includes patients with no recorded start date for the Conmed

Table 13.11b

Summary of Concomitant Medication Present at Baseline and Continued

Intention To Treat Population

TREATMENT GROUP		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	:	34	18.7%	19	20.4%	53	19.3%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM		N	%	N	%	N	%
SYSTEMIC HORMONAL:		0	0.0	1	1.1	1	0.4
LEVOTHYROXINE SODIUM		0	0.0	1	1.1	1	0.4

This table includes patients with no recorded start date for the Conmed

Paroxetine - Protocol: 377

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
ALIMENTARY TRACT/METAB:	18	9.9	13	14.0	31	11.3
ACETYLSALICYLIC ACID	1	0.5	0	0.0	1	0.4
ALUMINIUM HYDROXIDE	0	0.0	1	1.1	1	0.4
AMINOPENTAMIDE	1	0.5	1	1.1	2	0.7
ASCORBIC ACID	3	1.6	0	0.0	3	1.1
ATTAPULGITE	1	0.5	1	1.1	2	0.7
BACILLUS SUBTILIS	0	0.0	1	1.1	1	0.4
BISMUTH SUBCARBONATE	1	0.5	1	1.1	2	0.7
CAFFEINE	1	0.5	0	0.0	1	0.4
CALCIUM CARBONATE	0	0.0	2	2.2	2	0.7
CHARCOAL, ACTIVATED	1	0.5	1	1.1	2	0.7
CHLORPHENAMINE MALEATE	1	0.5	0	0.0	1	0.4
CINNARIZINE	1	0.5	0	0.0	1	0.4
CYCLIZINE HYDROCHLORIDE	4	2.2	1	1.1	5	1.8
DICYCLOVERINE	1	0.5	0	0.0	1	0.4
DOMPERIDONE	1	0.5	0	0.0	1	0.4
EPHEDRINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
FENPIVERINIUM BROMIDE	1	0.5	1	1.1	2	0.7
HYOSCINE HYDROBROMIDE	0	0.0	1	1.1	1	0.4
KANAMYCIN SULFATE	1	0.5	1	1.1	2	0.7
KAOLIN	0	0.0	1	1.1	1	0.4
LEVOCARNITINE	1	0.5	0	0.0	1	0.4
LOPERAMIDE HYDROCHLORIDE	2	1.1	1	1.1	3	1.1
MAGNESIUM ASPARTATE	1	0.5	0	0.0	1	0.4
MAGNESIUM CARBONATE	0	0.0	1	1.1	1	0.4
MAGNESIUM SULFATE	1	0.5	1	1.1	2	0.7
MESALAZINE	1	0.5	0	0.0	1	0.4
METAMIZOLE SODIUM	1	0.5	1	1.1	2	0.7
METOCLOPRAMIDE	0	0.0	1	1.1	1	0.4
METOCLOPRAMIDE HYDROCHLORIDE	1	0.5	1	1.1	2	0.7
MINERALS NOS	1	0.5	0	0.0	1	0.4
PARACETAMOL	1	0.5	0	0.0	1	0.4

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
PECTIN	1	0.5	2	2.2	3	1.1
PHENYLEPHRINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
PINAVERIUM BROMIDE	1	0.5	0	0.0	1	0.4
PITOFENONE HYDROCHLORIDE	1	0.5	1	1.1	2	0.7
POTASSIUM CITRATE	1	0.5	0	0.0	1	0.4
RETINOL	1	0.5	0	0.0	1	0.4
SACCHAROMYCES BOULARDII	0	0.0	1	1.1	1	0.4
SENNA FRUIT	1	0.5	0	0.0	1	0.4
TOCOPHERYL ACETATE	1	0.5	0	0.0	1	0.4
VITAMINS NOS	1	0.5	0	0.0	1	0.4
ANTIINFECTIVES,SYSTEMIC:	23	12.6	8	8.6	31	11.3
AMOXICILLIN	4	2.2	0	0.0	4	1.5
AMOXICILLIN TRIHYDRATE	3	1.6	1	1.1	4	1.5
AMPICILLIN	3	1.6	1	1.1	4	1.5
AMPICILLIN SODIUM	1	0.5	0	0.0	1	0.4
ANTIBIOTIC NOS	2	1.1	0	0.0	2	0.7
AZITHROMYCIN	1	0.5	0	0.0	1	0.4
BENZATHINE BENZYLPENICILLIN	0	0.0	1	1.1	1	0.4
CEFALEXIN MONOHYDRATE	1	0.5	0	0.0	1	0.4
CEFUROXIME AXETIL	0	0.0	1	1.1	1	0.4
CIPROFLOXACIN	1	0.5	2	2.2	3	1.1
CIPROFLOXACIN HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
CLAVULANIC ACID	1	0.5	1	1.1	2	0.7
CLOXACILLIN SODIUM	1	0.5	0	0.0	1	0.4
DOXYCYCLINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
ERYTHROMYCIN	1	0.5	0	0.0	1	0.4
MEASLES VIRUS VACCINE LIVE ATTENUATED	1	0.5	0	0.0	1	0.4
METRONIDAZOLE	0	0.0	1	1.1	1	0.4
MINOCYCLINE	1	0.5	1	1.1	2	0.7
PHENOXYMETHYLPENICILLIN	0	0.0	1	1.1	1	0.4
ROXITHROMYCIN	1	0.5	0	0.0	1	0.4

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
STREPTOVARYCIN	1	0.5	0	0.0	1	0.4
SULFAMETHOXAZOLE	2	1.1	2	2.2	4	1.5
TETRACYCLINE	1	0.5	0	0.0	1	0.4
TRIMETHOPRIM	2	1.1	2	2.2	4	1.5
BLOOD/BLOOD FORM ORGANS:	1	0.5	0	0.0	1	0.4
FERROUS SULFATE EXSICCATED	1	0.5	0	0.0	1	0.4
FOLIC ACID	1	0.5	0	0.0	1	0.4
CARDIOVASCULAR:	4	2.2	2	2.2	6	2.2
AMEZINIUM METILSULFATE	1	0.5	0	0.0	1	0.4
ETILEFRINE HYDROCHLORIDE	3	1.6	2	2.2	5	1.8
CENTRAL NERVOUS SYSTEM:	50	27.5	25	26.9	75	27.3
ACETYLSALICYLATE CALCIUM	2	1.1	0	0.0	2	0.7
ACETYLSALICYLIC ACID	11	6.0	6	6.5	17	6.2
ALPRAZOLAM	0	0.0	1	1.1	1	0.4
ASCORBIC ACID	1	0.5	0	0.0	1	0.4
BROMISOVAL	1	0.5	0	0.0	1	0.4
CAFFEINE	6	3.3	1	1.1	7	2.5
CANNABIS	1	0.5	1	1.1	2	0.7
CARBROMAL	1	0.5	0	0.0	1	0.4
CHLORAL HYDRATE	2	1.1	0	0.0	2	0.7
CHLORPHENAMINE MALEATE	1	0.5	0	0.0	1	0.4
CODEINE	0	0.0	1	1.1	1	0.4
CODEINE PHOSPHATE	12	6.6	3	3.2	15	5.5
DIAZEPAM	1	0.5	0	0.0	1	0.4
DIPOTASSIUM CLORAZEPATE	1	0.5	1	1.1	2	0.7
DOXEPIN HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
EPHEDRINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
FLUNITRAZEPAM	1	0.5	0	0.0	1	0.4
FLUOXETINE	1	0.5	0	0.0	1	0.4

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
FLUVOXAMINE	1	0.5	0	0.0	1	0.4
FLUVOXAMINE MALEATE	1	0.5	0	0.0	1	0.4
IBUPROFEN	3	1.6	3	3.2	6	2.2
LEVOCARNITINE	1	0.5	0	0.0	1	0.4
LORAZEPAM	2	1.1	0	0.0	2	0.7
MAGNESIUM ASPARTATE	1	0.5	0	0.0	1	0.4
MAGNESIUM SULFATE	1	0.5	1	1.1	2	0.7
MEPROBAMATE	1	0.5	0	0.0	1	0.4
METAMIZOLE SODIUM	1	0.5	2	2.2	3	1.1
METHYLENEDIOXYMETHAMPHETAMINE	1	0.5	0	0.0	1	0.4
PARACETAMOL	30	16.5	19	20.4	49	17.8
PAROXETINE	0	0.0	1	1.1	1	0.4
PHENYLEPHRINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
PROCHLORPERAZINE	1	0.5	0	0.0	1	0.4
PROMETHAZINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
SERTRALINE	2	1.1	0	0.0	2	0.7
TRAZODONE	1	0.5	0	0.0	1	0.4
VENLAFAXINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
DERMATOLOGICALS:	12	6.6	4	4.3	16	5.8
BENZOYL PEROXIDE	0	0.0	1	1.1	1	0.4
BETAMETHASONE ACETATE	1	0.5	1	1.1	2	0.7
BETAMETHASONE SODIUM PHOSPHATE	1	0.5	1	1.1	2	0.7
BETAMETHASONE VALERATE	1	0.5	0	0.0	1	0.4
CALAMINE	1	0.5	0	0.0	1	0.4
CAMPHOR	1	0.5	0	0.0	1	0.4
CHINOFORM	1	0.5	0	0.0	1	0.4
DIPHENHYDRAMINE	2	1.1	1	1.1	3	1.1
DIPHENHYDRAMINE HYDROCHLORIDE	2	1.1	1	1.1	3	1.1
DOXEPIN HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
ERYTHROMYCIN	1	0.5	0	0.0	1	0.4
FLUTICASONE PROPIONATE	1	0.5	0	0.0	1	0.4

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS :	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
GENTAMICIN SULFATE	1	0.5	0	0.0	1	0.4
GLYCEROL	1	0.5	0	0.0	1	0.4
HEXAMIDINE ISETHIONATE	1	0.5	0	0.0	1	0.4
HYDROCORTISONE	0	0.0	2	2.2	2	0.7
LEVOCABASTINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
METHYLPREDNISOLONE	1	0.5	0	0.0	1	0.4
MICONAZOLE NITRATE	0	0.0	2	2.2	2	0.7
NIFUROXAZIDE	1	0.5	0	0.0	1	0.4
RETINOL	1	0.5	0	0.0	1	0.4
TETRACYCLINE	1	0.5	0	0.0	1	0.4
TOLNAFTATE	1	0.5	0	0.0	1	0.4
GU SYSTEM/SEX HORMONES:	7	3.8	2	2.2	9	3.3
CIPROFLOXACIN	1	0.5	2	2.2	3	1.1
CIPROFLOXACIN HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
CITRIC ACID	1	0.5	0	0.0	1	0.4
ETHINYLESTRADIOL	3	1.6	1	1.1	4	1.5
GESTODENE	0	0.0	1	1.1	1	0.4
LEVONORGESTREL	3	1.6	0	0.0	3	1.1
NORETHISTERONE ACETATE	1	0.5	0	0.0	1	0.4
NORFLOXACIN	0	0.0	1	1.1	1	0.4
SODIUM BICARBONATE	1	0.5	0	0.0	1	0.4
SODIUM CITRATE	1	0.5	0	0.0	1	0.4
TARTARIC ACID	1	0.5	0	0.0	1	0.4
MUSCULO-SKELETAL:	9	4.9	7	7.5	16	5.8
DICLOFENAC SODIUM	2	1.1	0	0.0	2	0.7
FLURBIPROFEN	1	0.5	0	0.0	1	0.4
IBUPROFEN	3	1.6	6	6.5	9	3.3
MEFENAMIC ACID	0	0.0	1	1.1	1	0.4
NAPROXEN SODIUM	2	1.1	0	0.0	2	0.7
PIROXICAM	0	0.0	1	1.1	1	0.4

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
SUXAMETHONIUM CHLORIDE	1	0.5	0	0.0	1	0.4
RESPIRATORY:	29	15.9	15	16.1	44	16.0
ACETYLCYSTEINE	2	1.1	1	1.1	3	1.1
ACETYLSALICYLIC ACID	1	0.5	0	0.0	1	0.4
ACONITE TINCTURE	1	0.5	0	0.0	1	0.4
AMMONIUM CHLORIDE	2	1.1	2	2.2	4	1.5
AMYLMETACRESOL	0	0.0	1	1.1	1	0.4
ARISTOLOCHIC ACID	1	0.5	0	0.0	1	0.4
ASCORBIC ACID	2	1.1	1	1.1	3	1.1
BALSAM SULPHURIS	1	0.5	0	0.0	1	0.4
BECLOMETASONE DIPROPIONATE	1	0.5	0	0.0	1	0.4
BROMHEXINE HYDROCHLORIDE	1	0.5	1	1.1	2	0.7
BROMPHENIRAMINE MALEATE	1	0.5	1	1.1	2	0.7
BUCHU	1	0.5	0	0.0	1	0.4
CAFFEINE	2	1.1	1	1.1	3	1.1
CAMPHOR	1	0.5	0	0.0	1	0.4
CARBINOXAMINE MALEATE	0	0.0	1	1.1	1	0.4
CARBOCISTEINE	2	1.1	0	0.0	2	0.7
CETIRIZINE HYDROCHLORIDE	2	1.1	0	0.0	2	0.7
CHERRY-LAUREL	1	0.5	0	0.0	1	0.4
CHLORPHENAMINE MALEATE	3	1.6	2	2.2	5	1.8
CINCHONA EXTRACT	1	0.5	0	0.0	1	0.4
CINNARIZINE	1	0.5	0	0.0	1	0.4
CODEINE	0	0.0	1	1.1	1	0.4
CODEINE PHOSPHATE	3	1.6	0	0.0	3	1.1
CYCLIZINE HYDROCHLORIDE	4	2.2	1	1.1	5	1.8
CYPROHEPTADINE HYDROCHLORIDE	1	0.5	1	1.1	2	0.7
DEXCHLORPHENIRAMINE MALEATE	2	1.1	0	0.0	2	0.7
DEXTROMETHORPHAN HYDROBROMIDE	3	1.6	0	0.0	3	1.1
DICHLOROBENZYL ALCOHOL	0	0.0	1	1.1	1	0.4
DIMENHYDRINATE	3	1.6	1	1.1	4	1.5

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
DIMETINDENE MALEATE	1	0.5	0	0.0	1	0.4
DIPHENHYDRAMINE	2	1.1	1	1.1	3	1.1
DIPHENHYDRAMINE HYDROCHLORIDE	2	1.1	2	2.2	4	1.5
DIPHENYLPYRALINE HYDROCHLORIDE	0	0.0	1	1.1	1	0.4
DOMPERIDONE	1	0.5	0	0.0	1	0.4
EPHEDRINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
ETHANOL	1	0.5	0	0.0	1	0.4
ETOPHYLLINE	0	0.0	1	1.1	1	0.4
FLUTICASONE PROPIONATE	1	0.5	0	0.0	1	0.4
FUSAFUNGINE	1	0.5	0	0.0	1	0.4
GUAIFENESIN	3	1.6	0	0.0	3	1.1
HONEY	1	0.5	0	0.0	1	0.4
HYDROXYETHYL THEOPHYLLINE	1	0.5	0	0.0	1	0.4
LETTUCE EXTRACT	1	0.5	0	0.0	1	0.4
LORATADINE	1	0.5	1	1.1	2	0.7
MEBHYDROLIN	1	0.5	0	0.0	1	0.4
MEPYRAMINE MALEATE	2	1.1	1	1.1	3	1.1
OXITROPIUM BROMIDE	1	0.5	0	0.0	1	0.4
PARACETAMOL	3	1.6	1	1.1	4	1.5
PHENIRAMINE MALEATE	0	0.0	1	1.1	1	0.4
PHENYLEPHRINE HYDROCHLORIDE	5	2.7	4	4.3	9	3.3
PHENYLPROPANOLAMINE HYDROCHLORIDE	1	0.5	2	2.2	3	1.1
PREDNISONE	1	0.5	0	0.0	1	0.4
PROMETHAZINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
PSEUDOEPHEDRINE HYDROCHLORIDE	6	3.3	1	1.1	7	2.5
SALICYLAMIDE	1	0.5	1	1.1	2	0.7
SENEGA EXTRACT	1	0.5	0	0.0	1	0.4
SODIUM BENZOATE	1	0.5	0	0.0	1	0.4
SODIUM CITRATE	1	0.5	2	2.2	3	1.1
SQUILL EXTRACT	1	0.5	0	0.0	1	0.4
THEOPHYLLINE	1	0.5	1	1.1	2	0.7
TOLO SYRUP	1	0.5	0	0.0	1	0.4

Table 13.12b

Summary of Concomitant Medication Initiated During the Study

Intention To Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH MEDICATIONS	78	42.9%	39	41.9%	117	42.5%
ATC CLASSIFICATION LEVEL 1 : GENERIC TERM	N	%	N	%	N	%
TRIPROLIDINE HYDROCHLORIDE	3	1.6	1	1.1	4	1.5
SENSORY ORGANS:	7	3.8	1	1.1	8	2.9
DICLOFENAC SODIUM	2	1.1	0	0.0	2	0.7
ERYTHROMYCIN	1	0.5	0	0.0	1	0.4
HEXAMIDINE ISETHIONATE	1	0.5	0	0.0	1	0.4
HYOSCINE HYDROBROMIDE	0	0.0	1	1.1	1	0.4
LEVOCABASTINE HYDROCHLORIDE	1	0.5	0	0.0	1	0.4
METHYLPREDNISOLONE	1	0.5	0	0.0	1	0.4
TETRACYCLINE	1	0.5	0	0.0	1	0.4
SYSTEMIC HORMONAL:	2	1.1	1	1.1	3	1.1
BETAMETHASONE SODIUM PHOSPHATE	0	0.0	1	1.1	1	0.4
METHYLPREDNISOLONE	1	0.5	0	0.0	1	0.4
PREDNISONE	1	0.5	0	0.0	1	0.4
VARIOUS:	5	2.7	0	0.0	5	1.8
AMINO ACIDS NOS	1	0.5	0	0.0	1	0.4
ANTIINFLAMMATORY NOS	1	0.5	0	0.0	1	0.4
CARBOHYDRATES NOS	1	0.5	0	0.0	1	0.4
ELECTROLYTES NOS	1	0.5	0	0.0	1	0.4
FIBER	1	0.5	0	0.0	1	0.4
MINERALS NOS	1	0.5	0	0.0	1	0.4
NUTRITIONAL SUPPLEMENT NOS	1	0.5	0	0.0	1	0.4
SERTRALINE	2	1.1	0	0.0	2	0.7
VITAMINS NOS	1	0.5	0	0.0	1	0.4

Table 13.13b

Patient Withdrawals

Intention to Treat Population

Treatment Group: Paroxetine

	Week 1	Week 2	Week 3	Week 4	Week 6	Week 8	Week 12	TOTAL
Number of Patients	182	176	166	164	155	149	136	127
REASON								
Adverse Experience	3	5	1	5		2	4	20
Lack of Efficacy	1	1		1	2	4		9
Protocol Violation, including non compliance	1	1		1		2	2	7
Lost to Follow-up	1	2	1	2	3	2	2	13
Other Reason		1			1	3	1	6
Number of Withdrawals	6	10	2	9	6	13	9	55

Table 13.13b

Patient Withdrawals

Intention to Treat Population

Treatment Group: Placebo

	Week 1	Week 2	Week 3	Week 4	Week 6	Week 8	Week 12	TOTAL
Number of Patients	93	91	88	84	81	78	73	69
REASON								
Adverse Experience	1	1		1		2	1	6
Lack of Efficacy		1	1	1	1	2		6
Protocol Violation, including non compliance	1		1	1	1		1	5
Lost to Follow-up		1	2			1	2	6
Other Reason					1			1
Number of Withdrawals	2	3	4	3	3	5	4	24

Table 13.14b

Maximum Daily Amount of Investigational Drug

Intention To Treat Population

	Paroxetine				Placebo			
		Maximum Dose Level				Maximum Dose Level		
	Number of Patients	20 mg	30 mg	40 mg	Number of Patients	1	2	3
Number	181	103	46	32	93	52	18	23
%	100	56	25	17	100	55	19	24

i = Intention to Treat Population, e = Per Protocol Population

Patient 377.023.00170 is omitted from the Paroxetine Group due to lack of CRF data (ie. no dose level recorded)

Placebo Dose recorded as Dose Level

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT1314.SAS (31JUL98 11:28)

Table 13.15b

Summary Statistics of Maximum Daily Amount of Investigational Drug

Intention To Treat Population

Paroxetine						Placebo					
Mean	Median	Std Dev	Minimum	Maximum	NO OF PATIENTS IN GROUP	Mean	Median	Std Dev	Minimum	Maximum	NO OF PATIENTS IN GROUP
26.1	20.0	7.7	20	40	181	1.7	1.0	0.8	1	3	93

i = Intention to Treat Population, e = Per Protocol Population

Patient 377.023.00170 is omitted from the Paroxetine Group due to lack of CRF data (ie. no dose level recorded)

Placebo Dose recorded as Dose Level

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT1314.SAS (31JUL98 11:28)

Table 13.16b

Summary of Dose Level at Endpoint

Intention To Treat Population

	Paroxetine				Placebo			
		Dose Level				Dose Level		
	Number of Patients	20 mg	30 mg	40 mg	Number of Patients	1	2	3
Number	181	107	43	31	93	56	17	20
%	100	59	23	17	100	60	18	21

i = Intention to Treat Population, e = Per Protocol Population

Patient 377.023.00170 is omitted from the Paroxetine Group due to lack of CRF data (ie. no dose level recorded)

Placebo Dose recorded as Dose Level

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT1314.SAS (31JUL98 11:28)

Table 13.17b

Summary Statistics of Dose Level at Endpoint

Intention To Treat Population

Paroxetine						Placebo					
Mean	Median	Std Dev	Minimum	Maximum	NO OF PATIENTS IN GROUP	Mean	Median	Std Dev	Minimum	Maximum	NO OF PATIENTS IN GROUP
25.8	20.0	7.7	20	40	181	1.6	1.0	0.8	1	3	93

i = Intention to Treat Population, e = Per Protocol Population

Patient 377.023.00170 is omitted from the Paroxetine Group
due to lack of CRF data (ie. no dose level recorded)

Placebo Dose recorded as Dose Level

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT1314.SAS (31JUL98 11:28)

Table 13.18b

Summary Statistics of Mean Dose on Active Treatment

Intention To Treat Population

Paroxetine						Placebo					
Mean	Median	Std Dev	Minimum	Maximum	NO OF PATIENTS IN GROUP	Mean	Median	Std Dev	Minimum	Maximum	NO OF PATIENTS IN GROUP
23.9	20.0	5.2	20	37	181	1.4	1.0	0.6	1	2	93

i = Intention to Treat Population, e = Per Protocol Population

Patient 377.023.00170 is omitted from the Paroxetine Group
due to lack of CRF data (ie. no dose level recorded)

Placebo Dose recorded as Dose Level

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]JOTEST6.SAS (04AUG98 10:28)

Table 13.2b

Summary of Demographic Data

Intention To Treat Population

		Paroxetine	Placebo
NUMBER OF PATIENTS IN GROUP		182	93
AGE (years)	Mean	15.5	15.8
	Std dev	1.6	1.6
	Minimum	12	13
	Maximum	19	18
	N	182	93
	Missing		
HEIGHT (cm)	Mean	163.6	164.5
	Std dev	9.1	8.5
	Minimum	140	131
	Maximum	185	184
	N	180	93
	Missing	2	

Table 13.2b

Summary of Demographic Data

Intention To Treat Population

	Paroxetine		Placebo	
	Number	Percent	Number	Percent
SEX				
Female	122	67.0	61	65.6
Male	60	33.0	32	34.4
TOTAL	182	100.0	93	100.0
RACE				
Black	2	1.1	4	4.3
Caucasian	126	69.2	61	65.6
Oriental	2	1.1		
Other	52	28.6	28	30.1
TOTAL	182	100.0	93	100.0

Table 13.2c

Summary of Demographic Data

Per Protocol Population

		Paroxetine	Placebo
NUMBER OF PATIENTS IN GROUP		130	68
AGE (years)	Mean	15.5	15.7
	Std dev	1.6	1.5
	Minimum	13	13
	Maximum	18	18
	N	130	68
	Missing		
HEIGHT (cm)	Mean	162.7	164.2
	Std dev	8.7	9.0
	Minimum	142	131
	Maximum	185	184
	N	128	68
	Missing	2	

Table 13.2c

Summary of Demographic Data

Per Protocol Population

	Paroxetine		Placebo	
	Number	Percent	Number	Percent
SEX				
Female	92	70.8	43	63.2
Male	38	29.2	25	36.8
TOTAL	130	100.0	68	100.0
RACE				
Black	2	1.5	4	5.9
Caucasian	88	67.7	41	60.3
Oriental	2	1.5		
Other	38	29.2	23	33.8
TOTAL	130	100.0	68	100.0

Table 13.20

Number (%) of Patients by Protocol Violation

Randomised Patients

	Treatment Group					
	Paroxetine		Placebo		Total	
	N	%	N	%	N	%
Long term,individualised formal psychotherapy scheduled during study period	18	9.6	8	8.1	26	9.1
Patient has received psychotropic	3	1.6			3	1.0
Duration of active treatment < 6 weeks (36 days)	32	17.1	17	17.2	49	17.1
Concomitant use of prohibited medications	9	4.8	5	5.1	14	4.9
Not compliant with study medication on two consecutive visits	3	1.6	3	3.0	6	2.1
Did not fulfil inclusion criteria	5	2.7			5	1.7
Out of range screening lab values	2	1.1	1	1.0	3	1.0
Total Number of Patients with at least one Major Protocol Violation	57	30.5	31	31.3	88	30.8
Total Number of Patients with no Major Protocol Violations	130	69.5	68	68.7	198	69.2
Total Number of Patients	187	100.0	99	100.0	286	100.0

Table 13.21b

Study Medication Compliance

Intention to Treat Population

	Treatment Group	
	PAROXETINE	PLACEBO
Compliant	179	90
Non Compliant	3	3

Compliant if Taken Between 80% and 120% of Medication
Non Compliant if Outside the Compliance Range at 2 Consecutive Visits

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT13_21.SAS (31JUL98 12:23)

Paroxetine - Protocol: 377

Table 13.3b

Significant Medical/Surgical History and Physical Examination
Number and % of Patients With Ongoing Conditions
Intention to Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH CONDITIONS :	45	24.7%	27	29.0%	72	26.2%
DISEASE CODE LEVEL 1 : PREFERRED TERM	N	%	N	%	N	%
BLOOD/BLOOD FORMING ORGAN DIS:	3	1.6	1	1.1	4	1.5
ANEMIA, HEMOLYT, HERED	1	0.5	0	0.0	1	0.4
ANEMIA, OTHER	2	1.1	0	0.0	2	0.7
LEUKOPENIA	0	0.0	1	1.1	1	0.4
CIRCULATORY SYST:	2	1.1	1	1.1	3	1.1
CONDUCTION DISORD	1	0.5	0	0.0	1	0.4
HYPERTENSION	1	0.5	0	0.0	1	0.4
HYPOTENSION, OTHER	0	0.0	1	1.1	1	0.4
DIGESTIVE SYST:	2	1.1	3	3.2	5	1.8
CONSTIPATION	0	0.0	1	1.1	1	0.4
DYSPEPSIA	0	0.0	1	1.1	1	0.4
ENTERITIS/COLITIS	1	0.5	0	0.0	1	0.4
GASTRITIS/DUODENITIS	0	0.0	1	1.1	1	0.4
TEETH DISORD	1	0.5	0	0.0	1	0.4
ENDOCR/METAB/IMMUNITY DISORD:	1	0.5	2	2.2	3	1.1
CARBOHYDRATE DISORD	0	0.0	1	1.1	1	0.4
DIABETES MELLITUS	0	0.0	1	1.1	1	0.4
OBESITY	1	0.5	0	0.0	1	0.4
EXT CAUSES OF INJURY/POISONING:	1	0.5	0	0.0	1	0.4
ADVERSE EFF/ANTIBIOTIC	1	0.5	0	0.0	1	0.4
GENITOURINARY SYST DIS:	5	2.7	3	3.2	8	2.9
BREAST DISORD	1	0.5	0	0.0	1	0.4
GENITAL FEMALE DISORD, OTHER	4	2.2	2	2.2	6	2.2
KIDNEY DISORD	0	0.0	1	1.1	1	0.4
INJURY/POISONING:	0	0.0	1	1.1	1	0.4
ALLERGY, NEC	0	0.0	1	1.1	1	0.4

Table 13.3b

Significant Medical/Surgical History and Physical Examination
Number and % of Patients With Ongoing Conditions
Intention to Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH CONDITIONS :	45	24.7%	27	29.0%	72	26.2%
DISEASE CODE LEVEL 1 : PREFERRED TERM	N	%	N	%	N	%
MENTAL DISORD:	4	2.2	1	1.1	5	1.8
ALCOHOL ABUSE	1	0.5	0	0.0	1	0.4
ANXIETY	0	0.0	1	1.1	1	0.4
CONDUCT DISORD	1	0.5	0	0.0	1	0.4
DRUG ABUSE	1	0.5	0	0.0	1	0.4
NEUROSES	2	1.1	0	0.0	2	0.7
MUSCULOSKEL/CONNECT TISSUE DIS:	5	2.7	1	1.1	6	2.2
ARTHRITIS, RHEUMATOID	1	0.5	0	0.0	1	0.4
BACK PAIN	3	1.6	1	1.1	4	1.5
DEFORMITY, ACQUIRED	1	0.5	1	1.1	2	0.7
NERVOUS SYST/SENSE ORGAN DIS:	1	0.5	2	2.2	3	1.1
CATARACT	0	0.0	1	1.1	1	0.4
EYE DISORD, OTHER	1	0.5	0	0.0	1	0.4
MIGRAINE	0	0.0	1	1.1	1	0.4
OPERATIONS:	1	0.5	1	1.1	2	0.7
OPERATION, EYE	0	0.0	1	1.1	1	0.4
OPERATION, OTHER MUSCULOSKEL	1	0.5	0	0.0	1	0.4
RESPIRATORY SYST DIS:	14	7.7	6	6.5	20	7.3
ASTHMA	9	4.9	3	3.2	12	4.4
RHINITIS, ALLERGIC	3	1.6	4	4.3	7	2.5
SINUSITIS, OTHER	1	0.5	0	0.0	1	0.4
SINUSITIS,NOS	2	1.1	0	0.0	2	0.7
SIGNS,SYMPTOMS,ILL-DEFINED CON:	15	8.2	8	8.6	23	8.4
CARDIAC MURMURS	1	0.5	0	0.0	1	0.4
DIZZINESS AND GIDDINESS	2	1.1	0	0.0	2	0.7
FLATULENCE	0	0.0	1	1.1	1	0.4
GASTROINTEST PROB, NEC	1	0.5	0	0.0	1	0.4

Table 13.3b

Significant Medical/Surgical History and Physical Examination
Number and % of Patients With Ongoing Conditions
Intention to Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH CONDITIONS	45	24.7%	27	29.0%	72	26.2%
DISEASE CODE LEVEL 1 : PREFERRED TERM	N	%	N	%	N	%
HEADACHE	8	4.4	5	5.4	13	4.7
INSOMNIA	3	1.6	2	2.2	5	1.8
MENTAL STATUS, IMPAIRED	1	0.5	0	0.0	1	0.4
NAUSEA	2	1.1	0	0.0	2	0.7
PAIN, ABDOMINO-PELVIC	2	1.1	0	0.0	2	0.7
PALPITATIONS	0	0.0	1	1.1	1	0.4
SKIN/SUBCUTANEOUS TISSUE DIS:	4	2.2	4	4.3	8	2.9
SKIN/SUBCUT DISORD, OTHER	4	2.2	4	4.3	8	2.9

Table 13.31

Number (%) of Patients with Clinically Significant Abnormalities in ECG at Screening

All Patients

SIGNIFICANT ABNORMALITY	PAROXETINE		PLACEBO		NO THERAPY DISPENSED	
	N	%	N	%	N	%
YES	1	0.53	0	0	2	6.45
NO	186	99.47	99	100.00	29	93.55
NUMBER OF PATIENTS WITH ASSESSMENT	187	100.00	99	100.00	31	100.00
MISSING	0	0	0	0	7	100.00

Table 13.4b

Psychiatric History

Intention To Treat Population

	Paroxetine						Placebo					
	Number of Patients in Group						Number of Patients in Group					
	182						93					
	No		Suspected		Yes		No		Suspected		Yes	
	N	%	N	%	N	%	N	%	N	%	N	%
Major episode of depression	129	70.9	14	7.7	39	21.4	64	68.8	10	10.8	19	20.4
Schizophrenia	182	100.0	0	0	0	0	93	100.0	0	0	0	0
Alcoholism/drug abuse/medication abuse	178	97.8	0	0	4	2.2	89	95.7	1	1.1	3	3.2
Anxiety/obsessional disorders	163	89.6	6	3.3	13	7.1	82	88.2	2	2.2	9	9.7
Personality disorder	177	97.3	3	1.6	2	1.1	93	100.0	0	0	0	0

Paroxetine - Protocol: 377

Table 13.3.2b

Significant Medical/Surgical History and Physical Examination
Number and % of Patients With Past, Ongoing or Past and Ongoing Conditions
Intention to Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH CONDITIONS :	64	35.2%	37	39.8%	101	36.7%
DISEASE CODE LEVEL 1 : PREFERRED TERM	N	%	N	%	N	%
ANOMALIES:	0	0.0	1	1.1	1	0.4
CONG ANOM, GU	0	0.0	1	1.1	1	0.4
BLOOD/BLOOD FORMING ORGAN DIS:	4	2.2	1	1.1	5	1.8
ANEMIA, HEMOLYT, HERED	1	0.5	0	0.0	1	0.4
ANEMIA, IRON DEFIC	1	0.5	0	0.0	1	0.4
ANEMIA, OTHER	2	1.1	0	0.0	2	0.7
LEUKOPENIA	0	0.0	1	1.1	1	0.4
CIRCULATORY SYST:	2	1.1	1	1.1	3	1.1
CONDUCTION DISORD	1	0.5	0	0.0	1	0.4
HYPERTENSION	1	0.5	0	0.0	1	0.4
HYPOTENSION, OTHER	0	0.0	1	1.1	1	0.4
COMPLIC OF PREGNANCY/BIRTH:	0	0.0	1	1.1	1	0.4
PREGNANCY, COMPLICATIONS	0	0.0	1	1.1	1	0.4
DIGESTIVE SYST:	6	3.3	4	4.3	10	3.6
APPENDICITIS	1	0.5	0	0.0	1	0.4
CONSTIPATION	0	0.0	1	1.1	1	0.4
DYSPEPSIA	0	0.0	1	1.1	1	0.4
ENTERITIS/COLITIS	1	0.5	0	0.0	1	0.4
GASTRITIS/DUODENITIS	0	0.0	2	2.2	2	0.7
HEPATITIS	1	0.5	0	0.0	1	0.4
HERNIA, ABDOMINAL	2	1.1	0	0.0	2	0.7
TEETH DISORD	1	0.5	0	0.0	1	0.4
ENDOCR/METAB/IMMUNITY DISORD:	1	0.5	2	2.2	3	1.1
CARBOHYDRATE DISORD	0	0.0	1	1.1	1	0.4
DIABETES MELLITUS	0	0.0	1	1.1	1	0.4
OBESITY	1	0.5	0	0.0	1	0.4

Table 13.3.2b

Significant Medical/Surgical History and Physical Examination
Number and % of Patients With Past, Ongoing or Past and Ongoing Conditions
Intention to Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH CONDITIONS	64	35.2%	37	39.8%	101	36.7%
DISEASE CODE LEVEL 1 : PREFERRED TERM	N	%	N	%	N	%
EXT CAUSES OF INJURY/POISONING:	1	0.5	2	2.2	3	1.1
ACCIDENT/MOTOR VEHICLE	0	0.0	1	1.1	1	0.4
ADVERSE EFF/ANTIBIOTIC	1	0.5	0	0.0	1	0.4
SUICIDE	0	0.0	1	1.1	1	0.4
GENITOURINARY SYST DIS:	6	3.3	3	3.2	9	3.3
BREAST DISORD	1	0.5	0	0.0	1	0.4
GENITAL FEMALE DISORD, OTHER	5	2.7	2	2.2	7	2.5
KIDNEY DISORD	0	0.0	1	1.1	1	0.4
INFECTIOUS/PARASITIC DIS:	3	1.6	0	0.0	3	1.1
VIRAL DIS/EXANTHEM	1	0.5	0	0.0	1	0.4
VIRUS/CHLAMYD DIS, OTHER	3	1.6	0	0.0	3	1.1
INJURY/POISONING:	3	1.6	4	4.3	7	2.5
ALLERGY, NEC	0	0.0	1	1.1	1	0.4
CONTUSION	0	0.0	1	1.1	1	0.4
FRACTURE, LOWER LIMB	1	0.5	1	1.1	2	0.7
FRACTURE, UPPER LIMB	1	0.5	0	0.0	1	0.4
SPRAINS/STRAINS	1	0.5	0	0.0	1	0.4
TRAUMA/INJURIES, UNSPEC	0	0.0	1	1.1	1	0.4
MENTAL DISORD:	5	2.7	2	2.2	7	2.5
ALCOHOL ABUSE	1	0.5	0	0.0	1	0.4
ANXIETY	1	0.5	1	1.1	2	0.7
CONDUCT DISORD	1	0.5	0	0.0	1	0.4
DRUG ABUSE	1	0.5	0	0.0	1	0.4
NEUROSES	2	1.1	0	0.0	2	0.7
PSYCHOGENIC PHYSIOL DYSFUNC	0	0.0	1	1.1	1	0.4
MUSCULOSKEL/CONNECT TISSUE DIS:	6	3.3	1	1.1	7	2.5
ARTHRITIS, RHEUMATOID	1	0.5	0	0.0	1	0.4

Table 13.3.2b

Significant Medical/Surgical History and Physical Examination
Number and % of Patients With Past, Ongoing or Past and Ongoing Conditions
Intention to Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH CONDITIONS	64	35.2%	37	39.8%	101	36.7%
DISEASE CODE LEVEL 1 : PREFERRED TERM	N	%	N	%	N	%
BACK PAIN	3	1.6	1	1.1	4	1.5
DEFORMITY, ACQUIRED	1	0.5	1	1.1	2	0.7
PAIN, JOINT	1	0.5	0	0.0	1	0.4
NERVOUS SYST/SENSE ORGAN DIS:	4	2.2	3	3.2	7	2.5
CATARACT	0	0.0	1	1.1	1	0.4
EPILEPSY	2	1.1	1	1.1	3	1.1
EYE DISORD, OTHER	1	0.5	0	0.0	1	0.4
MENINGITIS	2	1.1	0	0.0	2	0.7
MIGRAINE	0	0.0	1	1.1	1	0.4
OPERATIONS:	13	7.1	9	9.7	22	8.0
OPERATION, APPENDIX	4	2.2	2	2.2	6	2.2
OPERATION, BONE/JOINT	3	1.6	0	0.0	3	1.1
OPERATION, EAR	0	0.0	1	1.1	1	0.4
OPERATION, EYE	0	0.0	1	1.1	1	0.4
OPERATION, FEM GENITAL	0	0.0	1	1.1	1	0.4
OPERATION, NOSE/MOUTH	6	3.3	5	5.4	11	4.0
OPERATION, OTHER MUSCULOSKEL	1	0.5	0	0.0	1	0.4
OPERATION, OTHER URINARY	0	0.0	1	1.1	1	0.4
OPERATION, SKIN/SUBCUT	1	0.5	0	0.0	1	0.4
PROCEDURE, SURGERY UNSP	0	0.0	1	1.1	1	0.4
PROCEDURES:	1	0.5	0	0.0	1	0.4
EVALUATION, DX EXAM	1	0.5	0	0.0	1	0.4
RESPIRATORY SYST DIS:	17	9.3	8	8.6	25	9.1
ASTHMA	10	5.5	3	3.2	13	4.7
BRONCHITIS, OTHER	2	1.1	0	0.0	2	0.7
PNEUMONIA, OTHER	0	0.0	2	2.2	2	0.7
RESP DIS, OTHER	1	0.5	0	0.0	1	0.4
RHINITIS, ALLERGIC	3	1.6	4	4.3	7	2.5

Table 13.3.2b

Significant Medical/Surgical History and Physical Examination
Number and % of Patients With Past, Ongoing or Past and Ongoing Conditions
Intention to Treat Population

TREATMENT GROUP	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH CONDITIONS	64	35.2%	37	39.8%	101	36.7%
DISEASE CODE LEVEL 1 : PREFERRED TERM	N	%	N	%	N	%
SINUSITIS, OTHER	1	0.5	0	0.0	1	0.4
SINUSITIS,NOS	2	1.1	0	0.0	2	0.7
SIGNS,SYMPTOMS,ILL-DEFINED CON:	21	11.5	9	9.7	30	10.9
ANOREXIA	0	0.0	1	1.1	1	0.4
CARDIAC MURMURS	1	0.5	0	0.0	1	0.4
CONVULSIONS	1	0.5	0	0.0	1	0.4
DIZZINESS AND GIDDINESS	3	1.6	0	0.0	3	1.1
EPISTAXIS	1	0.5	0	0.0	1	0.4
FLATULENCE	0	0.0	1	1.1	1	0.4
GASTROINTEST PROB, NEC	1	0.5	0	0.0	1	0.4
HEADACHE	9	4.9	5	5.4	14	5.1
HYPERVENTILATION	0	0.0	1	1.1	1	0.4
INSOMNIA	4	2.2	2	2.2	6	2.2
MENTAL STATUS, IMPAIRED	1	0.5	0	0.0	1	0.4
NAUSEA	2	1.1	0	0.0	2	0.7
PAIN, ABDOMINO-PELVIC	3	1.6	0	0.0	3	1.1
PALPITATIONS	0	0.0	1	1.1	1	0.4
SWELLING, MASS, LOCALIZED	1	0.5	0	0.0	1	0.4
SKIN/SUBCUTANEOUS TISSUE DIS:	5	2.7	4	4.3	9	3.3
INFLAM SKIN/SUBCUT	1	0.5	0	0.0	1	0.4
SKIN/SUBCUT DISORD, OTHER	4	2.2	4	4.3	8	2.9

Table 13.5b

Personal History - Current Situation
Family Composition

Intention to Treat Population

	Paroxetine		Placebo	
	N	%	N	%
2 parent home	92	50.5	48	51.6
Single parent alone	34	18.7	16	17.2
1 parent & 1 step-parent	11	6.0	4	4.3
1 parent & 1 common-law parent	3	1.6	3	3.2
Other relative(s) is (are) caregiver(s)	6	3.3	2	2.2
Parent & other relative(s) are caregiver(s)	3	1.6	3	3.2
Other	33	18.1	17	18.3
Number of patients in group	182	100.0	93	100.0

Table 13.6b

Personal History - Current Situation
Adoptive Status

Intention to Treat Population

	Paroxetine		Placebo	
	N	%	N	%
Adopted	5	2.7	0	0
Natural offspring	172	94.5	91	97.8
Other	5	2.7	2	2.2
Number of patients in group	182	100.0	93	100.0

Table 13.7b

Personal History - Current Situation
Education

Intention to Treat Population

	Paroxetine		Placebo	
	N	%	N	%
Regular education	168	92.3	85	91.4
Special education	11	6.0	7	7.5
Number of patients in group	182	100.0	93	100.0
Missing	3	0	1	0

11 Source Tables: Efficacy Results

Table 14.010b

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: No

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.3	24.0	0.4	11.0	36.0	155	24.7	24.0	0.6	13.0	36.0	81
Week 2	-4.1	-4.0	0.4	-19.0	7.0	153	-4.0	-4.0	0.5	-20.0	6.0	81
Week 4	-6.5	-7.0	0.5	-25.0	15.0	141	-6.3	-6.0	0.6	-20.0	7.0	73
Week 6	-8.1	-9.0	0.6	-26.0	12.0	131	-7.3	-7.0	0.7	-21.0	7.0	71
Week 8	-9.6	-10.0	0.5	-25.0	9.0	129	-8.7	-9.0	0.7	-22.0	7.0	67
Week 12	-10.6	-11.0	0.6	-26.0	6.0	112	-9.9	-9.0	0.7	-22.0	2.0	61

Table 14.010b

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: Yes

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	26.9	26.5	1.2	20.0	37.0	16	25.7	27.0	1.7	16.0	29.0	7
Week 2	-4.4	-3.5	1.2	-12.0	2.0	14	-9.9	-10.0	2.4	-18.0	0.0	7
Week 4	-6.6	-7.0	1.3	-15.0	1.0	14	-10.7	-13.5	3.1	-18.0	2.0	6
Week 6	-9.1	-9.0	1.7	-21.0	2.0	15	-12.0	-14.5	2.8	-18.0	0.0	6
Week 8	-12.8	-12.5	1.3	-20.0	-4.0	14	-11.6	-15.0	3.3	-18.0	0.0	5
Week 12	-13.4	-13.5	1.8	-23.0	-1.0	14	-10.2	-14.0	4.5	-19.0	1.3	5

Table 14.010d

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population (LOCF)

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: No

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.3	24.0	0.4	11.0	36.0	155	24.7	24.0	0.6	13.0	36.0	81
Week 2	-4.1	-4.0	0.4	-19.0	7.0	153	-4.0	-4.0	0.5	-20.0	6.0	81
Week 4	-6.3	-6.0	0.5	-25.0	15.0	155	-6.2	-6.0	0.6	-20.0	7.0	81
Week 6	-7.4	-7.0	0.5	-26.0	12.0	155	-7.1	-7.0	0.6	-21.0	7.0	81
Week 8	-8.4	-8.0	0.5	-25.0	9.0	155	-7.9	-8.0	0.7	-22.0	7.0	81
Week 12	-8.9	-9.0	0.5	-26.0	6.0	155	-8.7	-8.0	0.7	-22.0	7.0	81

Table 14.010d

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population (LOCF)

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: Yes

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	26.9	26.5	1.2	20.0	37.0	16	25.7	27.0	1.7	16.0	29.0	7
Week 2	-4.4	-3.5	1.2	-12.0	2.0	14	-9.9	-10.0	2.4	-18.0	0.0	7
Week 4	-7.0	-8.0	1.3	-15.0	1.0	15	-10.6	-12.0	2.7	-18.0	2.0	7
Week 6	-9.3	-10.5	1.6	-21.0	2.0	16	-11.7	-14.0	2.4	-18.0	0.0	7
Week 8	-11.3	-11.6	1.6	-20.0	2.0	16	-12.1	-15.0	2.4	-18.0	0.0	7
Week 12	-11.8	-13.0	1.9	-23.0	2.0	16	-11.1	-14.0	3.3	-19.0	1.3	7

Table 14.01b

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline)
Excluding Centre 007
Intention to Treat Population

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	176	8	4.5	89	2	2.2
Week 2	165	22	13.3	86	11	12.8
Week 3	153	32	20.9	84	24	28.6
Week 4	155	57	36.8	77	22	28.6
Week 6	146	69	47.3	77	32	41.6
Week 8	144	94	65.3	72	43	59.7
Week 12	126	94	74.6	66	47	71.2

Table 14.01c

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline)
Excluding Centre 007
Per Protocol Population

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	130	4	3.1	66	2	3.0
Week 2	126	18	14.3	66	10	15.2
Week 3	123	30	24.4	68	20	29.4
Week 4	127	51	40.2	63	18	28.6
Week 6	123	59	48.0	66	27	40.9
Week 8	123	82	66.7	61	36	59.0
Week 12	108	82	75.9	56	40	71.4

Table 14.01d

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline)
Excluding Centre 007
Intention to Treat Population LOCF

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	176	8	4.5	89	2	2.2
Week 2	177	23	13.0	91	12	13.2
Week 3	177	35	19.8	91	24	26.4
Week 4	177	60	33.9	91	25	27.5
Week 6	177	73	41.2	91	33	36.3
Week 8	177	97	54.8	91	45	49.5
Week 12	177	107	60.5	91	53	58.2

Table 14.01e

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline)
Excluding Centre 007
Per Protocol Population LOCF

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	130	4	3.1	66	2	3.0
Week 2	130	18	13.8	68	11	16.2
Week 3	130	31	23.8	68	20	29.4
Week 4	130	52	40.0	68	21	30.9
Week 6	130	61	46.9	68	28	41.2
Week 8	130	83	63.8	68	38	55.9
Week 12	130	91	70.0	68	45	66.2

Table 14.02b

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Intention to Treat Population
Dose Level = 1

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	102	5	4.9	53	1	1.9
Week 2	93	14	15.1	51	7	13.7
Week 3	82	21	25.6	49	19	38.8
Week 4	83	37	44.6	46	18	39.1
Week 6	78	40	51.3	46	23	50.0
Week 8	79	61	77.2	43	29	67.4
Week 12	71	58	81.7	39	31	79.5

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02b

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Intention to Treat Population
Dose Level = 2

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	43	3	7.0	17		
Week 2	41	8	19.5	17	2	11.8
Week 3	40	9	22.5	16	3	18.8
Week 4	42	15	35.7	14	2	14.3
Week 6	42	25	59.5	15	6	40.0
Week 8	41	27	65.9	14	9	64.3
Week 12	39	29	74.4	13	11	84.6

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02b

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Intention to Treat Population
Dose Level = 3

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	31			19	1	5.3
Week 2	31			18	2	11.1
Week 3	31	2	6.5	19	2	10.5
Week 4	30	5	16.7	17	2	11.8
Week 6	26	4	15.4	16	3	18.8
Week 8	24	6	25.0	15	5	33.3
Week 12	16	7	43.8	14	5	35.7

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02c

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Per Protocol Population
Dose Level = 1

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	76	1	1.3	39	1	2.6
Week 2	73	11	15.1	40	7	17.5
Week 3	71	20	28.2	41	16	39.0
Week 4	73	33	45.2	38	15	39.5
Week 6	70	37	52.9	39	19	48.7
Week 8	71	55	77.5	37	24	64.9
Week 12	64	53	82.8	32	26	81.3

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02c

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Per Protocol Population
Dose Level = 2

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	32	3	9.4	13		
Week 2	31	7	22.6	13	1	7.7
Week 3	30	8	26.7	13	2	15.4
Week 4	32	14	43.8	12	1	8.3
Week 6	32	19	59.4	13	5	38.5
Week 8	31	22	71.0	12	7	58.3
Week 12	29	22	75.9	12	10	83.3

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02c

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Per Protocol Population
Dose Level = 3

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	22			14	1	7.1
Week 2	22			13	2	15.4
Week 3	22	2	9.1	14	2	14.3
Week 4	22	4	18.2	13	2	15.4
Week 6	21	3	14.3	14	3	21.4
Week 8	21	5	23.8	12	5	41.7
Week 12	15	7	46.7	12	4	33.3

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02d

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Intention to Treat Population LOCF
Dose Level = 1

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	102	5	4.9	53	1	1.9
Week 2	103	15	14.6	55	7	12.7
Week 3	103	24	23.3	55	19	34.5
Week 4	103	40	38.8	55	20	36.4
Week 6	103	44	42.7	55	24	43.6
Week 8	103	64	62.1	55	30	54.5
Week 12	103	68	66.0	55	35	63.6

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02d

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Intention to Treat Population LOCF
Dose Level = 2

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	43	3	7.0	17		
Week 2	43	8	18.6	17	2	11.8
Week 3	43	9	20.9	17	3	17.6
Week 4	43	15	34.9	17	3	17.6
Week 6	43	25	58.1	17	6	35.3
Week 8	43	27	62.8	17	9	52.9
Week 12	43	30	69.8	17	12	70.6

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02d

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Intention to Treat Population LOCF
Dose Level = 3

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	31			19	1	5.3
Week 2	31			19	3	15.8
Week 3	31	2	6.5	19	2	10.5
Week 4	31	5	16.1	19	2	10.5
Week 6	31	4	12.9	19	3	15.8
Week 8	31	6	19.4	19	6	31.6
Week 12	31	9	29.0	19	6	31.6

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

Table 14.02e

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Per Protocol Population LOCF
Dose Level = 1

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	76	1	1.3	39	1	2.6
Week 2	76	11	14.5	41	7	17.1
Week 3	76	21	27.6	41	16	39.0
Week 4	76	34	44.7	41	17	41.5
Week 6	76	39	51.3	41	20	48.8
Week 8	76	56	73.7	41	25	61.0
Week 12	76	60	78.9	41	30	73.2

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02e

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Per Protocol Population LOCF
Dose Level = 2

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	32	3	9.4	13		
Week 2	32	7	21.9	13	1	7.7
Week 3	32	8	25.0	13	2	15.4
Week 4	32	14	43.8	13	2	15.4
Week 6	32	19	59.4	13	5	38.5
Week 8	32	22	68.8	13	7	53.8
Week 12	32	23	71.9	13	10	76.9

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.02e

Montgomery-Asberg Depression Rating Scale
Response Rates by Dose at Endpoint
Excluding Centre 007
Per Protocol Population LOCF
Dose Level = 3

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	22			14	1	7.1
Week 2	22			14	3	21.4
Week 3	22	2	9.1	14	2	14.3
Week 4	22	4	18.2	14	2	14.3
Week 6	22	3	13.6	14	3	21.4
Week 8	22	5	22.7	14	6	42.9
Week 12	22	8	36.4	14	5	35.7

Active treatment dose levels: 1 = 20mg, 2 = 30mg, 3 = 40mg

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]LT140.SAS (24JUL98 14:56)

Table 14.03b

Montgomery-Asberg Depression Rating Scale
Baseline and Change from Baseline in Total Scores
Excluding Centre 007
Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	s.e	Minimum	Maximum	Number of Patients in Group	Mean	Median	s.e	Minimum	Maximum	Number of Patients in Group
Baseline	25.9	25.0	0.5	16	40	177	25.9	25.0	0.6	16	39	91
Week 1	-3.3	-2.5	0.4	-23	11	176	-3.4	-3.0	0.5	-16	11	89
Week 2	-5.4	-5.0	0.5	-29	12	165	-5.7	-5.0	0.7	-22	10	86
Week 3	-7.9	-7.0	0.6	-32	9	153	-7.5	-6.5	0.8	-29	10	84
Week 4	-9.8	-10.0	0.7	-36	11	155	-9.0	-8.0	0.7	-25	6	77
Week 6	-11.7	-12.0	0.7	-35	12	146	-11.0	-11.0	1.0	-27	18	77
Week 8	-14.2	-14.0	0.7	-37	12	144	-12.9	-12.5	1.0	-32	13	72
Week 12	-16.2	-17.0	0.8	-39	11	126	-15.2	-16.0	1.0	-31	5	66

Table 14.03d

Montgomery-Asberg Depression Rating Scale
Baseline and Change from Baseline in Total Scores
Excluding Centre 007
Intention to Treat Population LOCF

	Paroxetine						Placebo					
	Mean	Median	s.e	Minimum	Maximum	Number of Patients in Group	Mean	Median	s.e	Minimum	Maximum	Number of Patients in Group
Baseline	25.9	25.0	0.5	16	40	177	25.9	25.0	0.6	16	39	91
Week 1	-3.3	-2.5	0.4	-23	11	176	-3.4	-3.0	0.5	-16	11	89
Week 2	-5.4	-5.0	0.5	-29	12	177	-5.8	-5.0	0.6	-22	10	91
Week 3	-7.5	-7.0	0.5	-32	9	177	-7.2	-6.0	0.8	-29	10	91
Week 4	-9.2	-9.0	0.6	-36	11	177	-8.5	-8.0	0.7	-25	10	91
Week 6	-10.5	-11.0	0.7	-35	12	177	-10.1	-9.0	0.9	-27	18	91
Week 8	-12.2	-13.0	0.7	-37	12	177	-10.9	-11.0	1.0	-32	18	91
Week 12	-13.2	-14.0	0.7	-39	12	177	-12.5	-13.0	1.0	-31	18	91

Table 14.04b

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores
Excluding Centre 007
Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.6	24.0	0.4	11.0	37.0	171	24.8	24.0	0.5	13.0	36.0	88
Week 2	-4.1	-4.0	0.4	-19.0	7.0	167	-4.4	-4.0	0.5	-20.0	6.0	88
Week 4	-6.5	-7.0	0.5	-25.0	15.0	155	-6.6	-6.0	0.6	-20.0	7.0	79
Week 6	-8.2	-9.0	0.5	-26.0	12.0	146	-7.7	-7.1	0.7	-21.0	7.0	77
Week 8	-9.9	-10.0	0.5	-25.0	9.0	143	-8.9	-9.0	0.7	-22.0	7.0	72
Week 12	-10.9	-11.0	0.6	-26.0	6.0	126	-9.9	-9.5	0.7	-22.0	2.0	66

Table 14.04c

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores
Excluding Centre 007
Per Protocol Population

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.4	24.0	0.4	11.0	37.0	130	24.1	24.0	0.6	14.0	36.0	68
Week 2	-4.5	-4.0	0.5	-19.0	7.0	126	-4.4	-4.0	0.6	-20.0	6.0	68
Week 4	-7.2	-7.0	0.5	-25.0	15.0	127	-6.8	-6.0	0.7	-18.0	4.0	65
Week 6	-8.5	-9.0	0.6	-26.0	12.0	123	-8.0	-7.6	0.7	-21.0	4.0	66
Week 8	-10.1	-10.0	0.5	-25.0	9.0	123	-9.2	-9.0	0.7	-22.0	4.0	61
Week 12	-10.9	-11.0	0.6	-26.0	6.0	108	-10.1	-9.5	0.7	-21.0	0.0	56

Table 14.04d

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores
Excluding Centre 007
Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.6	24.0	0.4	11.0	37.0	171	24.8	24.0	0.5	13.0	36.0	88
Week 2	-4.1	-4.0	0.4	-19.0	7.0	167	-4.4	-4.0	0.5	-20.0	6.0	88
Week 4	-6.3	-6.0	0.5	-25.0	15.0	170	-6.5	-6.0	0.6	-20.0	7.0	88
Week 6	-7.6	-7.0	0.5	-26.0	12.0	171	-7.5	-8.0	0.6	-21.0	7.0	88
Week 8	-8.7	-9.0	0.5	-25.0	9.0	171	-8.2	-8.0	0.7	-22.0	7.0	88
Week 12	-9.2	-9.0	0.5	-26.0	6.0	171	-8.9	-8.5	0.7	-22.0	7.0	88

Table 14.04e

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores
Excluding Centre 007
Per Protocol Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.4	24.0	0.4	11.0	37.0	130	24.1	24.0	0.6	14.0	36.0	68
Week 2	-4.5	-4.0	0.5	-19.0	7.0	126	-4.4	-4.0	0.6	-20.0	6.0	68
Week 4	-7.2	-7.0	0.5	-25.0	15.0	129	-6.9	-6.0	0.7	-20.0	4.0	68
Week 6	-8.4	-9.0	0.5	-26.0	12.0	130	-8.0	-8.0	0.7	-21.0	4.0	68
Week 8	-9.7	-10.0	0.5	-25.0	9.0	130	-8.7	-9.0	0.7	-22.0	4.0	68
Week 12	-10.0	-10.0	0.6	-26.0	6.0	130	-9.5	-9.0	0.7	-21.0	4.0	68

Table 14.05b

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Age Group
Excluding Centre 007
Intention to Treat Population

Age Group: <= 16 Years

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	117	3	2.6	55	2	3.6
Week 2	108	11	10.2	54	4	7.4
Week 3	100	15	15.0	55	14	25.5
Week 4	103	37	35.9	51	15	29.4
Week 6	97	41	42.3	51	21	41.2
Week 8	93	54	58.1	49	30	61.2
Week 12	80	56	70.0	45	33	73.3

Table 14.05b

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Age Group
Excluding Centre 007
Intention to Treat Population

Age Group: > 16 Years

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	59	5	8.5	34	0	0
Week 2	57	11	19.3	32	7	21.9
Week 3	53	17	32.1	29	10	34.5
Week 4	52	20	38.5	26	7	26.9
Week 6	49	28	57.1	26	11	42.3
Week 8	51	40	78.4	23	13	56.5
Week 12	46	38	82.6	21	14	66.7

Table 14.05d

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Age Group
Excluding Centre 007
Intention to Treat Population LOCF

Age Group: <= 16 Years

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	117	3	2.6	55	2	3.6
Week 2	118	12	10.2	57	5	8.8
Week 3	118	17	14.4	57	14	24.6
Week 4	118	38	32.2	57	17	29.8
Week 6	118	43	36.4	57	22	38.6
Week 8	118	56	47.5	57	32	56.1
Week 12	118	65	55.1	57	37	64.9

Table 14.05d

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Age Group
Excluding Centre 007
Intention to Treat Population LOCF

Age Group: > 16 Years

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	59	5	8.5	34	0	0
Week 2	59	11	18.6	34	7	20.6
Week 3	59	18	30.5	34	10	29.4
Week 4	59	22	37.3	34	8	23.5
Week 6	59	30	50.8	34	11	32.4
Week 8	59	41	69.5	34	13	38.2
Week 12	59	42	71.2	34	16	47.1

Table 14.06b

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Presence of Comorbid Conduct Disorder at Baseline
Excluding Centre 007
Intention to Treat Population

Presence of Comorbid Conduct Disorder at Baseline: No

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	176	8	4.5	89	2	2.2
Week 2	165	22	13.3	86	11	12.8
Week 3	153	32	20.9	84	24	28.6
Week 4	155	57	36.8	77	22	28.6
Week 6	146	69	47.3	77	32	41.6
Week 8	144	94	65.3	72	43	59.7
Week 12	126	94	74.6	66	47	71.2

Table 14.06d

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Presence of Comorbid Conduct Disorder at Baseline
Excluding Centre 007
Intention to Treat Population LOCF

Presence of Comorbid Conduct Disorder at Baseline: No

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	176	8	4.5	89	2	2.2
Week 2	177	23	13.0	91	12	13.2
Week 3	177	35	19.8	91	24	26.4
Week 4	177	60	33.9	91	25	27.5
Week 6	177	73	41.2	91	33	36.3
Week 8	177	97	54.8	91	45	49.5
Week 12	177	107	60.5	91	53	58.2

Table 14.07b

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: No

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	159	8	5.0	81	1	1.2
Week 2	151	21	13.9	80	10	12.5
Week 3	139	31	22.3	78	21	26.9
Week 4	140	54	38.6	71	19	26.8
Week 6	131	65	49.6	71	29	40.8
Week 8	130	85	65.4	67	40	59.7
Week 12	112	84	75.0	61	44	72.1

Table 14.07b

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: Yes

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	17	0	0	8	1	12.5
Week 2	14	1	7.1	6	1	16.7
Week 3	14	1	7.1	6	3	50.0
Week 4	15	3	20.0	6	3	50.0
Week 6	15	4	26.7	6	3	50.0
Week 8	14	9	64.3	5	3	60.0
Week 12	14	10	71.4	5	3	60.0

Table 14.07d

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population LOCF

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: No

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	159	8	5.0	81	1	1.2
Week 2	160	22	13.8	83	10	12.0
Week 3	160	34	21.3	83	21	25.3
Week 4	160	56	35.0	83	22	26.5
Week 6	160	68	42.5	83	30	36.1
Week 8	160	88	55.0	83	41	49.4
Week 12	160	97	60.6	83	49	59.0

Table 14.07d

Montgomery-Asberg Depression Rating Scale
Response Rates (Total Score Reduced by at Least 50% from Baseline) By Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline
Excluding Centre 007
Intention to Treat Population LOCF

Presence of Comorbid Social Phobia/OCD/GAD/Panic Disorder at Baseline: Yes

	Paroxetine			Placebo		
	Number of Patients	Number with 50% Reduction	Percent	Number of Patients	Number with 50% Reduction	Percent
Week 1	17	0	0	8	1	12.5
Week 2	17	1	5.9	8	2	25.0
Week 3	17	1	5.9	8	3	37.5
Week 4	17	4	23.5	8	3	37.5
Week 6	17	5	29.4	8	3	37.5
Week 8	17	9	52.9	8	4	50.0
Week 12	17	10	58.8	8	4	50.0

Table 14.08b

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Age Group
Excluding Centre 007
Intention to Treat Population

Age Group: <= 16 Years

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.2	24.0	0.5	11.0	37.0	113	24.4	24.0	0.6	14.0	35.0	55
Week 2	-3.6	-3.0	0.4	-19.0	7.0	109	-4.5	-4.0	0.6	-20.0	6.0	55
Week 4	-5.7	-5.5	0.6	-19.0	15.0	102	-6.7	-6.0	0.8	-20.0	3.0	52
Week 6	-7.3	-7.0	0.6	-21.0	9.0	97	-7.8	-7.0	0.8	-21.0	3.0	51
Week 8	-8.9	-8.5	0.6	-23.0	5.0	93	-8.9	-8.0	0.8	-22.0	2.0	49
Week 12	-10.2	-10.0	0.7	-24.0	3.0	80	-9.7	-10.0	0.8	-21.0	2.0	45

Table 14.08b

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Age Group
Excluding Centre 007
Intention to Treat Population

Age Group: > 16 Years

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	25.3	26.0	0.6	13.0	35.0	58	25.4	25.0	1.0	13.0	36.0	33
Week 2	-5.1	-5.0	0.8	-15.0	5.0	58	-4.3	-3.0	0.9	-18.0	3.0	33
Week 4	-8.0	-8.0	0.9	-25.0	6.0	53	-6.5	-7.0	1.2	-18.0	7.0	27
Week 6	-10.1	-11.0	1.0	-26.0	12.0	49	-7.5	-8.0	1.2	-18.0	7.0	26
Week 8	-11.8	-13.0	0.9	-25.0	9.0	50	-9.0	-10.0	1.3	-20.0	7.0	23
Week 12	-12.3	-13.0	0.9	-26.0	6.0	46	-10.5	-8.0	1.2	-22.0	0.0	21

Table 14.08d

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Age Group
Excluding Centre 007
Intention to Treat Population (LOCF)

Age Group: <= 16 Years

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.2	24.0	0.5	11.0	37.0	113	24.4	24.0	0.6	14.0	35.0	55
Week 2	-3.6	-3.0	0.4	-19.0	7.0	109	-4.5	-4.0	0.6	-20.0	6.0	55
Week 4	-5.5	-5.0	0.6	-19.0	15.0	112	-6.8	-6.0	0.8	-20.0	3.0	55
Week 6	-6.6	-6.0	0.6	-21.0	9.0	113	-7.7	-7.1	0.7	-21.0	3.0	55
Week 8	-7.7	-7.0	0.6	-23.0	6.0	113	-8.7	-8.0	0.8	-22.0	2.0	55
Week 12	-8.2	-8.0	0.6	-24.0	6.0	113	-9.2	-9.0	0.8	-21.0	2.0	55

Table 14.08d

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Age Group
Excluding Centre 007
Intention to Treat Population (LOCF)

Age Group: > 16 Years

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	25.3	26.0	0.6	13.0	35.0	58	25.4	25.0	1.0	13.0	36.0	33
Week 2	-5.1	-5.0	0.8	-15.0	5.0	58	-4.3	-3.0	0.9	-18.0	3.0	33
Week 4	-7.9	-7.5	0.9	-25.0	6.0	58	-6.0	-7.0	1.1	-18.0	7.0	33
Week 6	-9.5	-10.5	0.9	-26.0	12.0	58	-7.0	-8.0	1.1	-18.0	7.0	33
Week 8	-10.5	-11.0	0.9	-25.0	9.0	58	-7.3	-9.0	1.2	-20.0	7.0	33
Week 12	-11.0	-11.5	0.9	-26.0	6.0	58	-8.4	-8.0	1.2	-22.0	7.0	33

Table 14.09b

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Presence of Comorbid Conduct Disorder at Baseline
Excluding Centre 007
Intention to Treat Population

Presence of Comorbid Conduct Disorder at Baseline: No

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.6	24.0	0.4	11.0	37.0	171	24.8	24.0	0.5	13.0	36.0	88
Week 2	-4.1	-4.0	0.4	-19.0	7.0	167	-4.4	-4.0	0.5	-20.0	6.0	88
Week 4	-6.5	-7.0	0.5	-25.0	15.0	155	-6.6	-6.0	0.6	-20.0	7.0	79
Week 6	-8.2	-9.0	0.5	-26.0	12.0	146	-7.7	-7.1	0.7	-21.0	7.0	77
Week 8	-9.9	-10.0	0.5	-25.0	9.0	143	-8.9	-9.0	0.7	-22.0	7.0	72
Week 12	-10.9	-11.0	0.6	-26.0	6.0	126	-9.9	-9.5	0.7	-22.0	2.0	66

Table 14.09d

Kiddie-SADS-Lifetime (Using Last 2 Weeks rating score)
Baseline and Change from Baseline in Depression Subscale Total Scores By Presence of Comorbid Conduct Disorder at Baseline
Excluding Centre 007
Intention to Treat Population (LOCF)

Presence of Comorbid Conduct Disorder at Baseline: No

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	24.6	24.0	0.4	11.0	37.0	171	24.8	24.0	0.5	13.0	36.0	88
Week 2	-4.1	-4.0	0.4	-19.0	7.0	167	-4.4	-4.0	0.5	-20.0	6.0	88
Week 4	-6.3	-6.0	0.5	-25.0	15.0	170	-6.5	-6.0	0.6	-20.0	7.0	88
Week 6	-7.6	-7.0	0.5	-26.0	12.0	171	-7.5	-8.0	0.6	-21.0	7.0	88
Week 8	-8.7	-9.0	0.5	-25.0	9.0	171	-8.2	-8.0	0.7	-22.0	7.0	88
Week 12	-9.2	-9.0	0.5	-26.0	6.0	171	-8.9	-8.5	0.7	-22.0	7.0	88

Table 14.10b

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
WEEK	CGI Severity	N	%	N	%
Baseline	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	1	1.12
	Normal, not at all ill	0	0.00	0	0.00
	Borderline mentally ill	5	2.91	3	3.37
	Mildly ill	25	14.53	17	19.10
	Moderately ill	84	48.84	33	37.08
	Markedly ill	48	27.91	26	29.21
	Severely ill	10	5.81	9	10.11
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	172	100.00	89	100.00

Table 14.10b

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 2	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	4	2.38	2	2.25
	Borderline mentally ill	16	9.52	14	15.73
	Mildly ill	47	27.98	26	29.21
	Moderately ill	71	42.26	23	25.84
	Markedly ill	24	14.29	17	19.10
	Severely ill	6	3.57	7	7.87
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	168	100.00	89	100.00

Table 14.10b

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 4	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	17	10.97	6	7.59
	Borderline mentally ill	35	22.58	26	32.91
	Mildly ill	52	33.55	25	31.65
	Moderately ill	40	25.81	13	16.46
	Markedly ill	7	4.52	8	10.13
	Severely ill	4	2.58	1	1.27
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	155	100.00	79	100.00

Table 14.10b

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 6	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	28	19.18	12	15.58
	Borderline mentally ill	41	28.08	25	32.47
	Mildly ill	42	28.77	16	20.78
	Moderately ill	26	17.81	15	19.48
	Markedly ill	6	4.11	8	10.39
	Severely ill	3	2.05	1	1.30
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	146	100.00	77	100.00

Table 14.10b

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 8	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	44	30.56	19	26.39
	Borderline mentally ill	47	32.64	22	30.56
	Mildly ill	28	19.44	17	23.61
	Moderately ill	17	11.81	10	13.89
	Markedly ill	6	4.17	4	5.56
	Severely ill	1	0.69	0	0.00
	Among the most extremely ill patients	1	0.69	0	0.00
	Number of Patients in Group	144	100.00	72	100.00

Table 14.10b

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 12	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	59	46.83	33	50.00
	Borderline mentally ill	42	33.33	14	21.21
	Mildly ill	14	11.11	10	15.15
	Moderately ill	7	5.56	7	10.61
	Markedly ill	3	2.38	2	3.03
	Severely ill	1	0.79	0	0.00
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	126	100.00	66	100.00

Table 14.10d

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
WEEK	CGI Severity	N	%	N	%
Baseline	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	1	1.12
	Normal, not at all ill	0	0.00	0	0.00
	Borderline mentally ill	5	2.91	3	3.37
	Mildly ill	25	14.53	17	19.10
	Moderately ill	84	48.84	33	37.08
	Markedly ill	48	27.91	26	29.21
	Severely ill	10	5.81	9	10.11
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	172	100.00	89	100.00

Table 14.10d

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 2	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	4	2.38	2	2.25
	Borderline mentally ill	16	9.52	14	15.73
	Mildly ill	47	27.98	26	29.21
	Moderately ill	71	42.26	23	25.84
	Markedly ill	24	14.29	17	19.10
	Severely ill	6	3.57	7	7.87
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	168	100.00	89	100.00

Table 14.10d

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 4	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	18	10.53	6	6.74
	Borderline mentally ill	37	21.64	28	31.46
	Mildly ill	57	33.33	26	29.21
	Moderately ill	45	26.32	16	17.98
	Markedly ill	8	4.68	11	12.36
	Severely ill	6	3.51	2	2.25
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	171	100.00	89	100.00

Table 14.10d

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 6	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	29	16.86	13	14.61
	Borderline mentally ill	44	25.58	26	29.21
	Mildly ill	53	30.81	19	21.35
	Moderately ill	34	19.77	19	21.35
	Markedly ill	6	3.49	11	12.36
	Severely ill	6	3.49	1	1.12
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	172	100.00	89	100.00

Table 14.10d

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 8	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	46	26.74	19	21.35
	Borderline mentally ill	49	28.49	24	26.97
	Mildly ill	35	20.35	20	22.47
	Moderately ill	28	16.28	15	16.85
	Markedly ill	8	4.65	10	11.24
	Severely ill	5	2.91	1	1.12
	Among the most extremely ill patients	1	0.58	0	0.00
	Number of Patients in Group	172	100.00	89	100.00

Table 14.10d

Number and Percentage of Patients in Each Category of CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Severity				
Week 12	Missing	0	0.00	0	0.00
	Not assessed	0	0.00	0	0.00
	Normal, not at all ill	65	37.79	37	41.57
	Borderline mentally ill	47	27.33	16	17.98
	Mildly ill	24	13.95	13	14.61
	Moderately ill	24	13.95	13	14.61
	Markedly ill	6	3.49	9	10.11
	Severely ill	6	3.49	1	1.12
	Among the most extremely ill patients	0	0.00	0	0.00
	Number of Patients in Group	172	100.00	89	100.00

Table 14.11b

Baseline and Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	4.2	4.0	0.1	2	6	172	4.2	4.0	0.1	2	6	88
Week 2	-0.5	0.0	0.1	-3	2	168	-0.5	0.0	0.1	-3	3	89
Week 4	-1.2	-1.0	0.1	-5	1	155	-1.2	-1.0	0.1	-3	2	79
Week 6	-1.6	-2.0	0.1	-5	2	146	-1.3	-1.0	0.2	-4	2	77
Week 8	-1.9	-2.0	0.1	-5	1	144	-1.7	-1.5	0.2	-4	2	72
Week 12	-2.4	-3.0	0.1	-5	1	126	-2.1	-2.0	0.2	-4	3	66

Table 14.11d

Baseline and Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group	Mean	Median	S.E	Minimum	Maximum	Number of Patients in Group
Baseline	4.2	4.0	0.1	2	6	172	4.2	4.0	0.1	2	6	88
Week 2	-0.5	0.0	0.1	-3	2	168	-0.5	0.0	0.1	-3	3	89
Week 4	-1.2	-1.0	0.1	-5	2	171	-1.1	-1.0	0.1	-3	2	89
Week 6	-1.4	-1.0	0.1	-5	2	172	-1.3	-1.0	0.1	-4	2	89
Week 8	-1.6	-2.0	0.1	-5	2	172	-1.5	-1.0	0.1	-4	2	89
Week 12	-1.9	-2.0	0.1	-5	2	172	-1.8	-2.0	0.2	-4	3	89

Table 14.12b

Number of Patients in Each Catagory of Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

Week 2

	No. of Patients							
	-3	-2	-1	0	1	2	3	Total No. of Patients
Paroxetine	3	20	57	70	17	1	0	168
Placebo	3	11	27	40	5	2	1	89

Week 4

	No. of Patients								
	-5	-4	-3	-2	-1	0	1	2	Total No. of Patients
Paroxetine	1	2	19	34	55	38	6	0	155
Placebo	0	0	12	16	30	18	2	1	79

Table 14.12b

Number of Patients in Each Catagory of Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

Week 6

	No. of Patients								
	-5	-4	-3	-2	-1	0	1	2	Total No. of Patients
Paroxetine	1	3	29	43	44	20	5	1	146
Placebo	0	3	15	13	26	16	1	3	77

Week 8

	No. of Patients								
	-5	-4	-3	-2	-1	0	1	2	Total No. of Patients
Paroxetine	1	9	35	51	26	18	4	0	144
Placebo	0	5	18	13	25	6	4	1	72

Table 14.12b

Number of Patients in Each Catagory of Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population

Week 12

	No. of Patients								
	-5	-4	-3	-2	-1	0	1	3	Total No. of Patients
Paroxetine	3	10	53	35	14	10	1	0	126
Placebo	0	7	21	19	12	5	1	1	66

Table 14.12d

Number of Patients in Each Catagory of Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

Week 2

	No. of Patients							
	-3	-2	-1	0	1	2	3	Total No. of Patients
Paroxetine	3	20	57	70	17	1	0	168
Placebo	3	11	27	40	5	2	1	89

Week 4

	No. of Patients								
	-5	-4	-3	-2	-1	0	1	2	Total No. of Patients
Paroxetine	1	2	20	35	62	44	6	1	171
Placebo	0	0	14	17	32	22	2	2	89

Table 14.12d

Number of Patients in Each Catagory of Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

Week 6

	No. of Patients								
	-5	-4	-3	-2	-1	0	1	2	Total No. of Patients
Paroxetine	1	3	30	45	56	29	6	2	172
Placebo	0	3	16	15	31	20	1	3	89

Week 8

	No. of Patients								
	-5	-4	-3	-2	-1	0	1	2	Total No. of Patients
Paroxetine	1	10	36	51	37	29	7	1	172
Placebo	0	5	20	14	32	11	4	3	89

Table 14.12d

Number of Patients in Each Catagory of Change from Baseline in CGI Severity of Illness Score

Excluding Centre 007

Intention to Treat Population (LOCF)

Week 12

	No. of Patients									
	-5	-4	-3	-2	-1	0	1	2	3	
Paroxetine	3	11	54	42	30	26	5	1		0
Placebo	0	9	25	20	20	10	2	2	1	

(CONTINUED)

	No. of Patients
	Total No. of Patients
Paroxetine	172
Placebo	89

Table 14.13b

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 2	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	10	5.95	3	3.37
	Much Improved	34	20.24	18	20.22
	Minimally improved	65	38.69	41	46.07
	No change	46	27.38	23	25.84
	Minimally worse	9	5.36	4	4.49
	Much worse	4	2.38	0	0.00
	Very much worse	0	0.00	0	0.00
	Total No. of Patients	168	100.00	89	100.00

Table 14.13b

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 4	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	20	12.90	11	13.92
	Much Improved	54	34.84	25	31.65
	Minimally improved	54	34.84	30	37.97
	No change	15	9.68	11	13.92
	Minimally worse	9	5.81	1	1.27
	Much worse	3	1.94	1	1.27
	Very much worse	0	0.00	0	0.00
	Total No. of Patients	155	100.00	79	100.00

Table 14.13b

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 6	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	33	22.60	14	18.18
	Much Improved	58	39.73	27	35.06
	Minimally improved	30	20.55	22	28.57
	No change	16	10.96	7	9.09
	Minimally worse	3	2.05	6	7.79
	Much worse	6	4.11	1	1.30
	Very much worse	0	0.00	0	0.00
	Total No. of Patients	146	100.00	77	100.00

Table 14.13b

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 8	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	49	34.03	21	29.17
	Much Improved	49	34.03	24	33.33
	Minimally improved	26	18.06	15	20.83
	No change	11	7.64	6	8.33
	Minimally worse	4	2.78	5	6.94
	Much worse	4	2.78	1	1.39
	Very much worse	1	0.69	0	0.00
	Total No. of Patients	144	100.00	72	100.00

Table 14.13b

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 12	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	63	50.00	28	42.42
	Much Improved	42	33.33	16	24.24
	Minimally improved	9	7.14	12	18.18
	No change	5	3.97	7	10.61
	Minimally worse	7	5.56	3	4.55
	Much worse	0	0.00	0	0.00
	Very much worse	0	0.00	0	0.00
	Total No. of Patients	126	100.00	66	100.00

Table 14.13d

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
WEEK	CGI Improvement	N	%	N	%
Week 2	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	10	5.95	3	3.37
	Much Improved	34	20.24	18	20.22
	Minimally improved	65	38.69	41	46.07
	No change	46	27.38	23	25.84
	Minimally worse	9	5.36	4	4.49
	Much worse	4	2.38	0	0.00
	Very much worse	0	0.00	0	0.00
	Total No. of Patients	168	100.00	89	100.00

Table 14.13d

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 4	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	22	12.87	11	12.36
	Much Improved	56	32.75	27	30.34
	Minimally improved	59	34.50	32	35.96
	No change	19	11.11	16	17.98
	Minimally worse	10	5.85	2	2.25
	Much worse	5	2.92	1	1.12
	Very much worse	0	0.00	0	0.00
	Total No. of Patients	171	100.00	89	100.00

Table 14.13d

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 6	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	35	20.35	15	16.85
	Much Improved	63	36.63	29	32.58
	Minimally improved	38	22.09	25	28.09
	No change	22	12.79	13	14.61
	Minimally worse	5	2.91	6	6.74
	Much worse	9	5.23	1	1.12
	Very much worse	0	0.00	0	0.00
	Total No. of Patients	172	100.00	89	100.00

Table 14.13d

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 8	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	52	30.23	22	24.72
	Much Improved	53	30.81	27	30.34
	Minimally improved	32	18.60	18	20.22
	No change	20	11.63	13	14.61
	Minimally worse	5	2.91	7	7.87
	Much worse	9	5.23	2	2.25
	Very much worse	1	0.58	0	0.00
	Total No. of Patients	172	100.00	89	100.00

Table 14.13d

Number and Percentage of Patients in Each Category of CGI Global Improvement Score

Excluding Centre 007

Intention to Treat Population (LOCF)

		Treatment			
		Paroxetine		Placebo	
		N	%	N	%
WEEK	CGI Improvement				
Week 12	Missing	0	0.00	0	0.00
	Not evaluated	0	0.00	0	0.00
	Very much improved	71	41.28	32	35.96
	Much Improved	48	27.91	19	21.35
	Minimally improved	20	11.63	15	16.85
	No change	18	10.47	16	17.98
	Minimally worse	8	4.65	6	6.74
	Much worse	6	3.49	1	1.12
	Very much worse	1	0.58	0	0.00
	Total No. of Patients	172	100.00	89	100.00

Table 14.20b

Beck Depression Inventory
Baseline and Change from Baseline in Total Score
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	23.0	22.0	0.8	1	57	174	22.4	20.0	1.2	5	50	90
Week 1	-4.1	-3.0	0.5	-28	11	174	-2.7	-2.0	0.7	-29	15	88
Week 2	-6.0	-5.0	0.5	-25	13	161	-5.1	-5.0	0.7	-24	9	85
Week 3	-7.7	-7.0	0.8	-34	27	152	-6.9	-7.0	1.0	-32	21	83
Week 4	-9.0	-9.0	0.8	-39	27	155	-8.3	-8.5	1.0	-32	24	76
Week 6	-10.0	-8.2	0.9	-55	25	144	-10.3	-9.0	1.1	-40	18	77
Week 8	-12.0	-11.0	0.9	-43	26	141	-12.2	-11.0	1.1	-37	7	72
Week 12	-13.1	-12.5	1.1	-54	36	124	-13.0	-12.0	1.1	-41	5	66

Table 14.20d

Beck Depression Inventory
Baseline and Change from Baseline in Total Score
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	23.0	22.0	0.8	1	57	174	22.4	20.0	1.2	5	50	90
Week 1	-4.1	-3.0	0.5	-28	11	174	-2.7	-2.0	0.7	-29	15	88
Week 2	-5.8	-5.0	0.5	-25	13	174	-5.0	-4.5	0.6	-24	9	90
Week 3	-7.5	-7.0	0.7	-34	27	174	-6.7	-7.0	0.9	-32	21	90
Week 4	-8.9	-8.5	0.7	-39	27	174	-8.1	-8.0	0.9	-32	24	90
Week 6	-9.8	-8.0	0.8	-55	25	174	-9.6	-7.0	1.0	-40	18	90
Week 8	-11.0	-10.0	0.8	-43	26	174	-10.4	-9.0	1.0	-37	18	90
Week 12	-11.9	-11.0	0.9	-54	36	174	-11.2	-10.0	1.0	-41	18	90

Table 14.30b

Moods and Feelings Questionnaire
Baseline and Change from Baseline in Total Scores
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	NUMBER OF PATIENTS IN GROUP	Mean	Median	Std Err	Minimum	Maximum	NUMBER OF PATIENTS IN GROUP
Baseline	33.4	34.0	0.9	3	60	169	33.6	33.0	1.5	8	62	88
Week 2	-5.7	-5.0	0.8	-42	20	165	-5.0	-5.0	1.2	-37	22	88
Week 4	-9.0	-7.0	1.0	-41	18	154	-9.1	-8.0	1.5	-38	23	78
Week 6	-12.4	-10.0	1.1	-46	16	145	-12.3	-10.0	1.6	-48	24	77
Week 8	-15.2	-15.0	1.3	-52	25	142	-16.8	-15.0	1.6	-53	17	72
Week 12	-16.7	-16.0	1.3	-53	22	125	-17.2	-14.0	1.6	-52	8	66

Table 14.30d

Moods and Feelings Questionnaire
Baseline and Change from Baseline in Total Scores
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	NUMBER OF PATIENTS IN GROUP	Mean	Median	Std Err	Minimum	Maximum	NUMBER OF PATIENTS IN GROUP
Baseline	33.4	34.0	0.9	3	60	169	33.6	33.0	1.5	8	62	88
Week 2	-5.7	-5.0	0.8	-42	20	165	-5.0	-5.0	1.2	-37	22	88
Week 4	-8.9	-6.0	0.9	-42	18	168	-8.3	-7.5	1.4	-38	23	88
Week 6	-11.7	-9.9	1.0	-46	18	169	-11.2	-10.0	1.4	-48	24	88
Week 8	-14.0	-12.4	1.1	-52	25	169	-14.1	-11.0	1.5	-53	24	88
Week 12	-15.0	-13.1	1.1	-53	22	169	-14.3	-11.0	1.5	-52	24	88

Table 14.50b

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Every Domain
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.37	0.39	0.01	0.00	0.95	162	0.39	0.39	0.02	0.05	0.95	81
Week 4	-0.10	-0.08	0.01	-0.79	0.29	160	-0.11	-0.11	0.02	-0.60	0.32	79
Week 8	-0.17	-0.13	0.02	-0.84	0.32	140	-0.20	-0.16	0.02	-0.71	0.18	72
Week 12	-0.18	-0.16	0.02	-0.95	0.34	125	-0.21	-0.20	0.02	-0.71	0.18	66

Table 14.50d

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Every Domain
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.37	0.39	0.01	0.00	0.95	162	0.39	0.39	0.02	0.05	0.95	81
Week 4	-0.10	-0.08	0.01	-0.79	0.29	160	-0.11	-0.11	0.02	-0.60	0.32	79
Week 8	-0.16	-0.13	0.02	-0.84	0.32	162	-0.18	-0.16	0.02	-0.71	0.18	81
Week 12	-0.17	-0.14	0.02	-0.95	0.34	162	-0.19	-0.16	0.02	-0.71	0.18	81

Table 14.51b

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Energy Domain
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.55	0.67	0.03	0.00	1.00	162	0.57	0.67	0.04	0.00	1.00	81
Week 4	-0.12	0.00	0.03	-1.00	0.67	160	-0.15	0.00	0.04	-1.00	0.67	79
Week 8	-0.24	-0.17	0.04	-1.00	0.67	140	-0.29	-0.33	0.05	-1.00	0.67	72
Week 12	-0.27	-0.33	0.04	-1.00	1.00	125	-0.32	-0.33	0.05	-1.00	0.67	66

Table 14.51d

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Energy Domain
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.55	0.67	0.03	0.00	1.00	162	0.57	0.67	0.04	0.00	1.00	81
Week 4	-0.12	0.00	0.03	-1.00	0.67	160	-0.15	0.00	0.04	-1.00	0.67	79
Week 8	-0.23	0.00	0.04	-1.00	0.67	162	-0.27	-0.33	0.04	-1.00	0.67	81
Week 12	-0.25	0.00	0.03	-1.00	1.00	162	-0.30	-0.33	0.05	-1.00	0.67	81

Table 14.52b

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Emotional Reaction Domain
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.59	0.67	0.02	0.00	1.00	162	0.63	0.67	0.03	0.11	1.00	81
Week 4	-0.19	-0.11	0.02	-0.89	0.56	160	-0.19	-0.11	0.03	-0.89	0.56	79
Week 8	-0.29	-0.33	0.03	-1.00	0.78	140	-0.34	-0.33	0.04	-1.00	0.44	72
Week 12	-0.31	-0.33	0.03	-1.00	0.54	125	-0.35	-0.33	0.04	-1.00	0.33	66

Table 14.52d

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Emotional Reaction Domain
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.59	0.67	0.02	0.00	1.00	162	0.63	0.67	0.03	0.11	1.00	81
Week 4	-0.19	-0.11	0.02	-0.89	0.56	160	-0.19	-0.11	0.03	-0.89	0.56	79
Week 8	-0.27	-0.22	0.03	-1.00	0.78	162	-0.31	-0.33	0.04	-1.00	0.44	81
Week 12	-0.29	-0.28	0.03	-1.00	0.54	162	-0.33	-0.22	0.04	-1.00	0.33	81

Table 14.53b

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Pain Domain
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.14	0.00	0.02	0.00	1.00	162	0.14	0.00	0.03	0.00	1.00	81
Week 4	-0.04	0.00	0.01	-0.75	0.63	160	-0.03	0.00	0.02	-0.63	0.50	79
Week 8	-0.04	0.00	0.02	-0.88	0.75	140	-0.07	0.00	0.02	-0.75	0.38	72
Week 12	-0.05	0.00	0.02	-0.88	0.63	125	-0.07	0.00	0.02	-0.63	0.25	66

Table 14.53d

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Pain Domain
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.14	0.00	0.02	0.00	1.00	162	0.14	0.00	0.03	0.00	1.00	81
Week 4	-0.04	0.00	0.01	-0.75	0.63	160	-0.03	0.00	0.02	-0.63	0.50	79
Week 8	-0.04	0.00	0.02	-0.88	0.75	162	-0.06	0.00	0.02	-0.75	0.38	81
Week 12	-0.06	0.00	0.02	-0.88	0.63	162	-0.06	0.00	0.02	-0.63	0.25	81

Table 14.54b

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Physical Mobility Domain
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.16	0.13	0.02	0.00	1.00	162	0.17	0.13	0.02	0.00	1.00	81
Week 4	-0.03	0.00	0.01	-0.75	0.88	160	-0.04	0.00	0.02	-0.50	0.63	79
Week 8	-0.07	0.00	0.02	-0.88	0.63	140	-0.09	0.00	0.02	-0.63	0.25	72
Week 12	-0.08	0.00	0.02	-0.88	0.25	125	-0.11	-0.13	0.02	-0.63	0.13	66

Table 14.54d

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Physical Mobility Domain
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.16	0.13	0.02	0.00	1.00	162	0.17	0.13	0.02	0.00	1.00	81
Week 4	-0.03	0.00	0.01	-0.75	0.88	160	-0.04	0.00	0.02	-0.50	0.63	79
Week 8	-0.06	0.00	0.01	-0.88	0.63	162	-0.08	0.00	0.02	-0.63	0.25	81
Week 12	-0.08	0.00	0.01	-0.88	0.50	162	-0.10	-0.13	0.02	-0.63	0.13	81

Table 14.55b

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Sleep Domain
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.40	0.40	0.02	0.00	1.00	162	0.42	0.40	0.03	0.00	1.00	81
Week 4	-0.12	0.00	0.02	-0.80	0.80	160	-0.14	0.00	0.03	-0.80	0.40	79
Week 8	-0.18	-0.20	0.03	-1.00	1.00	140	-0.20	-0.20	0.03	-0.80	0.40	72
Week 12	-0.19	-0.20	0.03	-1.00	0.80	125	-0.21	-0.20	0.04	-0.80	0.40	66

Table 14.55d

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Sleep Domain
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.40	0.40	0.02	0.00	1.00	162	0.42	0.40	0.03	0.00	1.00	81
Week 4	-0.12	0.00	0.02	-0.80	0.80	160	-0.14	0.00	0.03	-0.80	0.40	79
Week 8	-0.17	-0.20	0.03	-1.00	1.00	162	-0.18	-0.20	0.03	-0.80	0.40	81
Week 12	-0.18	-0.20	0.02	-1.00	0.80	162	-0.19	-0.20	0.04	-0.80	0.40	81

Table 14.56b

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Social Isolation Domain
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.50	0.40	0.03	0.00	1.00	162	0.58	0.60	0.04	0.00	1.00	81
Week 4	-0.13	0.00	0.03	-1.00	0.60	160	-0.15	0.00	0.03	-1.00	0.40	79
Week 8	-0.23	-0.20	0.03	-1.00	0.60	140	-0.26	-0.20	0.04	-1.00	0.40	72
Week 12	-0.26	-0.20	0.03	-1.00	0.60	125	-0.29	-0.20	0.04	-1.00	0.40	66

Table 14.56d

Nottingham Health Profile (NHP)
Baseline and Change from Baseline in Total Scores - Social Isolation Domain
Excluding Centre 007

Intention to Treat Population (LOCF)

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	0.50	0.40	0.03	0.00	1.00	162	0.58	0.60	0.04	0.00	1.00	81
Week 4	-0.13	0.00	0.03	-1.00	0.60	160	-0.15	0.00	0.03	-1.00	0.40	79
Week 8	-0.21	-0.20	0.03	-1.00	0.60	162	-0.23	-0.20	0.04	-1.00	0.40	81
Week 12	-0.23	-0.20	0.03	-1.00	0.60	162	-0.26	-0.20	0.04	-1.00	0.40	81

Table 14.60b

Euroqol Summary Scores
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	Number of Patients in Group
Baseline	49.8	50.0	1.8	0.0	95.0	130	49.3	50.0	2.5	9.0	90.0	68
Week 12	71.6	76.0	2.0	8.5	100.0	120	72.1	80.0	2.7	20.0	100.0	64

Table 14.61b

Euroqol Baseline and Change from Baseline in Scores
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minim-um	Maxim-um	Number of Patients in Group	Mean	Median	Std Err	Minim-um	Maxim-um	Number of Patients in Group
Baseline	49.8	50.0	1.8	0.0	95.0	130	49.3	50.0	2.5	9.0	90.0	68
Week 12	22.1	20.0	2.3	-55.0	75.0	120	24.0	20.0	2.9	-20.0	90.0	64

Table 14.70b

Socio-Economic Questionnaire - Living Arrangements at Baseline Assessment
Excluding Centre 007

Intention to Treat Population

		Paroxetine		Placebo	
		Number	Percent	Number	Percent
Baseline	Total no. of patients in group	177	100.0	91	100.0
	At home with parents	123	69.5	68	74.7
	At home with grandparents	3	1.7	2	2.2
	At home with sisters/brothers	18	10.2	9	9.9
	At home with other relatives	8	4.5	3	3.3
	In rented accomodation	1	0.6		
	In a hostel	12	6.8	3	3.3
	In residential care	12	6.8	6	6.6

Table 14.71b

Socio-Economic Questionnaire - Current Employment Status
Excluding Centre 007

Intention to Treat Population

		Paroxetine		Placebo	
		Number	Percent	Number	Percent
Baseline	Total no. of patients in group	177	100.0	91	100.0
	Attending school	151	85.3	72	79.1
	Attending college or further education	5	2.8	8	8.8
	Job training scheme	2	1.1	1	1.1
	Full time employed	2	1.1	1	1.1
	Part time employed	4	2.3	1	1.1
	Casual labour	2	1.1	1	1.1
	Unemployed	11	6.2	7	7.7
Week 4	Total no. of patients in group	169	100.0	82	100.0
	Attending school	141	83.4	65	79.3

(CONTINUED)

Table 14.71b

Socio-Economic Questionnaire - Current Employment Status
Excluding Centre 007

Intention to Treat Population

		Paroxetine		Placebo	
		Number	Percent	Number	Percent
Week 4	Attending college or further education	8	4.7	4	4.9
	Job training scheme	1	0.6	2	2.4
	Full time employed	2	1.2	1	1.2
	Part time employed	4	2.4	3	3.7
	Casual labour	1	0.6	1	1.2
	Unemployed	12	7.1	6	7.3
Week 8	Total no. of patients in group	142	100.0	73	100.0
	Attending school	116	81.7	57	78.1
	Attending college or further education	5	3.5	5	6.8
	Job training scheme				

(CONTINUED)

Table 14.71b

Socio-Economic Questionnaire - Current Employment Status
Excluding Centre 007

Intention to Treat Population

		Paroxetine		Placebo	
		Number	Percent	Number	Percent
Week 8	Full time employed	3	2.1	1	1.4
	Part time employed	3	2.1	3	4.1
	Casual labour	2	1.4	1	1.4
	Unemployed	13	9.2	6	8.2
Week 12	Total no. of patients in group	129	100.0	66	100.0
	Attending school	103	79.8	52	78.8
	Attending college or further education	6	4.7	5	7.6
	Job training scheme	1	0.8	1	1.5
	Full time employed	4	3.1		
	Part time employed	3	2.3	3	4.5
	Casual labour	2	1.6	1	1.5
	Unemployed	10	7.8	4	6.1

(CONTINUED)

Table 14.71b

Socio-Economic Questionnaire - Current Employment Status
Excluding Centre 007

Intention to Treat Population

		Paroxetine		Placebo	
		Number	Percent	Number	Percent
>Week 12	Total no. of patients in group	7	100.0	4	100.0
	Attending school	7	100.0	1	25.0
	Attending college or further education				
	Job training scheme			1	25.0
	Full time employed			1	25.0
	Part time employed			1	25.0
	Casual labour				
	Unemployed				

Table 14.72b

Socio-Economic Questionnaire - Patients with Problems with Employment Status
Excluding Centre 007

Intention to Treat Population

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	175	89	50.9	91	50	54.9
Week 4	167	65	38.9	81	27	33.3
Week 8	142	32	22.5	72	16	22.2
Week 12	126	25	19.8	66	14	21.2

Table 14.73b

Socio-Economic Questionnaire - Summary of Patients Missing Days from School/College/Work
Excluding Centre 007

Intention to Treat Population

School

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	175	54	30.9	91	26	28.6
Week 4	161	38	23.6	79	17	21.5
Week 8	137	25	18.2	72	12	16.7
Week 12	122	24	19.7	66	9	13.6

Table 14.73b

Socio-Economic Questionnaire - Summary of Patients Missing Days from School/College/Work
Excluding Centre 007

Intention to Treat Population

College or further education

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	175	4	2.3	91	6	6.6
Week 4	161			79	2	2.5
Week 8	137			72		
Week 12	122			66	2	3.0

Table 14.73b

Socio-Economic Questionnaire - Summary of Patients Missing Days from School/College/Work
Excluding Centre 007

Intention to Treat Population

Work

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	175	4	2.3	91	2	2.2
Week 4	161	2	1.2	79		
Week 8	137	3	2.2	72		
Week 12	122	1	0.8	66		

Table 14.74b

Socio-Economic Questionnaire - Summary of Days Missed from School/College/Work
Excluding Centre 007

Intention to Treat Population

	Paroxetine					
	Mean	Median	Std Err	Minimum	Maximum	Number of patients
Baseline	3.2	0.0	0.6	0.0	60.0	181
Week 4	1.5	0.0	0.4	0.0	60.0	172
Week 8	3.0	0.0	1.0	0.0	90.0	144
Week 12	3.8	0.0	1.3	0.0	90.0	130
>Week 12	3.4	0.0	3.4	0.0	24.0	7

Table 14.74b

Socio-Economic Questionnaire - Summary of Days Missed from School/College/Work
Excluding Centre 007

Intention to Treat Population

	Placebo					
	Mean	Median	Std Err	Minimum	Maximum	Number of patients
Baseline	2.0	0.0	0.4	0.0	20.0	93
Week 4	1.5	0.0	0.6	0.0	35.0	83
Week 8	1.0	0.0	0.5	0.0	30.0	75
Week 12	2.0	0.0	1.1	0.0	70.0	69
>Week 12	28.5	4.0	25.9	0.0	106.0	4

Table 14.75b

Socio-Economic Questionnaire
Patients with Problems with Specified Activities
Excluding Centre 007

Intention to Treat Population

Home activities

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	176	166	94.3	91	87	95.6
Week 4	166	155	93.4	81	74	91.4
Week 8	140	126	90.0	72	66	91.7
Week 12	123	113	91.9	66	60	90.9

Table 14.75b

Socio-Economic Questionnaire
Patients with Problems with Specified Activities
Excluding Centre 007

Intention to Treat Population

Social life

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	176	166	94.3	91	87	95.6
Week 4	166	155	93.4	81	78	96.3
Week 8	140	129	92.1	72	67	93.1
Week 12	123	115	93.5	66	61	92.4

Table 14.75b

Socio-Economic Questionnaire
Patients with Problems with Specified Activities
Excluding Centre 007

Intention to Treat Population

Home life

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	176	165	93.8	91	88	96.7
Week 4	166	154	92.8	81	77	95.1
Week 8	140	127	90.7	72	69	95.8
Week 12	123	112	91.1	66	61	92.4

Table 14.75b

Socio-Economic Questionnaire
Patients with Problems with Specified Activities
Excluding Centre 007

Intention to Treat Population

Personal relationships

	Paroxetine			Placebo		
	Number in group	Number with problem	Percent with problem	Number in group	Number with problem	Percent with problem
Baseline	176	163	92.6	91	84	92.3
Week 4	166	153	92.2	81	75	92.6
Week 8	140	125	89.3	72	66	91.7
Week 12	123	112	91.1	66	61	92.4

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Home activities

	Paroxetine							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	166	93.8	31	18.7	122	73.5	13	7.8
Week 4	155	92.8	11	7.1	76	49.0	68	43.9
Week 8	126	88.7	8	6.3	56	44.4	62	49.2
Week 12	113	89.7	9	8.0	41	36.3	63	55.8

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Home activities

	Placebo							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	87	95.6	15	17.2	66	75.9	6	6.9
Week 4	74	91.4	7	9.5	40	54.1	27	36.5
Week 8	66	91.7	4	6.1	30	45.5	32	48.5
Week 12	60	90.9	3	5.0	30	50.0	27	45.0

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Social life

	Paroxetine							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	166	93.8	44	26.5	105	63.3	17	10.2
Week 4	155	92.8	12	7.7	65	41.9	78	50.3
Week 8	129	90.8	7	5.4	41	31.8	81	62.8
Week 12	115	91.3	9	7.8	35	30.4	71	61.7

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Social life

	Placebo							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	87	95.6	19	21.8	61	70.1	7	8.0
Week 4	78	96.3	5	6.4	36	46.2	37	47.4
Week 8	67	93.1	4	6.0	26	38.8	37	55.2
Week 12	61	92.4	3	4.9	24	39.3	34	55.7

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Home life

	Paroxetine							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	165	93.2	41	24.8	113	68.5	11	6.7
Week 4	154	92.2	19	12.3	69	44.8	66	42.9
Week 8	127	89.4	16	12.6	52	40.9	59	46.5
Week 12	112	88.9	13	11.6	38	33.9	61	54.5

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Home life

	Placebo							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	88	96.7	20	22.7	59	67.0	9	10.2
Week 4	77	95.1	8	10.4	39	50.6	30	39.0
Week 8	69	95.8	7	10.1	32	46.4	30	43.5
Week 12	61	92.4	4	6.6	24	39.3	33	54.1

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Personal relationships

	Paroxetine							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	163	92.1	33	20.2	118	72.4	12	7.4
Week 4	153	91.6	17	11.1	65	42.5	71	46.4
Week 8	125	88.0	6	4.8	54	43.2	65	52.0
Week 12	112	88.9	8	7.1	34	30.4	70	62.5

Table 14.76b

Socio-Economic Questionnaire
Change in Problems with Specified Activites
Excluding Centre 007

Intention to Treat Population

Personal relationships

	Placebo							
	Total No. Experiencing Problem		Worse		Same		Better	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Baseline	84	92.3	21	25.0	57	67.9	6	7.1
Week 4	75	92.6	5	6.7	38	50.7	32	42.7
Week 8	66	91.7	8	12.1	23	34.8	35	53.0
Week 12	61	92.4	1	1.6	29	47.5	31	50.8

Table 14.81b

Summary of Psychotherapy Evaluation Professional Involvement
Excluding Centre 007

Intention to Treat Population

Treatment Group: Paroxetine

	Social worker			Occupational therapist			Psychologist			Other		
	Number of Patients in Group	N	Percent	Number of Patients in Group	N	Percent	Number of Patients in Group	N	Percent	Number of Patients in Group	N	Percent
Screening	178	19	10.7				178	14	7.9			
Baseline	178	6	3.4				178	8	4.5			
Week 1	176	3	1.7	176	2	1.1	176	9	5.1			
Week 2	168	5	3.0	168	2	1.2	168	7	4.2			
Week 3	157	4	2.5	157	2	1.3	157	7	4.5			
Week 4	159	2	1.3	159	2	1.3	159	8	5.0			
Week 6	150	1	0.7	150	2	1.3	150	7	4.7	150	1	0.7
Week 8	145	4	2.8	145	1	0.7	145	9	6.2			
Week 12	131	2	1.5	131	2	1.5	131	9	6.9			

Table 14.81b

Summary of Psychotherapy Evaluation Professional Involvement
Excluding Centre 007

Intention to Treat Population

Treatment Group: Placebo

	Social worker			Psychologist		
	Number of Patients in Group	N	Percent	Number of Patients in Group	N	Percent
Screening	91	7	7.7	91	12	13.2
Baseline	90	2	2.2	90	6	6.7
Week 1	91	1	1.1	91	5	5.5
Week 2				86	6	7.0
Week 3	85	1	1.2	85	6	7.1
Week 4				81	5	6.2
Week 6	81	1	1.2	81	7	8.6
Week 8	74	1	1.4	74	5	6.8
Week 12	68	1	1.5	68	5	7.4

Table 14.82b

Summary of Psychotherapy Evaluation Therapy Received
Excluding Centre 007

Intention to Treat Population

Treatment Group: Paroxetine

	Family Therapy			Supportive Psychotherapy			Formal Psychotherapy		
	Number of Patients in Group	N	Percent	Number of Patients in Group	N	Percent	Number of Patients in Group	N	Percent
Screening	178	2	1.1	178	21	11.8	178	1	0.6
Baseline				178	14	7.9			
Week 1				176	15	8.5			
Week 2				168	13	7.7			
Week 3				157	13	8.3			
Week 4				159	16	10.1			
Week 6				150	14	9.3			
Week 8	145	2	1.4	145	13	9.0			
Week 12	131	2	1.5	131	17	13.0			
>Week 14	7	1	14.3	7	1	14.3			

Table 14.82b

Summary of Psychotherapy Evaluation Therapy Received
Excluding Centre 007

Intention to Treat Population

Treatment Group: Placebo

	Family Therapy			Supportive Psychotherapy		
	Number of Patients in Group	N	Percent	Number of Patients in Group	N	Percent
Screening				91	8	8.8
Baseline	90	1	1.1	90	8	8.9
Week 1				91	7	7.7
Week 2				86	6	7.0
Week 3				85	7	8.2
Week 4				81	7	8.6
Week 6				81	10	12.3
Week 8				74	8	10.8
Week 12	68	1	1.5	68	8	11.8

Table 14.90b

Child-Global Assessment Scale
Screening and Change from Screening in Total Scores
Excluding Centre 007

Intention to Treat Population

	Paroxetine						Placebo					
	Mean	Median	Std Err	Minimum	Maximum	No of Patients in Group	Mean	Median	Std Err	Minimum	Maximum	No of Patients in Group
Screening	51.1	51.0	0.6	25	68	178	50.6	51.0	0.9	23	65	91
Week 12	24.5	23.0	1.2	-11	55	127	22.9	22.5	1.7	-3	55	66

12 Source Tables: Safety Results

TABLE 15.011B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING ACTIVE TREATMENT PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	119	65.4%	55	59.1%	174	63.3%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	61	33.5	34	36.6	95	34.5
ABDOMINAL PAIN	6	3.3	9	9.7	15	5.5
ABSCESS	2	1.1	1	1.1	3	1.1
ACCIDENTAL OVERDOSE	1	0.5	0	0.0	1	0.4
ALLERGIC REACTION	1	0.5	0	0.0	1	0.4
ASTHENIA	12	6.6	9	9.7	21	7.6
BACK PAIN	3	1.6	1	1.1	4	1.5
CHEST PAIN	5	2.7	0	0.0	5	1.8
FEVER	1	0.5	0	0.0	1	0.4
FLU SYNDROME	1	0.5	1	1.1	2	0.7
HEADACHE	34	18.7	21	22.6	55	20.0
INFECTION	14	7.7	6	6.5	20	7.3
MALAISE	0	0.0	1	1.1	1	0.4
NEOPLASM	0	0.0	1	1.1	1	0.4
PAIN	1	0.5	2	2.2	3	1.1
TRAUMA	5	2.7	0	0.0	5	1.8
Cardiovascular System	12	6.6	1	1.1	13	4.7
HYPERTENSION	2	1.1	0	0.0	2	0.7
HYPOTENSION	3	1.6	0	0.0	3	1.1
PALPITATION	2	1.1	0	0.0	2	0.7
POSTURAL HYPOTENSION	3	1.6	1	1.1	4	1.5
SYNCOPE	1	0.5	0	0.0	1	0.4
VASODILATATION	1	0.5	0	0.0	1	0.4
Digestive System	64	35.2	21	22.6	85	30.9
BILIARY PAIN	0	0.0	1	1.1	1	0.4
CONSTIPATION	3	1.6	1	1.1	4	1.5
DECREASED APPETITE	14	7.7	3	3.2	17	6.2
DIARRHEA	4	2.2	3	3.2	7	2.5
DRY MOUTH	4	2.2	0	0.0	4	1.5
DYSPEPSIA	1	0.5	0	0.0	1	0.4
GASTROENTERITIS	2	1.1	1	1.1	3	1.1
GINGIVITIS	2	1.1	0	0.0	2	0.7
INCREASED APPETITE	2	1.1	0	0.0	2	0.7
NAUSEA	44	24.2	14	15.1	58	21.1
TOOTH DISORDER	1	0.5	0	0.0	1	0.4

TABLE 15.011B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING ACTIVE TREATMENT PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	119	65.4%	55	59.1%	174	63.3%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
VOMITING	7	3.8	3	3.2	10	3.6
Hemic and Lymphatic System	3	1.6	2	2.2	5	1.8
ANEMIA	1	0.5	0	0.0	1	0.4
EOSINOPHILIA	1	0.5	1	1.1	2	0.7
LEUKOCYTOSIS	0	0.0	1	1.1	1	0.4
THROMBOCYTOPENIA	1	0.5	0	0.0	1	0.4
Metabolic and Nutritional Disorders	3	1.6	0	0.0	3	1.1
HYPOGLYCEMIC REACTION	1	0.5	0	0.0	1	0.4
WEIGHT GAIN	1	0.5	0	0.0	1	0.4
WEIGHT LOSS	1	0.5	0	0.0	1	0.4
Musculoskeletal System	2	1.1	3	3.2	5	1.8
ARTHRALGIA	1	0.5	2	2.2	3	1.1
MYALGIA	0	0.0	1	1.1	1	0.4
TENDINOUS DISORDER	1	0.5	0	0.0	1	0.4
Nervous System	64	35.2	22	23.7	86	31.3
ABNORMAL DREAMS	2	1.1	1	1.1	3	1.1
AGITATION	4	2.2	0	0.0	4	1.5
ANXIETY	3	1.6	0	0.0	3	1.1
CONFUSION	1	0.5	0	0.0	1	0.4
CONVULSION	1	0.5	0	0.0	1	0.4
DEPERSONALIZATION	2	1.1	0	0.0	2	0.7
DEPRESSION	2	1.1	0	0.0	2	0.7
DIZZINESS	19	10.4	7	7.5	26	9.5
EMOTIONAL LABILITY	8	4.4	3	3.2	11	4.0
HOSTILITY	1	0.5	0	0.0	1	0.4
HYPESTHESIA	1	0.5	0	0.0	1	0.4
HYPOKINESIA	1	0.5	0	0.0	1	0.4
HYSTERIA	1	0.5	0	0.0	1	0.4
INSOMNIA	9	4.9	3	3.2	12	4.4
MYOCLONUS	4	2.2	1	1.1	5	1.8
NERVOUSNESS	2	1.1	3	3.2	5	1.8
NEUROSIS	1	0.5	0	0.0	1	0.4
PARESTHESIA	0	0.0	1	1.1	1	0.4

TABLE 15.011B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING ACTIVE TREATMENT PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	119	65.4%	55	59.1%	174	63.3%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
SOMNOLENCE	17	9.3	6	6.5	23	8.4
TREMOR	6	3.3	1	1.1	7	2.5
Respiratory System	22	12.1	13	14.0	35	12.7
BRONCHITIS	1	0.5	3	3.2	4	1.5
COUGH INCREASED	5	2.7	1	1.1	6	2.2
DYSPNEA	3	1.6	0	0.0	3	1.1
EPISTAXIS	1	0.5	0	0.0	1	0.4
PHARYNGITIS	2	1.1	5	5.4	7	2.5
RESPIRATORY DISORDER	5	2.7	3	3.2	8	2.9
RHINITIS	3	1.6	3	3.2	6	2.2
SINUSITIS	4	2.2	1	1.1	5	1.8
YAWN	1	0.5	0	0.0	1	0.4
Skin and Appendages	12	6.6	2	2.2	14	5.1
ACNE	2	1.1	0	0.0	2	0.7
ALOPECIA	1	0.5	0	0.0	1	0.4
HERPES ZOSTER	1	0.5	0	0.0	1	0.4
PHOTOSENSITIVITY	1	0.5	0	0.0	1	0.4
RASH	2	1.1	1	1.1	3	1.1
SWEATING	4	2.2	1	1.1	5	1.8
SWEATING DECREASED	1	0.5	0	0.0	1	0.4
Special Senses	6	3.3	1	1.1	7	2.5
ABNORMAL VISION	3	1.6	1	1.1	4	1.5
MYDRIASIS	1	0.5	0	0.0	1	0.4
OTITIS MEDIA	2	1.1	0	0.0	2	0.7
Urogenital System	5	2.7	3	3.2	8	2.9
CYSTITIS	1	0.5	3	3.2	4	1.5
PYURIA	1	0.5	0	0.0	1	0.4
URINARY TRACT INFECTION	3	1.6	0	0.0	3	1.1

PAROXETINE - PROTOCOL: 377

TABLE 15.012B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING ACTIVE TREATMENT PHASE
MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	60	100.0%	32	100.0%	92	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	1	1.7%	0	0.0%	1	1.1%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Urogenital System	1	1.7	0	0.0	1	1.1
ABNORMAL EJACULATION	1	1.7	0	0.0	1	1.1
IMPOTENCE	1	1.7	0	0.0	1	1.1

PAROXETINE - PROTOCOL: 377

TABLE 15.013B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING ACTIVE TREATMENT PHASE
FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	122	100.0%	61	100.0%	183	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	2	1.6%	0	0.0%	2	1.1%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%
Urogenital System		2	1.6	0	0.0	2	1.1
DYSMENORRHEA		1	0.8	0	0.0	1	0.5
MENSTRUAL DISORDER		1	0.8	0	0.0	1	0.5

Paroxetine - Protocol: 377

TABLE 15.01B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING ACTIVE TREATMENT PHASE
DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	120	65.9%	55	59.1%	175	63.6%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	61	33.5	34	36.6	95	34.5
Cardiovascular System	12	6.6	1	1.1	13	4.7
Digestive System	64	35.2	21	22.6	85	30.9
Hemic and Lymphatic System	3	1.6	2	2.2	5	1.8
Metabolic and Nutritional Disorders	3	1.6	0	0.0	3	1.1
Musculoskeletal System	2	1.1	3	3.2	5	1.8
Nervous System	64	35.2	22	23.7	86	31.3
Respiratory System	22	12.1	13	14.0	35	12.7
Skin and Appendages	12	6.6	2	2.2	14	5.1
Special Senses	6	3.3	1	1.1	7	2.5
Urogenital System	8	4.4	3	3.2	11	4.0

Paroxetine - Protocol: 377

TABLE 15.041B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SEVERE DURING ACTIVE TREATMENT PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	20	11.0%	6	6.5%	26	9.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	5	2.7	3	3.2	8	2.9
ASTHENIA	0	0.0	2	2.2	2	0.7
HEADACHE	3	1.6	0	0.0	3	1.1
INFECTION	1	0.5	0	0.0	1	0.4
PAIN	0	0.0	1	1.1	1	0.4
TRAUMA	1	0.5	0	0.0	1	0.4
Digestive System	4	2.2	0	0.0	4	1.5
DECREASED APPETITE	1	0.5	0	0.0	1	0.4
GINGIVITIS	1	0.5	0	0.0	1	0.4
NAUSEA	3	1.6	0	0.0	3	1.1
VOMITING	1	0.5	0	0.0	1	0.4
Nervous System	10	5.5	3	3.2	13	4.7
AGITATION	2	1.1	0	0.0	2	0.7
ANXIETY	1	0.5	0	0.0	1	0.4
DEPRESSION	1	0.5	0	0.0	1	0.4
EMOTIONAL LABILITY	2	1.1	2	2.2	4	1.5
HOSTILITY	1	0.5	0	0.0	1	0.4
HYSTERIA	1	0.5	0	0.0	1	0.4
INSOMNIA	2	1.1	0	0.0	2	0.7
NERVOUSNESS	1	0.5	1	1.1	2	0.7
SOMNOLENCE	2	1.1	0	0.0	2	0.7
Respiratory System	1	0.5	0	0.0	1	0.4
SINUSITIS	1	0.5	0	0.0	1	0.4
Skin and Appendages	1	0.5	0	0.0	1	0.4
ACNE	1	0.5	0	0.0	1	0.4

PAROXETINE - PROTOCOL: 377

TABLE 15.042B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SEVERE DURING ACTIVE TREATMENT PHASE
MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

PAROXETINE - PROTOCOL: 377

TABLE 15.043B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SEVERE DURING ACTIVE TREATMENT PHASE
FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

Paroxetine - Protocol: 377

TABLE 15.04B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SEVERE DURING ACTIVE TREATMENT PHASE
DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	20	11.0%	6	6.5%	26	9.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	5	2.7	3	3.2	8	2.9
Digestive System	4	2.2	0	0.0	4	1.5
Nervous System	10	5.5	3	3.2	13	4.7
Respiratory System	1	0.5	0	0.0	1	0.4
Skin and Appendages	1	0.5	0	0.0	1	0.4

TABLE 15.051B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CONSIDERED TO BE RELATED TO THE STUDY MEDICATION DURING ACTIVE TREATMENT PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	31	17.0%	4	4.3%	35	12.7%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	7	3.8	2	2.2	9	3.3
ASTHENIA	3	1.6	1	1.1	4	1.5
HEADACHE	4	2.2	0	0.0	4	1.5
INFECTION	0	0.0	1	1.1	1	0.4
Cardiovascular System	1	0.5	0	0.0	1	0.4
HYPERTENSION	1	0.5	0	0.0	1	0.4
Digestive System	20	11.0	1	1.1	21	7.6
DECREASED APPETITE	4	2.2	1	1.1	5	1.8
DRY MOUTH	2	1.1	0	0.0	2	0.7
DYSPEPSIA	1	0.5	0	0.0	1	0.4
NAUSEA	16	8.8	1	1.1	17	6.2
VOMITING	3	1.6	0	0.0	3	1.1
Metabolic and Nutritional Disorders	1	0.5	0	0.0	1	0.4
WEIGHT LOSS	1	0.5	0	0.0	1	0.4
Nervous System	14	7.7	2	2.2	16	5.8
AGITATION	3	1.6	0	0.0	3	1.1
ANXIETY	1	0.5	0	0.0	1	0.4
DIZZINESS	3	1.6	0	0.0	3	1.1
EMOTIONAL LABILITY	1	0.5	0	0.0	1	0.4
INSOMNIA	4	2.2	0	0.0	4	1.5
SOMNOLENCE	6	3.3	2	2.2	8	2.9
TREMOR	1	0.5	0	0.0	1	0.4

PAROXETINE - PROTOCOL: 377

TABLE 15.052B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CONSIDERED TO BE RELATED TO THE STUDY MEDICATION DURING ACTIVE TREATMENT PHASE
MALE SPECIFIC ADVERSE EXPERIENCES ONLY

NO DATA AVAILABLE FOR THIS REPORT

PAROXETINE - PROTOCOL: 377

TABLE 15.053B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CONSIDERED TO BE RELATED TO THE STUDY MEDICATION DURING ACTIVE TREATMENT PHASE
FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY

NO DATA AVAILABLE FOR THIS REPORT

Paroxetine - Protocol: 377

TABLE 15.05B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES CONSIDERED TO BE RELATED TO THE STUDY MEDICATION DURING ACTIVE TREATMENT PHASE DISPLAYED BY BODY SYSTEM

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	31	17.0%	4	4.3%	35	12.7%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	7	3.8	2	2.2	9	3.3
Cardiovascular System	1	0.5	0	0.0	1	0.4
Digestive System	20	11.0	1	1.1	21	7.6
Metabolic and Nutritional Disorders	1	0.5	0	0.0	1	0.4
Nervous System	14	7.7	2	2.2	16	5.8

TABLE 15.061B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES LEADING TO WITHDRAWAL DURING ACTIVE TREATMENT PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	19	10.4%	7	7.5%	26	9.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	2	1.1	2	2.2	4	1.5
ABSCESS	0	0.0	1	1.1	1	0.4
ASTHENIA	0	0.0	1	1.1	1	0.4
HEADACHE	2	1.1	0	0.0	2	0.7
Cardiovascular System	2	1.1	0	0.0	2	0.7
PALPITATION	1	0.5	0	0.0	1	0.4
POSTURAL HYPOTENSION	1	0.5	0	0.0	1	0.4
Digestive System	8	4.4	1	1.1	9	3.3
DECREASED APPETITE	1	0.5	0	0.0	1	0.4
DIARRHEA	1	0.5	0	0.0	1	0.4
DRY MOUTH	1	0.5	0	0.0	1	0.4
DYSPEPSIA	1	0.5	0	0.0	1	0.4
NAUSEA	6	3.3	1	1.1	7	2.5
VOMITING	2	1.1	0	0.0	2	0.7
Nervous System	15	8.2	5	5.4	20	7.3
AGITATION	3	1.6	0	0.0	3	1.1
ANXIETY	2	1.1	0	0.0	2	0.7
CONVULSION	1	0.5	0	0.0	1	0.4
DEPRESSION	1	0.5	0	0.0	1	0.4
DIZZINESS	1	0.5	0	0.0	1	0.4
EMOTIONAL LABILITY	5	2.7	3	3.2	8	2.9
HYSTERIA	1	0.5	0	0.0	1	0.4
INSOMNIA	1	0.5	0	0.0	1	0.4
MYOCLONUS	1	0.5	0	0.0	1	0.4
NERVOUSNESS	1	0.5	1	1.1	2	0.7
SOMNOLENCE	4	2.2	1	1.1	5	1.8
TREMOR	1	0.5	0	0.0	1	0.4
Respiratory System	1	0.5	0	0.0	1	0.4
DYSPNEA	1	0.5	0	0.0	1	0.4
Special Senses	1	0.5	0	0.0	1	0.4
ABNORMAL VISION	1	0.5	0	0.0	1	0.4

PAROXETINE - PROTOCOL: 377

TABLE 15.062B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES LEADING TO WITHDRAWAL DURING ACTIVE TREATMENT PHASE
MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

PAROXETINE - PROTOCOL: 377

TABLE 15.063B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES LEADING TO WITHDRAWAL DURING ACTIVE TREATMENT PHASE
FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

Paroxetine - Protocol: 377

TABLE 15.06B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES LEADING TO WITHDRAWAL DURING ACTIVE TREATMENT PHASE
DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	19	10.4%	7	7.5%	26	9.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	2	1.1	2	2.2	4	1.5
Cardiovascular System	2	1.1	0	0.0	2	0.7
Digestive System	8	4.4	1	1.1	9	3.3
Nervous System	15	8.2	5	5.4	20	7.3
Respiratory System	1	0.5	0	0.0	1	0.4
Special Senses	1	0.5	0	0.0	1	0.4

TABLE 15.071B

NUMBER (%) OF PATIENTS WITH ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SERIOUS DURING ACTIVE TREATMENT PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	15	8.2%	4	4.3%	19	6.9%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	2	1.1	0	0.0	2	0.7
ACCIDENTAL OVERDOSE	1	0.5	0	0.0	1	0.4
INFECTION	1	0.5	0	0.0	1	0.4
Cardiovascular System	1	0.5	0	0.0	1	0.4
POSTURAL HYPOTENSION	1	0.5	0	0.0	1	0.4
Digestive System	2	1.1	0	0.0	2	0.7
DECREASED APPETITE	1	0.5	0	0.0	1	0.4
DRY MOUTH	1	0.5	0	0.0	1	0.4
NAUSEA	2	1.1	0	0.0	2	0.7
VOMITING	1	0.5	0	0.0	1	0.4
Nervous System	14	7.7	4	4.3	18	6.5
AGITATION	3	1.6	0	0.0	3	1.1
ANXIETY	1	0.5	0	0.0	1	0.4
CONVULSION	1	0.5	0	0.0	1	0.4
DEPRESSION	2	1.1	0	0.0	2	0.7
DIZZINESS	1	0.5	0	0.0	1	0.4
EMOTIONAL LABILITY	6	3.3	3	3.2	9	3.3
HYSTERIA	1	0.5	0	0.0	1	0.4
INSOMNIA	1	0.5	0	0.0	1	0.4
MYOCLONUS	1	0.5	0	0.0	1	0.4
NERVOUSNESS	1	0.5	1	1.1	2	0.7
NEUROSIS	1	0.5	0	0.0	1	0.4
TREMOR	1	0.5	0	0.0	1	0.4
Special Senses	1	0.5	0	0.0	1	0.4
ABNORMAL VISION	1	0.5	0	0.0	1	0.4

PAROXETINE - PROTOCOL: 377

TABLE 15.072B

NUMBER (%) OF PATIENTS WITH ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SERIOUS DURING ACTIVE TREATMENT PHASE
MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

PAROXETINE - PROTOCOL: 377

TABLE 15.073B

NUMBER (%) OF PATIENTS WITH ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SERIOUS DURING ACTIVE TREATMENT PHASE
FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

Paroxetine - Protocol: 377

TABLE 15.07B

NUMBER (%) OF PATIENTS WITH ADVERSE EXPERIENCES CLASSED BY INVESTIGATOR AS SERIOUS DURING ACTIVE TREATMENT PHASE
DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	15	8.2%	4	4.3%	19	6.9%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	2	1.1	0	0.0	2	0.7
Cardiovascular System	1	0.5	0	0.0	1	0.4
Digestive System	2	1.1	0	0.0	2	0.7
Nervous System	14	7.7	4	4.3	18	6.5
Special Senses	1	0.5	0	0.0	1	0.4

TABLE 15.081B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	90	49.5%	35	37.6%	125	45.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	33	18.1	20	21.5	53	19.3
ABDOMINAL PAIN	1	0.5	2	2.2	3	1.1
ASTHENIA	9	4.9	4	4.3	13	4.7
BACK PAIN	1	0.5	1	1.1	2	0.7
CHEST PAIN	4	2.2	0	0.0	4	1.5
FEVER	1	0.5	0	0.0	1	0.4
HEADACHE	15	8.2	13	14.0	28	10.2
INFECTION	3	1.6	3	3.2	6	2.2
NEOPLASM	0	0.0	1	1.1	1	0.4
TRAUMA	3	1.6	0	0.0	3	1.1
Cardiovascular System	6	3.3	0	0.0	6	2.2
HYPOTENSION	2	1.1	0	0.0	2	0.7
PALPITATION	1	0.5	0	0.0	1	0.4
POSTURAL HYPOTENSION	2	1.1	0	0.0	2	0.7
VASODILATATION	1	0.5	0	0.0	1	0.4
Digestive System	45	24.7	12	12.9	57	20.7
BILIARY PAIN	0	0.0	1	1.1	1	0.4
CONSTIPATION	2	1.1	0	0.0	2	0.7
DECREASED APPETITE	11	6.0	3	3.2	14	5.1
DIARRHEA	3	1.6	1	1.1	4	1.5
DRY MOUTH	3	1.6	0	0.0	3	1.1
DYSPEPSIA	1	0.5	0	0.0	1	0.4
NAUSEA	32	17.6	8	8.6	40	14.5
TOOTH DISORDER	1	0.5	0	0.0	1	0.4
VOMITING	3	1.6	0	0.0	3	1.1
Metabolic and Nutritional Disorders	1	0.5	0	0.0	1	0.4
WEIGHT LOSS	1	0.5	0	0.0	1	0.4
Musculoskeletal System	2	1.1	0	0.0	2	0.7
ARTHRALGIA	1	0.5	0	0.0	1	0.4
TENDINOUS DISORDER	1	0.5	0	0.0	1	0.4
Nervous System	48	26.4	9	9.7	57	20.7
ABNORMAL DREAMS	0	0.0	1	1.1	1	0.4

TABLE 15.081B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	90	49.5%	35	37.6%	125	45.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
AGITATION	4	2.2	0	0.0	4	1.5
ANXIETY	3	1.6	0	0.0	3	1.1
DEPERSONALIZATION	1	0.5	0	0.0	1	0.4
DEPRESSION	1	0.5	0	0.0	1	0.4
DIZZINESS	11	6.0	3	3.2	14	5.1
EMOTIONAL LABILITY	1	0.5	0	0.0	1	0.4
HOSTILITY	1	0.5	0	0.0	1	0.4
HYPESTHESIA	1	0.5	0	0.0	1	0.4
HYPOKINESIA	1	0.5	0	0.0	1	0.4
HYSTERIA	1	0.5	0	0.0	1	0.4
INSOMNIA	9	4.9	3	3.2	12	4.4
MYOCLONUS	3	1.6	0	0.0	3	1.1
NERVOUSNESS	1	0.5	2	2.2	3	1.1
SOMNOLENCE	16	8.8	2	2.2	18	6.5
TREMOR	6	3.3	0	0.0	6	2.2
Respiratory System	9	4.9	4	4.3	13	4.7
COUGH INCREASED	1	0.5	0	0.0	1	0.4
DYSPNEA	3	1.6	0	0.0	3	1.1
PHARYNGITIS	0	0.0	1	1.1	1	0.4
RESPIRATORY DISORDER	2	1.1	1	1.1	3	1.1
RHINITIS	1	0.5	2	2.2	3	1.1
SINUSITIS	2	1.1	0	0.0	2	0.7
YAWN	1	0.5	0	0.0	1	0.4
Skin and Appendages	4	2.2	1	1.1	5	1.8
HERPES ZOSTER	1	0.5	0	0.0	1	0.4
RASH	2	1.1	0	0.0	2	0.7
SWEATING	1	0.5	1	1.1	2	0.7
Special Senses	4	2.2	1	1.1	5	1.8
ABNORMAL VISION	2	1.1	1	1.1	3	1.1
MYDRIASIS	1	0.5	0	0.0	1	0.4
OTITIS MEDIA	1	0.5	0	0.0	1	0.4
Urogenital System	1	0.5	1	1.1	2	0.7
CYSTITIS	0	0.0	1	1.1	1	0.4

TABLE 15.081B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	90	49.5%	35	37.6%	125	45.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
URINARY TRACT INFECTION	1	0.5	0	0.0	1	0.4

PAROXETINE - PROTOCOL: 377

TABLE 15.082B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

PAROXETINE - PROTOCOL: 377

TABLE 15.083B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

Paroxetine - Protocol: 377

TABLE 15.08B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	182	100.0%	93	100.0%	275	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	90	49.5%	35	37.6%	125	45.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	33	18.1	20	21.5	53	19.3
Cardiovascular System	6	3.3	0	0.0	6	2.2
Digestive System	45	24.7	12	12.9	57	20.7
Metabolic and Nutritional Disorders	1	0.5	0	0.0	1	0.4
Musculoskeletal System	2	1.1	0	0.0	2	0.7
Nervous System	48	26.4	9	9.7	57	20.7
Respiratory System	9	4.9	4	4.3	13	4.7
Skin and Appendages	4	2.2	1	1.1	5	1.8
Special Senses	4	2.2	1	1.1	5	1.8
Urogenital System	1	0.5	1	1.1	2	0.7

Paroxetine - Protocol: 377

TABLE 15.091B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	47	100.0%	23	100.0%	70	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	25	53.2%	8	34.8%	33	47.1%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	6	12.8	4	17.4	10	14.3
CHEST PAIN	1	2.1	0	0.0	1	1.4
HEADACHE	4	8.5	1	4.3	5	7.1
INFECTION	1	2.1	3	13.0	4	5.7
TRAUMA	1	2.1	0	0.0	1	1.4
Cardiovascular System	1	2.1	0	0.0	1	1.4
HYPOTENSION	1	2.1	0	0.0	1	1.4
Digestive System	14	29.8	3	13.0	17	24.3
DECREASED APPETITE	2	4.3	0	0.0	2	2.9
DIARRHEA	1	2.1	0	0.0	1	1.4
DYSPEPSIA	1	2.1	0	0.0	1	1.4
NAUSEA	12	25.5	3	13.0	15	21.4
VOMITING	1	2.1	0	0.0	1	1.4
Musculoskeletal System	1	2.1	0	0.0	1	1.4
ARTHRALGIA	1	2.1	0	0.0	1	1.4
Nervous System	13	27.7	1	4.3	14	20.0
AGITATION	1	2.1	0	0.0	1	1.4
ANXIETY	1	2.1	0	0.0	1	1.4
DIZZINESS	2	4.3	0	0.0	2	2.9
HYSTERIA	1	2.1	0	0.0	1	1.4
INSOMNIA	1	2.1	1	4.3	2	2.9
NERVOUSNESS	1	2.1	0	0.0	1	1.4
SOMNOLENCE	7	14.9	0	0.0	7	10.0
TREMOR	1	2.1	0	0.0	1	1.4
Respiratory System	2	4.3	2	8.7	4	5.7
COUGH INCREASED	1	2.1	0	0.0	1	1.4
DYSPNEA	1	2.1	0	0.0	1	1.4
RESPIRATORY DISORDER	1	2.1	1	4.3	2	2.9
RHINITIS	0	0.0	1	4.3	1	1.4
Skin and Appendages	1	2.1	0	0.0	1	1.4
HERPES ZOSTER	1	2.1	0	0.0	1	1.4

TABLE 15.091B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	47	100.0%	23	100.0%	70	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	25	53.2%	8	34.8%	33	47.1%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%
Urogenital System		0	0.0	1	4.3	1	1.4
CYSTITIS		0	0.0	1	4.3	1	1.4

TABLE 15.091B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	111	100.0%	58	100.0%	169	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	53	47.7%	20	34.5%	73	43.2%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	23	20.7	14	24.1	37	21.9
ABDOMINAL PAIN	1	0.9	2	3.4	3	1.8
ASTHENIA	8	7.2	4	6.9	12	7.1
BACK PAIN	1	0.9	1	1.7	2	1.2
CHEST PAIN	3	2.7	0	0.0	3	1.8
HEADACHE	10	9.0	10	17.2	20	11.8
INFECTION	1	0.9	0	0.0	1	0.6
NEOPLASM	0	0.0	1	1.7	1	0.6
TRAUMA	2	1.8	0	0.0	2	1.2
Cardiovascular System	3	2.7	0	0.0	3	1.8
PALPITATION	1	0.9	0	0.0	1	0.6
POSTURAL HYPOTENSION	2	1.8	0	0.0	2	1.2
Digestive System	28	25.2	7	12.1	35	20.7
CONSTIPATION	2	1.8	0	0.0	2	1.2
DECREASED APPETITE	8	7.2	3	5.2	11	6.5
DIARRHEA	2	1.8	1	1.7	3	1.8
DRY MOUTH	3	2.7	0	0.0	3	1.8
NAUSEA	18	16.2	4	6.9	22	13.0
TOOTH DISORDER	1	0.9	0	0.0	1	0.6
VOMITING	2	1.8	0	0.0	2	1.2
Metabolic and Nutritional Disorders	1	0.9	0	0.0	1	0.6
WEIGHT LOSS	1	0.9	0	0.0	1	0.6
Nervous System	28	25.2	6	10.3	34	20.1
ABNORMAL DREAMS	0	0.0	1	1.7	1	0.6
AGITATION	3	2.7	0	0.0	3	1.8
ANXIETY	2	1.8	0	0.0	2	1.2
DEPRESSION	1	0.9	0	0.0	1	0.6
DIZZINESS	9	8.1	1	1.7	10	5.9
EMOTIONAL LABILITY	1	0.9	0	0.0	1	0.6
HOSTILITY	1	0.9	0	0.0	1	0.6
HYPESTHESIA	1	0.9	0	0.0	1	0.6
HYPOKINESIA	1	0.9	0	0.0	1	0.6
INSOMNIA	6	5.4	2	3.4	8	4.7

TABLE 15.091B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	111	100.0%	58	100.0%	169	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	53	47.7%	20	34.5%	73	43.2%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
MYOCLONUS	3	2.7	0	0.0	3	1.8
NERVOUSNESS	0	0.0	2	3.4	2	1.2
SOMNOLENCE	6	5.4	2	3.4	8	4.7
TREMOR	4	3.6	0	0.0	4	2.4
Respiratory System	6	5.4	1	1.7	7	4.1
DYSPNEA	2	1.8	0	0.0	2	1.2
PHARYNGITIS	0	0.0	1	1.7	1	0.6
RESPIRATORY DISORDER	1	0.9	0	0.0	1	0.6
RHINITIS	1	0.9	0	0.0	1	0.6
SINUSITIS	1	0.9	0	0.0	1	0.6
YAWN	1	0.9	0	0.0	1	0.6
Skin and Appendages	2	1.8	0	0.0	2	1.2
RASH	2	1.8	0	0.0	2	1.2
Special Senses	4	3.6	1	1.7	5	3.0
ABNORMAL VISION	2	1.8	1	1.7	3	1.8
MYDRIASIS	1	0.9	0	0.0	1	0.6
OTITIS MEDIA	1	0.9	0	0.0	1	0.6

TABLE 15.091B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	22	100.0%	11	100.0%	33	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	11	50.0%	6	54.5%	17	51.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	4	18.2	1	9.1	5	15.2
ASTHENIA	1	4.5	0	0.0	1	3.0
FEVER	1	4.5	0	0.0	1	3.0
HEADACHE	1	4.5	1	9.1	2	6.1
INFECTION	1	4.5	0	0.0	1	3.0
Cardiovascular System	2	9.1	0	0.0	2	6.1
HYPOTENSION	1	4.5	0	0.0	1	3.0
VASODILATATION	1	4.5	0	0.0	1	3.0
Digestive System	3	13.6	2	18.2	5	15.2
BILIARY PAIN	0	0.0	1	9.1	1	3.0
DECREASED APPETITE	1	4.5	0	0.0	1	3.0
NAUSEA	2	9.1	1	9.1	3	9.1
Musculoskeletal System	1	4.5	0	0.0	1	3.0
TENDINOUS DISORDER	1	4.5	0	0.0	1	3.0
Nervous System	6	27.3	2	18.2	8	24.2
DEPERSONALIZATION	1	4.5	0	0.0	1	3.0
DIZZINESS	0	0.0	2	18.2	2	6.1
INSOMNIA	1	4.5	0	0.0	1	3.0
SOMNOLENCE	3	13.6	0	0.0	3	9.1
TREMOR	1	4.5	0	0.0	1	3.0
Respiratory System	0	0.0	1	9.1	1	3.0
RHINITIS	0	0.0	1	9.1	1	3.0
Skin and Appendages	1	4.5	1	9.1	2	6.1
SWEATING	1	4.5	1	9.1	2	6.1
Urogenital System	1	4.5	0	0.0	1	3.0
URINARY TRACT INFECTION	1	4.5	0	0.0	1	3.0

TABLE 15.091B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	2	100.0%	1	100.0%	3	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	1	50.0%	1	100.0%	2	66.7%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%
Body as a Whole		0	0.0	1	100.0	1	33.3
HEADACHE		0	0.0	1	100.0	1	33.3
Nervous System		1	50.0	0	0.0	1	33.3
INSOMNIA		1	50.0	0	0.0	1	33.3
Respiratory System		1	50.0	0	0.0	1	33.3
SINUSITIS		1	50.0	0	0.0	1	33.3

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TABLE 15.092B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	11	100.0%	6	100.0%	17	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.092B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	41	100.0%	21	100.0%	62	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.092B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	7	100.0%	5	100.0%	12	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.092B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	1	100.0%	0	0.0%	1	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

PAROXETINE - PROTOCOL: 377

TABLE 15.093B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	36	100.0%	17	100.0%	53	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.093B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	70	100.0%	37	100.0%	107	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%

TABLE 15.093B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	15	100.0%	6	100.0%	21	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.093B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	1	100.0%	1	100.0%	2	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

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TABLE 15.09B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	47	100.0%	23	100.0%	70	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	25	53.2%	8	34.8%	33	47.1%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	6	12.8	4	17.4	10	14.3
Cardiovascular System	1	2.1	0	0.0	1	1.4
Digestive System	14	29.8	3	13.0	17	24.3
Musculoskeletal System	1	2.1	0	0.0	1	1.4
Nervous System	13	27.7	1	4.3	14	20.0
Respiratory System	2	4.3	2	8.7	4	5.7
Skin and Appendages	1	2.1	0	0.0	1	1.4
Urogenital System	0	0.0	1	4.3	1	1.4

TABLE 15.09B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	111	100.0%	58	100.0%	169	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	53	47.7%	20	34.5%	73	43.2%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	23	20.7	14	24.1	37	21.9
Cardiovascular System	3	2.7	0	0.0	3	1.8
Digestive System	28	25.2	7	12.1	35	20.7
Metabolic and Nutritional Disorders	1	0.9	0	0.0	1	0.6
Nervous System	28	25.2	6	10.3	34	20.1
Respiratory System	6	5.4	1	1.7	7	4.1
Skin and Appendages	2	1.8	0	0.0	2	1.2
Special Senses	4	3.6	1	1.7	5	3.0

TABLE 15.09B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	22	100.0%	11	100.0%	33	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	11	50.0%	6	54.5%	17	51.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	4	18.2	1	9.1	5	15.2
Cardiovascular System	2	9.1	0	0.0	2	6.1
Digestive System	3	13.6	2	18.2	5	15.2
Musculoskeletal System	1	4.5	0	0.0	1	3.0
Nervous System	6	27.3	2	18.2	8	24.2
Respiratory System	0	0.0	1	9.1	1	3.0
Skin and Appendages	1	4.5	1	9.1	2	6.1
Urogenital System	1	4.5	0	0.0	1	3.0

TABLE 15.09B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE FIRST TWO WEEKS OF ACTIVE TREATMENT
BY BASELINE BODY WEIGHT (<50kg, 50-70Kg, >70Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	2	100.0%	1	100.0%	3	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	1	50.0%	1	100.0%	2	66.7%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%
Body as a Whole		0	0.0	1	100.0	1	33.3
Nervous System		1	50.0	0	0.0	1	33.3
Respiratory System		1	50.0	0	0.0	1	33.3

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TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	47	100.0%	23	100.0%	70	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	32	68.1%	13	56.5%	45	64.3%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	14	29.8	10	43.5	24	34.3
ABDOMINAL PAIN	2	4.3	2	8.7	4	5.7
ASTHENIA	1	2.1	3	13.0	4	5.7
BACK PAIN	1	2.1	0	0.0	1	1.4
CHEST PAIN	2	4.3	0	0.0	2	2.9
FLU SYNDROME	1	2.1	0	0.0	1	1.4
HEADACHE	11	23.4	6	26.1	17	24.3
INFECTION	5	10.6	4	17.4	9	12.9
PAIN	1	2.1	0	0.0	1	1.4
TRAUMA	2	4.3	0	0.0	2	2.9
Cardiovascular System	3	6.4	0	0.0	3	4.3
HYPERTENSION	1	2.1	0	0.0	1	1.4
HYPOTENSION	1	2.1	0	0.0	1	1.4
PALPITATION	1	2.1	0	0.0	1	1.4
Digestive System	18	38.3	7	30.4	25	35.7
DECREASED APPETITE	3	6.4	0	0.0	3	4.3
DIARRHEA	2	4.3	1	4.3	3	4.3
DRY MOUTH	1	2.1	0	0.0	1	1.4
DYSPEPSIA	1	2.1	0	0.0	1	1.4
GINGIVITIS	2	4.3	0	0.0	2	2.9
NAUSEA	13	27.7	4	17.4	17	24.3
VOMITING	3	6.4	3	13.0	6	8.6
Hemic and Lymphatic System	0	0.0	1	4.3	1	1.4
EOSINOPHILIA	0	0.0	1	4.3	1	1.4
Metabolic and Nutritional Disorders	1	2.1	0	0.0	1	1.4
HYPOGLYCEMIC REACTION	1	2.1	0	0.0	1	1.4
Musculoskeletal System	1	2.1	2	8.7	3	4.3
ARTHRALGIA	1	2.1	1	4.3	2	2.9
MYALGIA	0	0.0	1	4.3	1	1.4
Nervous System	18	38.3	3	13.0	21	30.0
AGITATION	1	2.1	0	0.0	1	1.4

TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	47	100.0%	23	100.0%	70	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	32	68.1%	13	56.5%	45	64.3%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
ANXIETY	1	2.1	0	0.0	1	1.4
CONFUSION	1	2.1	0	0.0	1	1.4
CONVULSION	1	2.1	0	0.0	1	1.4
DIZZINESS	3	6.4	1	4.3	4	5.7
EMOTIONAL LABILITY	3	6.4	0	0.0	3	4.3
HYSTERIA	1	2.1	0	0.0	1	1.4
INSOMNIA	1	2.1	1	4.3	2	2.9
NERVOUSNESS	1	2.1	0	0.0	1	1.4
PARESTHESIA	0	0.0	1	4.3	1	1.4
SOMNOLENCE	7	14.9	0	0.0	7	10.0
TREMOR	1	2.1	0	0.0	1	1.4
Respiratory System	4	8.5	3	13.0	7	10.0
COUGH INCREASED	3	6.4	0	0.0	3	4.3
DYSPNEA	1	2.1	0	0.0	1	1.4
PHARYNGITIS	0	0.0	1	4.3	1	1.4
RESPIRATORY DISORDER	1	2.1	1	4.3	2	2.9
RHINITIS	0	0.0	2	8.7	2	2.9
Skin and Appendages	5	10.6	0	0.0	5	7.1
ACNE	1	2.1	0	0.0	1	1.4
ALOPECIA	1	2.1	0	0.0	1	1.4
HERPES ZOSTER	1	2.1	0	0.0	1	1.4
SWEATING	1	2.1	0	0.0	1	1.4
SWEATING DECREASED	1	2.1	0	0.0	1	1.4
Urogenital System	0	0.0	1	4.3	1	1.4
CYSTITIS	0	0.0	1	4.3	1	1.4

TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	111	100.0%	58	100.0%	169	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	68	61.3%	35	60.3%	103	60.9%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	39	35.1	19	32.8	58	34.3
ABDOMINAL PAIN	4	3.6	5	8.6	9	5.3
ABSCESS	1	0.9	0	0.0	1	0.6
ACCIDENTAL OVERDOSE	1	0.9	0	0.0	1	0.6
ALLERGIC REACTION	1	0.9	0	0.0	1	0.6
ASTHENIA	9	8.1	6	10.3	15	8.9
BACK PAIN	2	1.8	1	1.7	3	1.8
CHEST PAIN	3	2.7	0	0.0	3	1.8
FLU SYNDROME	0	0.0	1	1.7	1	0.6
HEADACHE	19	17.1	12	20.7	31	18.3
INFECTION	8	7.2	1	1.7	9	5.3
MALAISE	0	0.0	1	1.7	1	0.6
NEOPLASM	0	0.0	1	1.7	1	0.6
PAIN	0	0.0	1	1.7	1	0.6
TRAUMA	3	2.7	0	0.0	3	1.8
Cardiovascular System	6	5.4	1	1.7	7	4.1
HYPERTENSION	1	0.9	0	0.0	1	0.6
HYPOTENSION	1	0.9	0	0.0	1	0.6
PALPITATION	1	0.9	0	0.0	1	0.6
POSTURAL HYPOTENSION	3	2.7	1	1.7	4	2.4
Digestive System	36	32.4	11	19.0	47	27.8
CONSTIPATION	3	2.7	1	1.7	4	2.4
DECREASED APPETITE	9	8.1	3	5.2	12	7.1
DIARRHEA	2	1.8	2	3.4	4	2.4
DRY MOUTH	3	2.7	0	0.0	3	1.8
GASTROENTERITIS	1	0.9	0	0.0	1	0.6
NAUSEA	25	22.5	8	13.8	33	19.5
TOOTH DISORDER	1	0.9	0	0.0	1	0.6
VOMITING	3	2.7	0	0.0	3	1.8
Hemic and Lymphatic System	2	1.8	1	1.7	3	1.8
EOSINOPHILIA	1	0.9	0	0.0	1	0.6
LEUKOCYTOSIS	0	0.0	1	1.7	1	0.6
THROMBOCYTOPENIA	1	0.9	0	0.0	1	0.6

TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	111	100.0%	58	100.0%	169	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	68	61.3%	35	60.3%	103	60.9%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Metabolic and Nutritional Disorders	1	0.9	0	0.0	1	0.6
WEIGHT LOSS	1	0.9	0	0.0	1	0.6
Musculoskeletal System	0	0.0	1	1.7	1	0.6
ARTHRALGIA	0	0.0	1	1.7	1	0.6
Nervous System	36	32.4	16	27.6	52	30.8
ABNORMAL DREAMS	2	1.8	1	1.7	3	1.8
AGITATION	3	2.7	0	0.0	3	1.8
ANXIETY	2	1.8	0	0.0	2	1.2
DEPRESSION	2	1.8	0	0.0	2	1.2
DIZZINESS	16	14.4	4	6.9	20	11.8
EMOTIONAL LABILITY	4	3.6	3	5.2	7	4.1
HOSTILITY	1	0.9	0	0.0	1	0.6
HYPESTHESIA	1	0.9	0	0.0	1	0.6
HYPOKINESIA	1	0.9	0	0.0	1	0.6
INSOMNIA	6	5.4	2	3.4	8	4.7
MYOCLONUS	4	3.6	1	1.7	5	3.0
NERVOUSNESS	0	0.0	3	5.2	3	1.8
NEUROSIS	1	0.9	0	0.0	1	0.6
SOMNOLENCE	6	5.4	4	6.9	10	5.9
TREMOR	4	3.6	1	1.7	5	3.0
Respiratory System	14	12.6	8	13.8	22	13.0
BRONCHITIS	1	0.9	2	3.4	3	1.8
COUGH INCREASED	2	1.8	1	1.7	3	1.8
DYSPNEA	2	1.8	0	0.0	2	1.2
EPISTAXIS	1	0.9	0	0.0	1	0.6
PHARYNGITIS	2	1.8	3	5.2	5	3.0
RESPIRATORY DISORDER	3	2.7	2	3.4	5	3.0
RHINITIS	2	1.8	0	0.0	2	1.2
SINUSITIS	2	1.8	1	1.7	3	1.8
YAWN	1	0.9	0	0.0	1	0.6
Skin and Appendages	6	5.4	1	1.7	7	4.1
ACNE	1	0.9	0	0.0	1	0.6
PHOTOSENSITIVITY	1	0.9	0	0.0	1	0.6

TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	111	100.0%	58	100.0%	169	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	68	61.3%	35	60.3%	103	60.9%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
RASH	2	1.8	1	1.7	3	1.8
SWEATING	2	1.8	0	0.0	2	1.2
Special Senses	5	4.5	1	1.7	6	3.6
ABNORMAL VISION	3	2.7	1	1.7	4	2.4
MYDRIASIS	1	0.9	0	0.0	1	0.6
OTITIS MEDIA	1	0.9	0	0.0	1	0.6
Urogenital System	4	3.6	2	3.4	6	3.6
CYSTITIS	1	0.9	2	3.4	3	1.8
PYURIA	1	0.9	0	0.0	1	0.6
URINARY TRACT INFECTION	2	1.8	0	0.0	2	1.2

TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	22	100.0%	11	100.0%	33	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	17	77.3%	6	54.5%	23	69.7%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	8	36.4	4	36.4	12	36.4
ABDOMINAL PAIN	0	0.0	1	9.1	1	3.0
ABSCESS	1	4.5	1	9.1	2	6.1
ASTHENIA	2	9.1	0	0.0	2	6.1
FEVER	1	4.5	0	0.0	1	3.0
HEADACHE	4	18.2	2	18.2	6	18.2
INFECTION	1	4.5	0	0.0	1	3.0
Cardiovascular System	3	13.6	0	0.0	3	9.1
HYPOTENSION	1	4.5	0	0.0	1	3.0
SYNCOPE	1	4.5	0	0.0	1	3.0
VASODILATATION	1	4.5	0	0.0	1	3.0
Digestive System	10	45.5	3	27.3	13	39.4
BILIARY PAIN	0	0.0	1	9.1	1	3.0
DECREASED APPETITE	2	9.1	0	0.0	2	6.1
GASTROENTERITIS	1	4.5	1	9.1	2	6.1
INCREASED APPETITE	2	9.1	0	0.0	2	6.1
NAUSEA	6	27.3	2	18.2	8	24.2
VOMITING	1	4.5	0	0.0	1	3.0
Hemic and Lymphatic System	1	4.5	0	0.0	1	3.0
ANEMIA	1	4.5	0	0.0	1	3.0
Metabolic and Nutritional Disorders	1	4.5	0	0.0	1	3.0
WEIGHT GAIN	1	4.5	0	0.0	1	3.0
Musculoskeletal System	1	4.5	0	0.0	1	3.0
TENDINOUS DISORDER	1	4.5	0	0.0	1	3.0
Nervous System	9	40.9	2	18.2	11	33.3
DEPERSONALIZATION	2	9.1	0	0.0	2	6.1
DIZZINESS	0	0.0	2	18.2	2	6.1
EMOTIONAL LABILITY	1	4.5	0	0.0	1	3.0
INSOMNIA	1	4.5	0	0.0	1	3.0
NERVOUSNESS	1	4.5	0	0.0	1	3.0
SOMNOLENCE	4	18.2	1	9.1	5	15.2

TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	22	100.0%	11	100.0%	33	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	17	77.3%	6	54.5%	23	69.7%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
TREMOR	1	4.5	0	0.0	1	3.0
Respiratory System	3	13.6	1	9.1	4	12.1
RESPIRATORY DISORDER	1	4.5	0	0.0	1	3.0
RHINITIS	1	4.5	1	9.1	2	6.1
SINUSITIS	1	4.5	0	0.0	1	3.0
Skin and Appendages	1	4.5	1	9.1	2	6.1
SWEATING	1	4.5	1	9.1	2	6.1
Urogenital System	1	4.5	0	0.0	1	3.0
URINARY TRACT INFECTION	1	4.5	0	0.0	1	3.0

TABLE 15.101B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	2	100.0%	1	100.0%	3	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	2	100.0%	1	100.0%	3	100.0%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	0	0.0	1	100.0	1	33.3
ABDOMINAL PAIN	0	0.0	1	100.0	1	33.3
HEADACHE	0	0.0	1	100.0	1	33.3
INFECTION	0	0.0	1	100.0	1	33.3
PAIN	0	0.0	1	100.0	1	33.3
Nervous System	1	50.0	1	100.0	2	66.7
INSOMNIA	1	50.0	0	0.0	1	33.3
SOMNOLENCE	0	0.0	1	100.0	1	33.3
Respiratory System	1	50.0	1	100.0	2	66.7
BRONCHITIS	0	0.0	1	100.0	1	33.3
PHARYNGITIS	0	0.0	1	100.0	1	33.3
SINUSITIS	1	50.0	0	0.0	1	33.3
Special Senses	1	50.0	0	0.0	1	33.3
OTITIS MEDIA	1	50.0	0	0.0	1	33.3

PAROXETINE - PROTOCOL: 377

TABLE 15.102B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (< 50 Kg, 50-70 Kg, >70 Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	11	100.0%	6	100.0%	17	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.102B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (< 50 Kg, 50-70 Kg, >70 Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	41	100.0%	21	100.0%	62	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	1	2.4%	0	0.0%	1	1.6%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Urogenital System	1	2.4	0	0.0	1	1.6
ABNORMAL EJACULATION	1	2.4	0	0.0	1	1.6
IMPOTENCE	1	2.4	0	0.0	1	1.6

TABLE 15.102B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (< 50 Kg, 50-70 Kg, >70 Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	7	100.0%	5	100.0%	12	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.102B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (< 50 Kg, 50-70 Kg, >70 Kg). MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	1	100.0%	0	0.0%	1	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

PAROXETINE - PROTOCOL: 377

TABLE 15.103B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	36	100.0%	17	100.0%	53	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

TABLE 15.103B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	70	100.0%	37	100.0%	107	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	2	2.9%	0	0.0%	2	1.9%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Urogenital System	2	2.9	0	0.0	2	1.9
DYSMENORRHEA	1	1.4	0	0.0	1	0.9
MENSTRUAL DISORDER	1	1.4	0	0.0	1	0.9

TABLE 15.103B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	15	100.0%	6	100.0%	21	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%

TABLE 15.103B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS		PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	:	1	100.0%	1	100.0%	2	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	:	0	0.0%	0	0.0%	0	0.0%
ADECS BODY SYSTEM : PREFERRED TERM		N	%	N	%	N	%

Paroxetine - Protocol: 377

TABLE 15.10B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: < 50 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	47	100.0%	23	100.0%	70	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	32	68.1%	13	56.5%	45	64.3%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	14	29.8	10	43.5	24	34.3
Cardiovascular System	3	6.4	0	0.0	3	4.3
Digestive System	18	38.3	7	30.4	25	35.7
Hemic and Lymphatic System	0	0.0	1	4.3	1	1.4
Metabolic and Nutritional Disorders	1	2.1	0	0.0	1	1.4
Musculoskeletal System	1	2.1	2	8.7	3	4.3
Nervous System	18	38.3	3	13.0	21	30.0
Respiratory System	4	8.5	3	13.0	7	10.0
Skin and Appendages	5	10.6	0	0.0	5	7.1
Urogenital System	0	0.0	1	4.3	1	1.4

TABLE 15.10B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: 50 - 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	111	100.0%	58	100.0%	169	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	69	62.2%	35	60.3%	104	61.5%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	39	35.1	19	32.8	58	34.3
Cardiovascular System	6	5.4	1	1.7	7	4.1
Digestive System	36	32.4	11	19.0	47	27.8
Hemic and Lymphatic System	2	1.8	1	1.7	3	1.8
Metabolic and Nutritional Disorders	1	0.9	0	0.0	1	0.6
Musculoskeletal System	0	0.0	1	1.7	1	0.6
Nervous System	36	32.4	16	27.6	52	30.8
Respiratory System	14	12.6	8	13.8	22	13.0
Skin and Appendages	6	5.4	1	1.7	7	4.1
Special Senses	5	4.5	1	1.7	6	3.6
Urogenital System	7	6.3	2	3.4	9	5.3

TABLE 15.10B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: > 70 KG

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS	22	100.0%	11	100.0%	33	100.0%
PATIENTS WITH ADVERSE EXPERIENCES	17	77.3%	6	54.5%	23	69.7%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	8	36.4	4	36.4	12	36.4
Cardiovascular System	3	13.6	0	0.0	3	9.1
Digestive System	10	45.5	3	27.3	13	39.4
Hemic and Lymphatic System	1	4.5	0	0.0	1	3.0
Metabolic and Nutritional Disorders	1	4.5	0	0.0	1	3.0
Musculoskeletal System	1	4.5	0	0.0	1	3.0
Nervous System	9	40.9	2	18.2	11	33.3
Respiratory System	3	13.6	1	9.1	4	12.1
Skin and Appendages	1	4.5	1	9.1	2	6.1
Urogenital System	1	4.5	0	0.0	1	3.0

TABLE 15.10B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES
BY BASELINE BODY WEIGHT (<50 Kg, 50-70 Kg, >70 Kg). DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

WEIGHT: MISSING

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	2	100.0%	1	100.0%	3	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	2	100.0%	1	100.0%	3	100.0%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	0	0.0	1	100.0	1	33.3
Nervous System	1	50.0	1	100.0	2	66.7
Respiratory System	1	50.0	1	100.0	2	66.7
Special Senses	1	50.0	0	0.0	1	33.3

TABLE 15.111B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE DOWN TITRATION PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	133	100.0%	72	100.0%	205	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	19	14.3%	6	8.3%	25	12.2%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	4	3.0	4	5.6	8	3.9
ABDOMINAL PAIN	2	1.5	1	1.4	3	1.5
BACK PAIN	0	0.0	1	1.4	1	0.5
HEADACHE	2	1.5	2	2.8	4	2.0
INFECTION	2	1.5	0	0.0	2	1.0
TRAUMA	1	0.8	0	0.0	1	0.5
Digestive System	1	0.8	2	2.8	3	1.5
DIARRHEA	0	0.0	1	1.4	1	0.5
INCREASED APPETITE	0	0.0	1	1.4	1	0.5
NAUSEA	0	0.0	1	1.4	1	0.5
VOMITING	1	0.8	0	0.0	1	0.5
Hemic and Lymphatic System	4	3.0	0	0.0	4	2.0
ANEMIA	1	0.8	0	0.0	1	0.5
LEUKOPENIA	1	0.8	0	0.0	1	0.5
LYMPHOCYTOSIS	2	1.5	0	0.0	2	1.0
Nervous System	6	4.5	2	2.8	8	3.9
AGITATION	1	0.8	0	0.0	1	0.5
ANXIETY	2	1.5	0	0.0	2	1.0
DEPRESSION	1	0.8	0	0.0	1	0.5
DIZZINESS	2	1.5	0	0.0	2	1.0
EMOTIONAL LABILITY	0	0.0	1	1.4	1	0.5
NERVOUSNESS	1	0.8	1	1.4	2	1.0
THINKING ABNORMAL	1	0.8	0	0.0	1	0.5
TREMOR	1	0.8	0	0.0	1	0.5
Respiratory System	5	3.8	1	1.4	6	2.9
ASTHMA	1	0.8	0	0.0	1	0.5
BRONCHITIS	1	0.8	0	0.0	1	0.5
COUGH INCREASED	1	0.8	0	0.0	1	0.5
PHARYNGITIS	1	0.8	1	1.4	2	1.0
RESPIRATORY DISORDER	1	0.8	0	0.0	1	0.5
Urogenital System	2	1.5	0	0.0	2	1.0
KIDNEY PAIN	1	0.8	0	0.0	1	0.5

TABLE 15.111B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE DOWN TITRATION PHASE
NON-GENDER SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	133	100.0%	72	100.0%	205	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	19	14.3%	6	8.3%	25	12.2%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
URINARY INCONTINENCE	1	0.8	0	0.0	1	0.5

TABLE 15.112B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE DOWN TITRATION PHASE
MALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

Paroxetine - Protocol: 377

TABLE 15.113B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE DOWN TITRATION PHASE
FEMALE SPECIFIC ADVERSE EXPERIENCES ONLY
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	91	100.0%	45	100.0%	136	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	1	1.1%	0	0.0%	1	0.7%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Urogenital System	1	1.1	0	0.0	1	0.7
DYSMENORRHEA	1	1.1	0	0.0	1	0.7

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TABLE 15.11B

NUMBER (%) OF PATIENTS WITH EMERGENT ADVERSE EXPERIENCES DURING THE DOWN TITRATION PHASE
DISPLAYED BY BODY SYSTEM
INTENTION TO TREAT POPULATION

TREATMENT GROUPS	PAROXETINE		PLACEBO		TOTAL	
TOTAL NUMBER OF PATIENTS :	133	100.0%	72	100.0%	205	100.0%
PATIENTS WITH ADVERSE EXPERIENCES :	19	14.3%	6	8.3%	25	12.2%
ADECS BODY SYSTEM : PREFERRED TERM	N	%	N	%	N	%
Body as a Whole	4	3.0	4	5.6	8	3.9
Digestive System	1	0.8	2	2.8	3	1.5
Hemic and Lymphatic System	4	3.0	0	0.0	4	2.0
Nervous System	6	4.5	2	2.8	8	3.9
Respiratory System	5	3.8	1	1.4	6	2.9
Urogenital System	3	2.3	0	0.0	3	1.5

Paroxetine - Protocol: 377

TABLE 15.12b

NUMBER (%) OF DEATHS DURING ACTIVE TREATMENT
INTENTION TO TREAT POPULATION

NO DATA AVAILABLE FOR THIS REPORT

Table 15.21b
Summary of Flagged Vital Signs by Parameter
Intention to Treat Population

Sitting Diastolic BP (mmHg)

Treatment Groups	Paroxetine		Placebo	
	N	%	N	%
High	1	0.5	0	0.0
Low	7	3.8	3	3.2
Significant Increase	8	4.5	5	5.4
Significant Decrease	25	14.1	15	16.1
Number with Assessment	182	100.0	93	100.0
Number with Base and Post-base Assessment	177	97.3	93	100.0

Key
High - greater than 105mmHg
Low - less than 50mmHg
Significant Increase - increase of 30mmHg or more from baseline
Significant Decrease - decrease of 20mmHg or more from baseline
Number with Assessment - number of patients who had a sitting diastolic blood pressure measurement at any time

Table 15.21b
Summary of Flagged Vital Signs by Parameter
Intention to Treat Population

Standing Diastolic BP (mmHg)

Treatment Groups	Paroxetine		Placebo	
	N	%	N	%
High	1	0.5	1	1.1
Low	4	2.2	4	4.3
Significant Increase	8	4.5	3	3.2
Significant Decrease	22	12.4	15	16.1
Number with Assessment	182	100.0	93	100.0
Number with Base and Post-base Assessment	177	97.3	93	100.0

Key
High - greater than 105mmHg
Low - less than 50mmHg
Significant Increase - increase of 30mmHg or more from baseline
Significant Decrease - decrease of 20mmHg or more from baseline
Number with Assessment - number of patients who had a sitting diastolic blood pressure measurement at any time

Table 15.21b
Summary of Flagged Vital Signs by Parameter
Intention to Treat Population

Sitting Systolic BP (mmHg)

Treatment Groups	Paroxetine		Placebo	
	N	%	N	%
High	0	0.0	0	0.0
Low	18	9.9	12	12.9
Significant Increase	0	0.0	0	0.0
Significant Decrease	11	6.2	7	7.5
Number with Assessment	182	100.0	93	100.0
Number with Base and Post-base Assessment	177	97.3	93	100.0

Key
High - greater than 180mmHg
Low - less than 90mmHg
Significant Increase - increase of 40mmHg or more from baseline
Significant Decrease - decrease of 30mmHg or more from baseline
Number with Assessment - number of patients who had a sitting systolic blood pressure measurement at any time

Table 15.21b
Summary of Flagged Vital Signs by Parameter
Intention to Treat Population

Standing Systolic BP (mmHg)

Treatment Groups	Paroxetine		Placebo	
	N	%	N	%
High	0	0.0	0	0.0
Low	24	13.2	12	12.9
Significant Increase	0	0.0	2	2.2
Significant Decrease	12	6.8	5	5.4
Number with Assessment	182	100.0	93	100.0
Number with Base and Post-base Assessment	177	97.3	93	100.0

Key
High - greater than 180mmHg
Low - less than 90mmHg
Significant Increase - increase of 40mmHg or more from baseline
Significant Decrease - decrease of 30mmHg or more from baseline
Number with Assessment - number of patients who had a sitting systolic blood pressure measurement at any time

Table 15.21b
Summary of Flagged Vital Signs by Parameter
Intention to Treat Population

Sitting Pulse (beats per min)

Treatment Groups	Paroxetine		Placebo	
	N	%	N	%
High	1	0.5	1	1.1
Low	1	0.5	1	1.1
Significant Increase	11	6.2	4	4.3
Significant Decrease	7	4.0	0	0.0
Number with Assessment	182	100.0	93	100.0
Number with Base and Post-base Assessment	177	97.3	93	100.0

Key
High - greater than 120 BPM
Low - less than 50 BPM
Significant Increase - increase of 30 BPM or more from baseline
Significant Decrease - decrease of 30 BPM or more from baseline
Number with Assessment - number of patients who had a sitting pulse rate measurement at any time

Table 15.21b
Summary of Flagged Vital Signs by Parameter
Intention to Treat Population

Standing Pulse (beats per min)

Treatment Groups	Paroxetine		Placebo	
	N	%	N	%
High	6	3.3	3	3.2
Low	0	0.0	0	0.0
Significant Increase	16	9.0	9	9.7
Significant Decrease	9	5.1	4	4.3
Number with Assessment	182	100.0	93	100.0
Number with Base and Post-base Assessment	177	97.3	93	100.0

Key
High - greater than 120 BPM
Low - less than 50 BPM
Significant Increase - increase of 30 BPM or more from baseline
Significant Decrease - decrease of 30 BPM or more from baseline
Number with Assessment - number of patients who had a sitting pulse rate measurement at any time

Table 15.21b
Summary of Flagged Vital Signs by Parameter
Intention to Treat Population

Weight (Kg)

Treatment Groups	Paroxetine		Placebo	
	N	%	N	%
High	0	0.0	0	0.0
Low	0	0.0	0	0.0
Significant Increase	12	8.2	5	6.8
Significant Decrease	5	3.4	4	5.5
Number with Assessment	181	99.5	93	100.0
Number with Base and Post-base Assessment	146	80.7	73	78.5

Key
High - not relevant
Low - not relevant
Significant Increase - increase of 7% or more from baseline
Significant Decrease - decrease of 7% or more from baseline
Number with Assessment - number of patients who had their weight measured at any time

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Sitting Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	70.2	70.0	9.12	50.0	90.0	179
Week 1	69.9	70.0	9.69	40.0	95.0	170
Week 2	70.5	70.0	10.00	40.0	98.0	165
Week 3	70.2	70.0	9.30	40.0	96.0	158
Week 4	69.2	70.0	9.76	41.0	98.0	158
Week 6	69.2	70.0	9.38	32.0	97.0	149
Week 8	69.7	70.0	10.12	40.0	92.0	147
Week 12	69.6	70.0	10.15	30.0	100.0	130
>Week 12	70.3	70.0	10.47	40.0	110.0	121

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Sitting Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	69.3	70.0	9.27	50.0	90.0	92
Week 1	68.4	70.0	8.58	40.0	90.0	84
Week 2	67.8	70.0	9.15	40.0	85.0	85
Week 3	69.5	70.0	9.11	50.0	90.0	85
Week 4	69.2	70.0	9.75	50.0	95.0	80
Week 6	68.9	70.0	9.16	50.0	90.0	79
Week 8	69.9	70.0	9.32	50.0	95.0	73
Week 12	67.2	70.0	8.39	45.0	80.0	69
>Week 12	68.9	70.0	10.45	50.0	100.0	67

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Standing Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	71.6	70.0	9.91	50.0	97.0	178
Week 1	71.5	70.0	9.88	50.0	100.0	170
Week 2	72.0	70.0	10.57	50.0	100.0	164
Week 3	72.4	70.0	10.28	50.0	101.0	158
Week 4	71.7	70.0	10.72	45.0	100.0	157
Week 6	70.8	70.0	9.95	50.0	100.0	149
Week 8	71.3	70.0	10.39	42.0	100.0	146
Week 12	70.6	70.0	9.69	50.0	100.0	129
>Week 12	71.6	70.0	10.45	40.0	110.0	122

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Standing Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	70.9	70.0	9.21	50.0	85.0	92
Week 1	70.8	70.0	9.02	50.0	95.0	84
Week 2	70.9	70.0	9.84	45.0	95.0	85
Week 3	71.3	70.0	9.57	55.0	90.0	85
Week 4	70.9	70.0	10.02	50.0	90.0	80
Week 6	71.9	70.0	9.29	54.0	94.0	79
Week 8	72.3	70.0	10.32	55.0	95.0	74
Week 12	69.6	70.0	8.64	40.0	90.0	69
>Week 12	69.6	70.0	8.73	50.0	90.0	67

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Sitting Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	110.7	110.0	11.52	75.0	142.0	179
Week 1	109.1	110.0	11.47	75.0	145.0	170
Week 2	109.1	110.0	12.08	80.0	150.0	165
Week 3	108.8	110.0	11.95	80.0	140.0	158
Week 4	108.6	110.0	11.96	80.0	150.0	158
Week 6	108.3	110.0	13.50	75.0	150.0	149
Week 8	109.1	110.0	11.64	80.0	150.0	147
Week 12	109.1	110.0	12.67	60.0	140.0	130
>Week 12	108.1	110.0	11.57	70.0	130.0	121

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Sitting Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	108.5	110.0	11.43	80.0	150.0	92
Week 1	108.5	110.0	12.28	80.0	150.0	84
Week 2	107.3	110.0	13.93	80.0	155.0	85
Week 3	108.2	110.0	13.17	80.0	150.0	85
Week 4	108.0	110.0	13.91	80.0	150.0	80
Week 6	108.9	110.0	12.85	80.0	145.0	79
Week 8	108.5	110.0	11.75	90.0	140.0	73
Week 12	107.1	110.0	11.77	85.0	130.0	69
>Week 12	107.6	110.0	13.43	80.0	140.0	67

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Standing Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	109.8	110.0	12.41	80.0	142.0	178
Week 1	109.2	110.0	12.97	75.0	140.0	170
Week 2	109.1	110.0	12.62	80.0	140.0	164
Week 3	109.3	110.0	12.73	80.0	149.0	158
Week 4	109.0	110.0	13.22	80.0	150.0	158
Week 6	108.2	110.0	12.59	80.0	148.0	149
Week 8	108.1	110.0	11.71	80.0	145.0	146
Week 12	108.5	110.0	12.39	80.0	145.0	129
>Week 12	107.3	110.0	12.16	72.0	140.0	122

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Standing Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	108.7	110.0	13.21	80.0	150.0	92
Week 1	108.4	110.0	12.95	80.0	150.0	84
Week 2	107.4	110.0	12.56	80.0	150.0	85
Week 3	109.1	110.0	13.27	80.0	150.0	85
Week 4	108.2	110.0	13.14	80.0	150.0	80
Week 6	108.4	110.0	12.76	80.0	140.0	79
Week 8	109.3	110.0	12.65	90.0	140.0	74
Week 12	107.2	110.0	11.33	80.0	140.0	69
>Week 12	108.1	110.0	11.23	85.0	130.0	67

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Sitting Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	76.6	76.0	10.57	58.0	128.0	178
Week 1	75.2	76.0	9.60	44.0	100.0	172
Week 2	76.4	76.5	9.46	52.0	115.0	164
Week 3	76.2	76.0	9.40	52.0	120.0	158
Week 4	78.3	78.0	10.31	52.0	120.0	158
Week 6	77.6	78.0	10.91	52.0	120.0	149
Week 8	77.7	76.0	9.53	60.0	104.0	147
Week 12	77.1	76.0	9.96	56.0	107.0	129
>Week 12	78.4	78.0	10.55	56.0	118.0	121

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Sitting Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	75.5	76.0	9.30	56.0	99.0	91
Week 1	77.2	78.0	9.46	59.0	96.0	87
Week 2	76.5	76.0	10.25	56.0	110.0	85
Week 3	77.6	76.0	11.86	52.0	126.0	85
Week 4	77.9	78.0	8.73	60.0	100.0	80
Week 6	77.6	79.5	10.47	55.0	100.0	80
Week 8	75.5	76.0	9.23	52.0	92.0	76
Week 12	76.4	76.0	9.68	58.0	96.0	69
>Week 12	76.8	76.5	10.01	47.0	104.0	66

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Standing Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	82.2	80.0	12.01	56.0	122.0	177
Week 1	80.6	80.0	10.58	52.0	114.0	172
Week 2	82.4	82.0	11.55	60.0	137.0	163
Week 3	81.3	80.0	11.61	52.0	125.0	158
Week 4	84.5	83.0	11.72	56.0	130.0	158
Week 6	82.7	80.0	11.11	52.0	125.0	149
Week 8	82.9	80.0	11.33	60.0	120.0	147
Week 12	81.8	82.0	10.31	52.0	112.0	129
>Week 12	82.7	80.0	11.02	60.0	131.0	122

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Standing Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	80.4	80.0	10.98	60.0	120.0	91
Week 1	82.7	80.0	11.39	62.0	125.0	87
Week 2	82.1	80.0	11.71	52.0	120.0	85
Week 3	83.3	80.0	11.49	64.0	125.0	84
Week 4	84.9	83.0	12.54	60.0	132.0	80
Week 6	83.4	81.5	13.64	56.0	120.0	80
Week 8	80.5	80.0	10.07	59.0	110.0	77
Week 12	81.7	82.0	9.87	64.0	104.0	69
>Week 12	82.4	80.0	10.36	56.0	120.0	66

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Weight (Kg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	57.6	56.0	13.51	34.0	118.0	180
Week 1	52.0	52.0		52.0	52.0	1
Week 2	54.9	58.5	9.29	42.0	66.0	7
Week 3	57.6	61.3	10.80	45.4	66.0	3
Week 4	75.0	75.0	29.70	54.0	96.0	2
Week 6	50.3	50.0	5.56	45.0	56.0	4
Week 8	59.5	59.5	4.95	56.0	63.0	2
Week 12	57.8	56.0	14.01	34.0	117.0	118
>Week 12	59.3	54.3	12.56	46.0	79.0	6

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Weight (Kg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	58.2	57.2	11.53	36.0	105.0	92
Week 1	57.0	57.0		57.0	57.0	1
Week 4	43.5	43.5		43.5	43.5	1
Week 6	52.0	54.5	10.34	37.6	61.4	4
Week 8	60.1	63.2	12.79	46.0	71.0	3
Week 12	57.6	56.8	11.13	36.5	96.0	62
>Week 12	71.1	61.7	29.50	47.5	104.2	3

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Height (cm)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	163.6	163.3	9.08	140.0	185.0	180

Table 15.22b
Summary of Group Vital Signs
Intention to Treat Population

Treatment Group: Placebo

Parameter: Height (cm)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	164.5	165.0	8.52	131.0	184.0	93

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Sitting Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	70.3	70.0	9.13	50.0	90.0	177
Week 1	-0.2	0.0	8.44	-27.0	25.0	168
Week 2	0.2	0.0	9.09	-31.0	20.0	162
Week 3	0.2	0.0	8.55	-22.0	25.0	155
Week 4	-1.1	0.0	9.80	-39.0	30.0	156
Week 6	-1.1	0.0	9.76	-38.0	30.0	148
Week 8	-0.4	0.0	10.41	-35.0	30.0	146
Week 12	-0.4	0.0	10.49	-30.0	26.0	129
>Week 12	0.7	0.0	11.81	-30.0	30.0	120

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Sitting Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	69.3	70.0	9.27	50.0	90.0	92
Week 1	-0.7	0.0	9.56	-20.0	20.0	83
Week 2	-1.0	0.0	9.87	-20.0	20.0	84
Week 3	0.4	0.0	9.84	-30.0	24.0	84
Week 4	0.4	0.0	10.14	-21.0	35.0	79
Week 6	-0.2	0.0	10.28	-24.0	25.0	78
Week 8	1.7	0.0	10.98	-30.0	35.0	72
Week 12	-0.2	0.0	9.81	-30.0	30.0	68
>Week 12	0.6	0.0	12.54	-25.0	50.0	66

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Standing Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	71.7	70.0	9.92	50.0	97.0	176
Week 1	-0.0	0.0	8.45	-20.0	21.0	167
Week 2	0.4	0.0	9.70	-32.0	30.0	161
Week 3	0.8	0.0	8.98	-15.0	40.0	154
Week 4	-0.0	0.0	10.25	-45.0	32.0	154
Week 6	-0.5	0.0	9.94	-40.0	30.0	147
Week 8	0.2	0.0	9.73	-25.0	30.0	144
Week 12	-0.7	0.0	10.41	-30.0	28.0	128
>Week 12	0.8	0.0	11.48	-30.0	30.0	120

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Standing Diastolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	70.9	70.0	9.21	50.0	85.0	92
Week 1	0.4	0.0	9.03	-25.0	30.0	83
Week 2	0.4	0.0	9.81	-25.0	25.0	84
Week 3	0.6	0.0	9.12	-20.0	30.0	84
Week 4	0.2	0.0	9.48	-25.0	25.0	79
Week 6	0.7	0.0	9.82	-25.0	26.0	78
Week 8	2.0	0.0	11.34	-25.0	30.0	73
Week 12	-0.0	0.0	9.75	-20.0	25.0	68
>Week 12	-1.0	0.0	9.99	-25.0	24.0	66

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Sitting Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	110.8	110.0	11.46	75.0	142.0	177
Week 1	-1.4	0.0	10.13	-30.0	30.0	168
Week 2	-1.9	0.0	11.39	-35.0	30.0	162
Week 3	-1.7	0.0	10.84	-40.0	20.0	155
Week 4	-2.2	0.0	10.61	-30.0	30.0	156
Week 6	-2.3	0.0	13.35	-62.0	30.0	148
Week 8	-1.5	0.0	11.53	-35.0	30.0	146
Week 12	-1.5	0.0	12.03	-40.0	25.0	129
>Week 12	-2.1	0.0	11.83	-30.0	25.0	120

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Sitting Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	108.5	110.0	11.43	80.0	150.0	92
Week 1	0.6	0.0	10.73	-28.0	30.0	83
Week 2	-0.8	0.0	10.91	-30.0	30.0	84
Week 3	-0.0	0.0	11.10	-30.0	30.0	84
Week 4	0.0	0.0	11.13	-35.0	30.0	79
Week 6	0.8	0.0	10.51	-30.0	30.0	78
Week 8	1.0	0.0	10.93	-30.0	30.0	72
Week 12	0.1	0.0	9.53	-30.0	20.0	68
>Week 12	-0.2	0.0	12.96	-34.0	30.0	66

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Standing Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	109.9	110.0	12.38	80.0	142.0	176
Week 1	-0.7	0.0	11.33	-50.0	30.0	167
Week 2	-0.7	0.0	10.32	-30.0	25.0	161
Week 3	0.1	0.0	11.19	-40.0	28.0	154
Week 4	-1.0	0.0	11.06	-35.0	26.0	155
Week 6	-1.3	0.0	11.38	-40.0	30.0	147
Week 8	-1.5	0.0	11.57	-35.0	30.0	144
Week 12	-0.7	0.0	11.19	-35.0	31.0	128
>Week 12	-1.7	0.0	12.02	-30.0	30.0	120

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Standing Systolic BP (mmHg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	108.7	110.0	13.21	80.0	150.0	92
Week 1	0.1	0.0	11.41	-30.0	30.0	83
Week 2	-1.2	0.0	10.21	-25.0	30.0	84
Week 3	0.4	0.0	10.93	-38.0	30.0	84
Week 4	-0.4	0.0	10.45	-30.0	20.0	79
Week 6	-0.6	0.0	10.85	-25.0	30.0	78
Week 8	1.3	0.0	13.39	-30.0	40.0	73
Week 12	-0.2	0.0	12.53	-32.0	40.0	68
>Week 12	-0.2	0.0	13.85	-35.0	31.0	66

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Sitting Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	76.8	76.0	10.51	58.0	128.0	176
Week 1	-2.0	0.0	12.61	-64.0	32.0	169
Week 2	-0.5	0.0	12.26	-64.0	48.0	160
Week 3	-1.0	0.0	12.42	-60.0	52.0	154
Week 4	1.4	0.0	12.51	-50.0	32.0	155
Week 6	0.2	0.0	13.72	-60.0	48.0	147
Week 8	0.6	0.0	12.21	-60.0	24.0	145
Week 12	-0.0	0.0	12.60	-64.0	36.0	127
>Week 12	1.0	2.0	13.46	-64.0	35.0	119

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Sitting Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	75.5	76.0	9.30	56.0	99.0	91
Week 1	1.6	2.0	7.71	-20.0	28.0	85
Week 2	1.2	0.0	9.42	-20.0	36.0	83
Week 3	2.1	0.0	12.54	-26.0	54.0	83
Week 4	2.5	0.0	9.61	-20.0	28.0	78
Week 6	1.7	1.0	9.95	-23.0	32.0	78
Week 8	-0.1	0.0	9.21	-23.0	28.0	74
Week 12	0.8	0.0	9.82	-24.0	19.0	67
>Week 12	0.7	0.0	11.34	-25.0	24.0	64

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Standing Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	82.3	80.0	11.97	56.0	122.0	175
Week 1	-1.8	0.0	12.17	-56.0	30.0	168
Week 2	0.3	2.0	11.99	-40.0	48.0	159
Week 3	-0.6	0.0	12.78	-48.0	45.0	153
Week 4	2.8	2.0	12.42	-52.0	33.0	154
Week 6	0.0	0.0	13.66	-32.0	46.0	146
Week 8	0.6	0.0	12.52	-48.0	34.0	144
Week 12	0.4	0.0	11.59	-36.0	24.0	127
>Week 12	0.9	0.0	13.14	-37.0	36.0	119

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Standing Pulse (beats per min)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	80.4	80.0	10.98	60.0	120.0	91
Week 1	2.2	0.0	10.78	-48.0	30.0	85
Week 2	1.8	0.0	11.76	-40.0	40.0	83
Week 3	2.8	4.0	13.75	-48.0	45.0	82
Week 4	4.9	2.0	12.81	-48.0	42.0	78
Week 6	2.6	2.0	11.95	-28.0	44.0	78
Week 8	-0.1	0.0	13.01	-32.0	24.0	75
Week 12	1.1	0.0	11.69	-40.0	24.0	67
>Week 12	1.1	0.0	12.17	-41.0	32.0	64

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Weight (Kg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	57.6	56.0	13.58	34.0	118.0	178
Week 1	0.0	0.0		0.0	0.0	1
Week 2	0.0	0.0	1.17	-1.4	2.0	7
Week 3	0.9	0.4	1.23	0.0	2.3	3
Week 4	-2.0	-2.0	2.83	-4.0	0.0	2
Week 6	-0.3	0.5	2.50	-3.9	1.7	4
Week 8	-1.1	-1.1	2.97	-3.2	1.0	2
Week 12	0.3	0.0	3.14	-12.0	10.0	117
>Week 12	0.1	-1.0	4.63	-3.8	9.1	6

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Weight (Kg)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	58.2	57.2	11.53	36.0	105.0	92
Week 1	-0.5	-0.5		-0.5	-0.5	1
Week 4	1.8	1.8		1.8	1.8	1
Week 6	-0.3	1.2	3.18	-5.0	1.6	4
Week 8	-2.5	-2.0	3.28	-6.0	0.5	3
Week 12	0.5	0.0	3.12	-13.0	11.0	62
>Week 12	0.4	0.4	1.77	-0.8	1.7	2

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Paroxetine

Parameter: Height (cm)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	163.5	163.3	9.08	140.0	185.0	178

Table 15.23b
Summary of Group Vital Signs Changes from Baseline
Intention to Treat Population

Treatment Group: Placebo

Parameter: Height (cm)

Interval	Mean	Median	Std Dev	Minimum	Maximum	N
Baseline	164.5	165.0	8.52	131.0	184.0	93

Table 15.34B
Summary of Qualitative Laboratory Values
Intention to Treat Population

Parameter = Serum BHCG pregnancy test (dipst)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	99	54.4	49	52.7
Negative	99	100.0	49	100.0
Positive	1	1.0	0	0.0
Trace	0	0.0	0	0.0

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

Table 15.34B
Summary of Qualitative Laboratory Values
Intention to Treat Population

Parameter = Urine Blood - Dipstick

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	83	45.6	47	50.5
Negative	75	90.4	39	83.0
Positive	16	19.3	12	25.5
Trace	4	4.8	2	4.3

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

Table 15.34B
Summary of Qualitative Laboratory Values
Intention to Treat Population

Parameter = Urine Glucose - Dipstick

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	83	45.6	47	50.5
Negative	83	100.0	47	100.0
Positive	0	0.0	1	2.1
Trace	1	1.2	0	0.0

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

Table 15.34B
Summary of Qualitative Laboratory Values
Intention to Treat Population

Parameter = Urine Protein - Dipstick

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	83	45.6	47	50.5
Negative	71	85.5	40	85.1
Positive	11	13.3	7	14.9
Trace	10	12.0	3	6.4

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T1534B.SAS (31JUL98 17:00)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Alanine Aminotransferase (iu/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	182	100.0	93	100.0
L	5	2.7	1	1.1
H	5	2.7	0	0.0
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Albumin (g/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	181	99.5	93	100.0
L	1	0.6	0	0.0
H	0	0.0	0	0.0
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Alkaline Phosphatase (iu/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	180	98.9	93	100.0
L	2	1.1	0	0.0
H	14	7.8	3	3.2
+	11	6.1	2	2.2
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Aspartate Aminotransferase (iu/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	182	100.0	93	100.0
L	0	0.0	0	0.0
H	2	1.1	2	2.2
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Basophils (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	179	98.4	92	98.9
L	0	0.0	0	0.0
H	0	0.0	1	1.1
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Blood Urea Nitrogen (mmol/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	182	100.0	93	100.0
L	7	3.8	2	2.2
H	1	0.5	1	1.1
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Calcium (mmol/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	181	99.5	93	100.0
L	3	1.7	2	2.2
H	53	29.3	21	22.6
+	0	0.0	0	0.0
-	1	0.6	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Creatinine (umol/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	182	100.0	93	100.0
L	47	25.8	22	23.7
H	0	0.0	0	0.0
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Eosinophils (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	179	98.4	92	98.9
L	0	0.0	0	0.0
H	49	27.4	23	25.0
+	9	5.0	4	4.3
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Globulin (g/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	182	100.0	93	100.0
L	6	3.3	5	5.4
H	5	2.7	3	3.2
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Hematocrit (%)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	177	97.3	92	98.9
L	17	9.6	11	12.0
H	3	1.7	2	2.2
+	0	0.0	0	0.0
-	3	1.7	2	2.2

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Hemoglobin (g/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	179	98.4	93	100.0
L	18	10.1	11	11.8
H	7	3.9	6	6.5
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Lymphocytes (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	179	98.4	92	98.9
L	18	10.1	9	9.8
H	18	10.1	15	16.3
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Monocytes (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	179	98.4	92	98.9
L	6	3.4	4	4.3
H	11	6.1	8	8.7
+	0	0.0	1	1.1
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Neutrophil Bands (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	5	2.7	2	2.2
L	4	80.0	2	100.0
H	0	0.0	0	0.0
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Platelets (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	179	98.4	93	100.0
L	1	0.6	3	3.2
H	3	1.7	2	2.2
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Segmented Neutrophils (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	155	85.2	81	87.1
L	2	1.3	1	1.2
H	25	16.1	11	13.6
+	0	0.0	0	0.0
-	0	0.0	1	1.2

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Total Bilirubin (umol/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	182	100.0	93	100.0
L	4	2.2	2	2.2
H	8	4.4	6	6.5
+	0	0.0	1	1.1
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Total Neutrophils (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	26	14.3	13	14.0
L	8	30.8	3	23.1
H	2	7.7	1	7.7
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Total Protein (g/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	182	100.0	93	100.0
L	3	1.6	1	1.1
H	2	1.1	0	0.0
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Urine Red Blood Cells/HPF (alpha)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	22	12.1	11	11.8
L	0	0.0	0	0.0
H	2	9.1	3	27.3
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = Urine White Blood Cells/HPF (alpha)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	22	12.1	11	11.8
L	0	0.0	0	0.0
H	3	13.6	1	9.1
+	0	0.0	0	0.0
-	0	0.0	0	0.0

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

Table 15.3b
Number (%) of Patients with Quantitative Laboratory Values Flagged as outside Normal and Clinical Concern Ranges Using SB Lab Units
Intention to Treat Population

Parameter = White Blood Cell Count (10^9/l)

	Treatment			
	Paroxetine		Placebo	
	N	%	N	%
Number of Patients	182		93	
Number of Patients with Assessment	179	98.4	93	100.0
L	24	13.4	9	9.7
H	5	2.8	2	2.2
+	1	0.6	0	0.0
-	1	0.6	1	1.1

H: HIGHER THAN REFERENCE RANGE, +: HIGH CLINICAL CONCERN
L: LOWER THAN REFERENCE RANGE, -: LOW CLINICAL CONCERN

NB. Any Visit dates > 14 days after last dose of study medication are omitted from this table

DISK$STATS4:[STATS_GROUP.SBBRL29060.377.CODE]T153B.SAS (31JUL98 14:53)

13 Source Tables: Safety Narratives

Table 16 Safety Narratives for patients who experienced non-fatal SAEs 000430

Confidential

SmithKline Beecham

Paroxetine

BRL-029060

Patient Narratives for Serious Non-fatal Adverse Experiences

377

Table No. 16

Safety Narratives

SB Document Number: BRL-029060/RSD-100VJ4/1

PID 377.005.00231

Primary Adverse Experience:	Emotional Lability/Suicide Attempt (Overdose on Study Medication and Tranxene {Intentional}
Other Adverse Experience:	Sedation Appendicitis

Demography:	**Age-**14 years	Date of Birth-02-Jan-81	**Sex-**Female
	Height-168.0 cm	**Weight-**57.0 kgRace -	**Race-**White

Country:	Belgium
Medical History:	Pain {Post-Operative}
Study Diagnosis:	Depression/Affective Disorders
Study Drug:	Placebo
Start Date:	14-Oct-95
Stop Date:	13 Nov 95

AE Remarks:

Case, reference number 1995012407-1 is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 14.

On 14 October 1995, the patient received her first treatment with study medication for unipolar major depression. Approximately thirty one days later, on 13 November 1995, the patient attempted suicide by taking an overdose of study medication with Tranxene (clorazepate) (28 x 20mg study medication and 7 capsules clorazepate, dose not specified). The patient was withdrawn from the study the same day due to protocol violation. The next day, 14 November 1995, the patient felt sedated. She was not hospitalised and was reported to have recovered from the sedation the same day.

Approximately fourteen days post therapy, on 27 November 1995, the patient was diagnosed to be suffering from appendicitis. Appendectomy was performed on 4 December 1995. She was treated with Efferalgan (paracetamol) for two days for post operative pain. The patient was reported to have recovered on 4 December 1995.

The patient subsequently changed address and was lost to follow up.

The investigator considers that the suicide attempt is possibly related and the sedation and appendiditis are unrelated to treatment with study medication.

Concomitant Drugs:	Start	End
Tranxene	13-Nov-1995	13-Nov-1995

Seroxat	15-Nov-1995	
Treatment Drugs:	Start	End
Efferalgan (Paracetamol)	05-Dec-1995	06-Dec-1995

Lab Remarks:

The serum received was on clot. Therefore, the results for calcium, LDH, alkaline phophatase and creatinine may be falsely elevated. Results for ASAT (SGOT) and ALAT (SGPT) may be questionable.

Lab Test Code/Name	**Date**	**Lab Value**	**Units**	**Normal Range**
Alat	27-Nov-1995	3	U/L	0 - 48 U/L
Alkaline Phosphatase	27-Nov-1995	76	U/L	44 - 280 U/L (FEMA)
Asat	27-Nov-1995	13	U/L	0 - 41 U/L
Basophils	27-Nov-1995	.3	%	0 - 2.0 %
Lab Test Code/Name	Date	Lab Value	Units	Normal Range
Calcium	27-Nov-1995	2.34	MMOL/L	2.08 - 2.52 MMOL/L
Creatinine	27-Nov-1995	80	UMOL/L	70 - 130 UMOL/L
Eosinophils	27-Nov-1995	2.2	%	0 - 10.0 %
Hematocrit	27-Nov-1995	.37	UNK	0.36 - 0.49
Hemoglobin	27-Nov-1995	7.9	MMOL/L	7.45 - 9.95
Lymphocytes	27-Nov-1995	28.6	%	21.0 - 51.0 %
Monocytes	27-Nov-1995	5	%	0.0 - 10.0
Platelets	27-Nov-1995	319	UNK	130 - 400
Total Albumin	27-Nov-1995	42	G/L	31 - 53 G/L
Total Bilirubin	27-Nov-1995	18	UMOL/L	70 - 130 UMOL/L
Total Globulin	27-Nov-1995	33	G/L	23 -41 G/L
Total Neutrophils	27-Nov-1995	63.9	%	30.0 - 70.0 %
Total Protein	27-Nov-1995	75	G/L	62 - 88 G/L
White Blood Cell Count	27-Nov-1995	6.3	UNK	4.5 - 13.0

Medical History Remarks:

Reporter Attribution for Primary AE:	Possibly Related/Suspected
Reason for Seriousness:	Overdose

PID 377.005.00232

Primary Adverse Experience: Myoclonus/Repetitive Involuntary Muscle Contraction {Neck and Arms}

Demography: **Age**-15 years Date of Birth-31-Jul-1980 **Sex**-Male
Height-170.0 cm **Weight**-57.0 kg **Race**-White

Country: Belgium

Medical History: Asthma

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine
Start Date: 07-Dec-95
Stop Date: 24-Feb-96

AE Remarks:

Case, reference number 1996003240-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a male aged 15. At the time of the event, the patient had asthma and was taking Ventolin (salbutamol) starting in May 1985.
On 7 December 1995, the patient received his first treatment with study medication for major depression. Approximately 78 days later, on 22 February 1996, the patient developed repetitive involuntary muscle contractions in the neck and arms. The patient was hospitalized for observation. The events resolved the following day without treatment. The patient elected to discontinue study medication on 24 February 1996 due to the events of 22 February.

The investigator considers that the event is possibly related to treatment with study medication.

Concomitant Drugs:	Start	End
Ventolin (Salbutamol)	-May-1985	

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Possibly Related/Suspected

Reason for Seriousness: Hospitalization Required

PID 377.005.00234

Primary Adverse Experience: Depression/Worsening Depression

Demography:	**Age**-15 years	Date of Birth-09-Jul-1980	**Sex**-Female
	Height-162.0 cm	**Weight**-57.0 kg	**Race**-White

Country: Belgium

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date	Stop Date
04-Apr-1996	18-Apr-1996
19-Apr-1996	24-Apr-1996
25-Apr-1996	03-May-1996

AE Remarks:

Case, reference number 1996006421-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 15.On 4 April 1996, the patient received her first treatment with study medication for depression. Approximately thirty days later, on 3 May 1996, the patient developed worsening depression. Study medication was discontinued and the patient was treated with Floxyfral (fluvoxamine). The patient was hospitalised three days later on 6 May 1998.

The patient was reported to have recovered on 16 May 1996.

The investigator considers that the event is unrelated to treatment with study medication.

Concomitant Drugs:	Start	End
Treatment Drugs:	Start	End
Floxyfral (Fluvoxamine)	03-May-1996	03-May-1996
Floxyfral (Fluvoxamine)	04-May-1996	05-May-1996
Floxyfral (Fluvoxamine)	06-May-1996	06-May-1996
Floxyfral (Fluvoxamine)	07-May-1996	14-Jul-1996
Floxyfral (Fluvoxamine	15-Jul-1996	13-Aug-1996
Floxyfral (Fluvoxamine)	14-Aug-1996	26-Feb-1997

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason for Seriousness: Disabling, Incapacitating, Hospitalization Required

PID 377.005.09286

Primary Adverse Experience: Depression/Worsening of Depression

Demography:	**Age**-13 years	Date of Birth-02-Jun-1983	**Sex**-Female
	Height-166.0 cm	**Weight**-48.0 kg	**Race**-White

Country: Belgium

Medical History: Anorexia Nervosa

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo Run-In
Start Date 26-Nov-1996
Stop Date 09-Dec-1996

AE Remarks:

Case, reference number 1997001355-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 13. At the time of the event, the patient had anorexia nervosa.

On 26 November 1996, this patient with major depression received her first treatment with placebo run-in. Approximately fourteen days later,on 9 December 1996, the patient developed worsening depression and was hospitalised. The patient was treated for the event with Seroxat (paroxetine) and placebo run-in was discontinued on 9 December 1996. The patient was reported to have recovered on 20 December 1996.

The investigator considers that the event is unrelated to treatment with placebo run-in and is possibly associated with the patient's anorexia nervosa.

Concomitant Drugs:	Start	End

Treatment Drugs:	Start	End
Seroxat	10-Dec-1996	

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related
Reason for Seriousness: Disabling, Incapacitating, Hospitalization Required

PID 377.009.00225

Primary Adverse Experience: Emotional Lability/Suicide Attempt

Demography: **Age**-18 years Date of Birth-02-Jun-1979 **Sex**-Female
Height- Weight- Race-

Country: Belgium

Medical History: Asthma, Contraception, Suicide Attempt (Overdose)

Study Diagnosis: Depression/Affective Disorders
Study Drug: Paroxetine
Study Start: 07-Mar-1997
Study Stop: 25-May-1997

AE Remarks:

Case, reference number 1997013173-1,is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 18. The patient's past medical history included suicide attempt by overdose two years prior to entry in study, and at the time of the event, the patient had asthma and was taking Becotide (beclomethasone) starting January 1991 and Femodene (gestodene) starting in July 1996.

On 7 March 1997, the patient received her first treatment with study medication for depression. Approximately eighty days later, on 25 May 1997, the patient attempted suicide using an overdose of study medication. The patient was hospitalised but was given no treatment medication as there were no signs or symptoms associated with the overdose.

Study medication was discontinued on 25 May 1997. The patient was reported to have recovered on 25 May 1997.

The investigator considers that the event is unrelated to treatment with study medication.

Concomitant Drugs:	Start	End
Becotide (Beclomethasone)	01-Jan-1991	
Femodene (Gestodene)	01-Jul-1996	

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related
Reason for Seriousness: Hospitalization Required, Overdose

PID 377.010.00068

Primary Adverse Experience: Emotional Lability/Overdose of Alprazolam {Deliberate/Asymptomatic}

Demography: **Age**-15 years Date of Birth-05-Nov-1981 **Sex**-Female
Height- **Weight**-52.0 kg **Race**-White

Country: Italy

Medical History: Insomnia

Study Diagnosis: Depression/Affective Disorders
Study Drug: Invest.Broke Blind-Placebo

Start Date:	Stop Date:
25-Apr-1996	21-May-1996
29-Feb-1996	13-Mar-1996
14-Mar-1996	24-Apr-1996

AE Remarks:

Case, reference number 1996007005-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 15.
On 29 February 1996, the patient received her first treatment with study medication for unipolar major depression. Approximately eighty three days later on 21 May 1996, the patient took an intentional overdose of the benzodiazipine, Xanax (alprazolam) (21 tablets). The following day she appeared more tired than usual and, after telling her mother what she had done, was taken to hospital. No treatment was required and the patient was discharged the same day. The investigator broke the blind and it was revealed that the patient was receiving placebo. Study medication was discontinued on 21 May 1996. The patient was reported to have recovered on 22 May 1996. The patient was admitted to the psychiatric unit of another hospital on 24 May 1996.

The investigator considers that the event is unrelated to treatment with study medication.

Concomitant Drugs:	Start	End
Xanax (Alprazolam)	21-May-1996	21-May-1996

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related
Reason For Seriousness: Hospitalization Required, Potentially Life Threatening

PID 377.011.00061

Primary Adverse Experience: Emotional Lability/Overdose (Intentional)

Demography: **Age**-17 years Date of Birth-01-May-1978 **Sex**-Female
Height-150.0 cm **Weight**-43.0 kg **Race**-White

Country: Italy

Medical History: Proctitis

Study Diagnosis: Depression/Affective Disorders

Study Drug: Nvest.Broke Blind-29060 : 40 mg

Start Date:	Stop Date:
07-Nov-1995	13-Nov-1995
13-Nov-1995	20-Nov-1995
20-Nov-1995	20-Jan-1996

AE Remarks:

Case, reference number 1996000694-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 17. The following drugs are known to have been taken by the patient prior to the event : Dipentum (olsalazina) from 10 October 1995 to 21 November 1995 for proctitis.

On 7 November 1995, the patient received her first treatment with study medication for depression. Approximately seventy five days later, on 20 January 1996, the patient took an intentional overdose of 28 tablets of study medication. The patient stated that she took the overdose because she felt nervous and was not attempting suicide. The investigator broke the blind and it was revealed that the patient was receiving paroxetine. The patient was hospitalised and a gastrolavage was performed. She was treated for the event with magnesium sulphate and activated charcoal and study medication was discontinued on 20 January 1996. The only sign of the overdose was a mild tremor of the upper extremities. The patient was reported to have recovered on 21 January 1996

The investigator considers that the event is possibly related to treatment with study medication.

Concomitant Drugs:	Start	End
Dipentum (Olsalazina Sod.)	10-Oct-1995	21-Nov-1995

Treatment Drugs:	Start	End
Mgso4 (Magnesium Sulphate)	20-Jan-1996	21-Jan-1996
Activated Charcoal	20-Jan-1996	21-Jan-1996

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range
ALAT	21-Jan-1996	39	Ui/L	7-56
ALAT	01-Feb-1996	12	U/L	

Alkaline Phosphatase	21-Jan-1996	63	Ui/L	38-126
Alkaline Phosphatase	01-Feb-1996	45	U/L	22 - 130
ASAT	21-Jan-1996	30	Ui/L	5-46
ASAT	01-Feb-1996	14	U/L	
Creatinine	21-Jan-	7	Mg/Dl	.7-1.5
Creatinine	01-Feb-1996	70	Umol/L	70 - 130
Glucose	21-Jan-1996	74	Mg/Dl	65-110
Hematocrit	21-Jan-1996	6.49	10^3/Ul	4-10
Hematocrit	01-Feb-1996	.4	U	
Total Bilirubin	21-Jan-1996	.74	Mg/Dl	.2-1.3
Total Bilirubin	01-Feb-1996	12	Umol/L	6 - 22

Medical History Remarks:

Reporter Attribution For Primary AE: Possibly Related/Suspected

Reason For Seriousness: Hospitalization Required, Overdose

PID 377.023.00170

Primary Adverse Experience: Alcohol Abuse/Alcohol Abuse

Other Adverse Experience: Aggression, Amnesia

Demography: **Age**-16 years Date of Birth-19-Dec-1979 **Sex**-Male
Height-176.0 cm **Weight**-55.0 kg **Race**-White

Country: Netherlands

Medical History: Aggressive Reaction, Alcohol Abuse, Amnesia

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: 20-Mar-1996

Stop Date: 27-Apr-1996

AE Remarks:

Case, reference number 1996007340-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a male aged 16. The patient's past medical history included minor episodes of alcohol abuse, aggression and amnesia.

On 20 March 1996, the patient received his first treatment with study medication for adolescent major depression. Approximately forty one days later, on 29 April 1996 and two days following the last dose, the patient had an aggressive outburst following alcohol abuse, in which he attacked his mother and ruined furniture. His mother called for the police, who put him in a cell for one night. After psychiatric evaluation the patient was released the next morning. The patient and his mother requested that he be hospitalised voluntarily for a "time-out", because they were both anxious that more aggressive assaults would follow. He was admitted to hospital on 2 May 1996. He was discharged after a week on 8 May 1996, whereafter further out-patient treatment was offered. Study medication was discontinued on 27 April 1996. The patient was reported to have recovered on 30 April 1996

The investigator considers that the event is unrelated to treatment with study medication.

When the patient was screened for the study he did not report any episodes of alcohol abuse with accompanied aggression. It is estimated that minor events have occurred in the past, but this was the most severe.

Concomitant Drugs: Start End

Treatment Drugs: Start End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

When the patient was screened for this study he did not report any episodes of alcohol abuse with accompanied aggression. It is estimated that minor events of this type have occurred in the past, but this was the most severe event.

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason For Seriousness: Hospitalization Required

PID 377.029.00006

Primary Adverse Experience: Infection/Tick Bite Fever

Other Adverse Experience: Pharyngitis, Fever

Demography: **Age**-14 years Date of Birth-22-Oct-1981 **Sex**-Male
Height-167.0 cm Weight- **Race**-White

Country: South Africa

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine
Start Date: 25-Aug-1995
Stop Date: 01-Dec-1995

AE Remarks:

Case, reference number 1996001022-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a male aged 14. On 25 August 1995, the patient received his first treatment with study medication for depression. Approximately sixty eight days later, on 31 October 1995, the patient developed pharyngitis and fever. He was treated with Petercillin (ampicillin) and Disprin (aspirin). On 2 November 1995, he was diagnosed to be suffering from tick bite fever and was hospitalised. He was treated for the event with Keflex (cephalexin). Study medication was not discontinued. The patient was reported to have recovered on 9 November 1995.

He was discharged from hospital with continuing treatment of cephalexin and Difenac (diclofenac).

The investigator considers that the event is unrelated to treatment with study medication

Concomitant Drugs:	Start	End
Treatment Drugs:	**Start**	**End**
Petercillin (Ampicillin)	31-Oct-1995	02-Nov-1995
Keflex (Cephalexin)	03-Nov-1995	09-Nov-1995
Difenac (Diclofenac)	06-Nov-1995	08-Nov-1995
Disprin (Aspirin)	31-Oct-1995	02-Nov-1995

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason For Seriousness: Hospitalization Required

PID 377.029.00015

Primary Adverse Experience: Convulsion/Tonic Clonic Convulsion

Demography: **Age-**13 years Date of Birth-09-Jan-1983 **Sex-**Male
Height-154.0 cm **Weight-**43.0 kg **Race-**White

Country: South Africa

Medical History: Headache

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: 21-Feb-1996

Stop Date: 27-Apr-1996

AE Remarks:

Case, reference number 1996005745-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a male aged 13.

On 21 February 1996, the patient received his first treatment with study medication for depression. Approximately sixty seven days later on 27 April 1996, the patient experienced an episode of loss of consciousness associated with tonic clonic convulsions. This episode lasted approximately 5 minutes. The patient was taken to hospital casualty where a diagnosis of a drug side effect was made. Study medication was discontinued on 27 April 1996. The patient was given Voltaren (diclofenac) for headache. Another episode occurred on 29 April 1996, two days after receiving the last dose of study medication, and lasted approximately 10 minutes. The event resolved spontaneously without medication. The patient's consciousness was clear with no confusion or neurological signs present. On 30 April 1996, two further convulsive episodes occurred. The patient was admitted to the neurology department for observation and further investigations. Atypical clonic convulsions were observed while he was in the ward. Corneal reflexes were present during the attack. Immediately after the attack his consciousness was clear. No urinary incontinence was noted. Electrocardiogram and CT brain scans were performed. No abnormalities were noted. The investigator made a final diagnosis of pseudoseizures. The patient was reported to have recovered.

The investigator now considers that these events are unrelated to treatment with study medication.

The following facts are also relevant in this case : the patient's father suffers from epilepsy following removal of a brain tumour.

Concomitant Drugs:	Start	End
Voltaren	27-Apr-1996	27-Apr-1996
Paracetamol	29-Apr-1996	

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

The patient’s father suffers from epilepsy following removal of a brain tumour.

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason for Seriousness: Disabling, Incapacitating, Serious per SmithKline Beecham Policy

PID 377.029.00024

Primary Adverse Experience: Emotional Lability/Suicide Attempt

Other Adverse Experience: Self-Damaging Acts, Upper Respiratory Tract Infection, Headache, Nausea, Tiredness, Diarrhoea

Demography: **Age**-17 years Date of Birth-15-Mar-1979 **Sex**-Female
Height-164.5 cm **Weight**-60.0 kg **Race**-White

Country: South Africa

Medical History: Cold, Decongestant, Diarrhoea, Headache, Kidney Problem, Knee Problem Due to Sport, Non-Steroidal Anti-Inflammatory, Sinusitus

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo

Start Date: 06-Mar-1996

Stop Date: 01-May-1996

AE Remarks:

Case, reference number 1996005251-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 17. The patient's past medical history included a kidney problem (not specified) and knee problem due to sport, and at the time of the event, the patient had sinusitus, headache and diarrhoea and was taking clarityne, mefanamic acid and Kantrexil (kanamycin; dimevamide; pectin; bismuth; attapulgite). The following drugs are also known to have been taken by the patient prior to the event : paracetamol and aspirin.

On 6 March 1996, the patient received her first treatment with study medication for depression. Approximately thirty days later, on 4 April 1996, the patient attempted suicide using a pair of scissors, after visiting her mother and being molested by her brother. She stopped when her mother came into the room. The wound was not serious. She has also tried to burn herself with a cigarette lighter. These self-damaging acts were ongoing at the time of reporting. Study medication was discontinued on 1 May 1996. The patient was withdrawn from the study and referred for psychotherapy.

The investigator considers that these events are unrelated to treatment with study medication. In their opinion, other possible etiological factors include molestation by her brother.

Concomitant Drugs	Start	End
Clarityne	29-Mar-1996	03-Apr-1996
Mefalgic (Mefanamic Acid)	02-Apr-1996	07-Apr-1996
Kantrexil (Kanamycin, Dimevamide, Pectin, Bismuth, Attapulgite)	02-Apr-1996	03-Apr-1996
Feldene (Piroxicam)	16-Apr-1996	24-Apr-1996

Solphyllex (Theiphylline, Etophylline, Diphenylpyraline, Citrate)	16-Apr-1996	24-Apr-1996
Panadol (Paracetamol)	11-Mar-1996	11-Mar-1996
Panadol (Paracetamol)	23-Mar-1996	23-Mar-1996
Disprin (Aspirin)	23-Mar-1996	23-Mar-1996

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

The patient has a medical history of a kidney problem and a knee problem due to sport.

Reporter Attribution For Primary AE: Unrelated/Not Related

Reason For Seriousness: Disabling, Incapacitating, Significant Hazard

PID 377.030.00181

Primary Adverse Experience: Emotional Lability/Suicidal Risk

Other Adverse Experience: Worsening Depression, Hypertension

Demography: **Age**-18 years Date Of Birth-15-Feb-1978 **Sex**-Female
Height-165.0 cm **Weight**-53.8 kg **Race**-White

Country: Canada

Medical History: Drug Abuse, Headaches, High Blood Pressure, Prophylaxis Against Measles

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date	Stop Date
13-Feb-1996	27-Feb-1996
28-Feb-1996	04-Mar-1996
05-Mar-1996	09-Apr-1996

AE Remarks:

Case, Reference Number 1996005329-1, is a clinical trial report from Study Number 29060 377, which is a blinded study, referring to a female aged 18. The patient's medical history included drug abuse, high blood pressure and headaches. The following drugs are known to have been taken by the patient prior to the event: paracetamol in February 1996 and measles vaccine on 9 April 1996.

On 13 February 1996, the patient received her first treatment with study medication for depression. approximately fifty seven days later, on 9 April 1996, the patient attended the clinic and her condition had worsened. She was noted to be hostile, hopeless and helpless and had written suicide notes. In light of this worsening depression, suicidal risk and possible drug abuse, study medication was discontinued on 9 April 1996 and the patient was hospitalised. The patient was treated for the event with lorazepam, fluvoxamine, sertraline and trazadone. The patient was reported to have recovered on 3 May 1996.

The investigator considers that the event is unrelated to treatment with study medication.

Concomitant Drugs:	Start	End
Measle Vaccine	09-Apr-1996	09-Apr-1996
Tylenol (Paracetamol)	06-Feb-1996	10-Feb-1996

Treatment Drugs:	Start	End
Lorazepam	09-Apr-1996	24-Apr-1996
Fluvoxamine	10-Apr-1996	11-Apr-1996

Sertraline	11-Apr-1996	
Trazadone	10-Apr-1996	29-Apr-1996

Lab Remarks:

Blood Pressure (02-Apr-96) 150/100 Supine, 140/95 Standing.
Re. Drug Abuse - Results will be provided when available.

Lab Test Code/Name	Date	Lab Value	Units	Normal Range
Hemoglobin	11-Apr-1996	139	G/L	115 - 160
Leucocytes	11-Apr-1996	3.9	10^9/L	4 - 10
Platelets	11-Apr-1996	249	10^9/L	150 - 400
Red Blood Cell Count	11-Apr-1996	4.58	10^12l	

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason for Seriousness: Hospitalization Required

PID 377.040.00298

Primary Adverse Experience: Depression/Deterioration Depression

Demography: **Age**-17 years Date of Birth-23-Mar-1979 **Sex**-Female
Height-171.0 cm **Weight**-66.0 kg **Race**-White

Country: Belgium

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: 03-Dec-1996

Stop Date: 16-Dec-1996

AE Remarks:

Case, reference number 1996018164-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 17.

On 3 December 1996, the patient received her first treatment with study medication for major depression. Approximately fourteen days later, on 16 December 1996, the patient developed deterioration of her depression with suicidal tendency and was hospitalised. The patient was treated for the event with Effexor (venlafaxine hydrochloride) and study medication was discontinued on 16 December 1996. The patient was reported to have recovered on 6 January 1997.

The investigator considers that the event is unrelated to treatment with study medication.

The following facts are also relevant in this case: the patient had a fight with her boyfriend on 14 December 1996, which was thought by the investigator to have
possibly caused psychogenic decompensation, resulting in deterioration of her
condition.

Concomitant Drugs:	Start	End

Treatment Drugs:	Start	End
Effexor (Venlafaxine Hydrochloride)	25-Sep-1997	01-Apr-1998

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range
Hemoglobin	17-Dec-1996	8.65	Mmol/L	7.45 - 9.95
Platelets	17-Dec-1996	173	Gi/L	130 - 400
Segmented Neutrophils	17-Dec-1996	70.9	%	30 - 70
White Blood Cell Count	17-Dec-1996	6.9	Gi/L	4.5 - 13

Medical History Remarks:

Reporter Attribution for Primary AE:	Unrelated/Not Related
Reason for Seriousness:	Hospitalization Required

PID 377.041.00289

Primary Adverse Experience: Kidney Pain/Renal Colic

Demography: **Age**-18 years Date of Birth-28-Sep-1978 **Sex -** Female
Height-164.0 cm **Weight**-81.0 kg **Race**-Oriental

Country: Belgium

Medical History: Appendectomy, Cough, Fatigue, Hypotension, Infectious Mononucleosis, Muscle Pain

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date:	Stop Date:
17-Oct-1996	15-Jan-1997
07-Nov-1996	13-Nov-1996
14-Nov-1996	15-Jan-1997

AE Remarks:

Case, reference number 1997002532-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 18. The patient's past medical history included appendectomy, hypotension, cough, fatigue and muscle pain, and at the time of the event, the patient had infectious mononucleosis and was taking Defatyl (levocarnitine; magnesium aspartate) and Synergum (nutritional supplement) . The following drugs are also known to have been taken by the patient prior to the event: Bronchosedal (codeine phosphate; sodium benzoate; aconite tincture; cherry-laurel).

On 17 October 1996, the patient received her first treatment with study medication for depression. Approximately eighty nine days later, on 12 January 1997, the patient developed renal colic and was hospitalised. The patient was not treated for the event but study medication was interrupted. The patient was reported to have recovered on 13 January 1997.

The investigator considers that the event is probably unrelated to treatment with study medication.

Concomitant Drugs	Start	End
Defatyl	29-Oct-1996	
Synergum (Nutritional Supplement)	29-Oct-1996	
Clamoxyl (Amoxicillin)	22-Oct-1996	01-Nov-1996
Regulton (Amezinium Methylsulphate)	21-Oct-1996	30-Oct-1996
Rhinofebral (Paracetamol, Chlorpheniramine Maleate Ascorbic Acid)	21-Oct-1996	09-Nov-1996
Bronchosedal	20-Dec-1996	06-Jan-1997
Perdolan	29-Oct-1996	04-Nov-1996

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Probably Unrelated/Unlikely

Reason for Seriousness: Disabling, Incapacitating, Hospitalization Required

PID 377.041.00290

Primary Adverse Experience: Anxiety/Hospitalisation Due To Degradation Of Family Life (Observation){Unable To Cope}

Demography: **Age**-15 years | Date of Birth-20-Feb-1981 | **Sex**-Female
Height-140.0 cm | **Weight**-35.0 kg | **Race**-White

Country: Belgium

Medical History: Acne, Infectious Mononucleosis, Measles, Pruritus

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date:	Stop Date:
17-Oct-1996	20-Oct-1996
31-Oct-1996	20-Jan-1997

AE Remarks:

Case, reference number 1997001337-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 15.

The patient's past medical history included measles and infectious mononucleosis, and at the time of the event, the patient had acne and pruritus and was taking minocycline and doxepin starting in November 1996. On 17 October 1996, the patient received her first treatment with study medication for depression. Approximately seventy four days later, on 8 January 1997, the patient was hospitalised for observation due to degradation of family life. No action was taken with respect to study medication. The patient was reported to have recovered on 23 April 1997.

The investigator considers that the event is unrelated to treatment with study medication.

Concomitant Drugs:	Start	End
Minocin (Minocycline)	26-Nov-1996	
Sinequan (Doxepin	26-Nov-1996	

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:
Measles.

Infectious mononucleosis 1994.

Reporter Attribution for Primary AE:	Unrelated/Not Related
Reason for Seriousness:	Hospitalization Required

PID 377.041.00292

Primary Adverse Experience: Hysteria/Fit of Hysterics

Demography: **Age**-15 years Date of Birth-03-Apr-1982 **Sex**-Female
Height-163.0 cm **Weight**-40.0 kg **Race**-White

Country: Belgium

Medical History: Anxiety

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine
Start Date: 01-May-1997
Stop Date: 14-May-1997

AE Remarks:

Case, reference number 1997013996-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 15. The patient's medical history included anxiety. On 1 May 1997, the patient received her first treatment with study medication for depression.

Approximately nine days later, on 9 May 1997, the patient was hospitalised due to a fit of hysterics. Study medication was discontinued on 14 May 1997. The patient was reported to have recovered on 9 May 1997, but was still hospitalised at the time of reporting.

The investigator considers that the event is unrelated to treatment with study medication.

Concomitant Drugs:	Start	End
Temesta (Lorazepam)	12-May-1997	13-May-1997

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason For Seriousness: Hospitalization Required

PID 377.041.00294

Primary Adverse Experience: Emotional Lability/Overdose (Tentative Overdose) Equals Suicide Attempt

Demography: Age-14 years | Date of Birth-13-Sep-1983 | **Sex-**Female
Height-158.0 cm | **Weight-**60.0 kg | **Race-**White

Country: Belgium

Medical History: Throat Ache

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo

Start Date: 18-Dec-1997

Stop Date: 24-Mar-1998

AE Remarks:

Case, reference number 1998008002-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 14. The patient had taken Panadol (paracetamol) prior to the event, in February 1998, for a sore throat.

On 18 December 1997, the patient received her first treatment with study medication for depression. Approximately eighty seven days later, on 14 March 1998, the patient attempted suicide by the ingestion of paracetamol tablets (20 x 500mg) and was hospitalised. The patient was treated for the event with activated charcoal and study medication was discontinued on 24 March 1998 at visit 10. The patient was reported to have recovered on 14 March 1998, but at the time of reporting, she remained hospitalised.

The investigator considers that the event is possibly related to treatment with study medication. The reason for this causality is that the patient had just started the down titration phase of the study and the investigator considers that the event could have been lack of efficacy due to diminuation of dosage.

Concomitant Drugs:	Start	End
Dafalgan (Paracetamol)	14-Mar-1998	14-Mar-1998
Panadol	16-Feb-1998	20-Feb-1998

Treatment Drugs:	Start	End
Carbon (Acivated Charcoal)	14-Mar-1998	14-Mar-1998

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE:	Possibly Related/Suspected
Reason For Seriousness:	Hospitalization Required, Overdose

PID 377.042.00310

Primary Adverse Experience: Emotional Lability/Parasuicide

Demography:	**Age-**15 years	Date of Birth-31-Mar-1981	**Sex-**Female
	Height- 171.0 cm	**Weight-**96.0 kg	**Race-**Other

Country: South Africa

Medical History: Cyst Removed from Left Side of Neck, Toothache

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo Run-In

Start Date: 12-Nov-1996

Stop Date: 10-Dec-1996

AE Remarks:

Case, reference number 1996017816-1, is a clinical trial report from study number 29060/377, which is a blinded study, referring to a female aged 15.

The patient's past medical history included having a cyst removed from the side of her neck, and at the time of the event, the patient was taking paracetamol for toothache.

On 12 November 1996, the patient started taking 29060 (placebo run-in) for depression. Approximately twenty four days later on 5 December 1996, the patient impulsively slit her wrists following an altercation with her mother. The wounds were superficial and were not stitched.

The patient was withdrawn from the study on 10 December 1996, before any active medication was received, because of the poor response by the patient, the parasuicide and the risk of further attempts.

The investigator considered that the event was possibly related to the treatment medication.

Concomitant Drugs:	Start	End
Panado (Paracetamol)	25-Oct-1996	

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE:	Possibly Related/Suspected
Reason For Seriousness:	Suicide Attempt

PID 377.042.00315

Primary Adverse Experience: Anxiety/Anxiety

Other Adverse Experience: Agitation Overdose {Intentional Asymptomatic}

Demography: **Age**-15 years Date Of Birth-27-Feb-1981 **Sex -** Female
Height-154.0 cm **Weight**-61.0 kg **Race**-Other

Country: South Africa

Medical History: Appendicitis {Appendectomy}, Insomnia, Tonsilitis {Tonsillectomy}

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: **14-Jan-1997**

Stop Date: 27-Jan-1997

AE Remarks:

Case, reference number 1997002644-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 15. The patient's past medical history included appendectomy and tonsillectomy, and at the time of the event, the patient was taking flunitrazepam for insomnia.

On 14 January 1997, the patient received her first treatment with study medication for depression. Approximately eight days later, on 21 January 1997, the patient complained of increasing anxiety and agitiation since starting study medication. The patient found it very difficult in the class room situation where she felt uncomfortable and out of control. She maintained that she had never felt this way before and denied any situational component for her anxiety.

The investigator decided to see if the condition would settle spontaneously while on study medication (level 1). Until the 27 January 1997 the patient was seen on an alternative day basis. During this period there was no change in her level of agitation. The patient was incapacitated to the extent that she no longer attended classes. Study medication was discontinued on 27 January 1997. The patient presented on 31 January 1997 in a state of severe agitation and distress and was hospitalised. The patient told the investigator that on the previous night (30 January 1997) she had taken an overdose of 5 Panados, 1 tranquilizer (type unspecified) and 1 herbal hypnotic. No situational precipitant was elicited. The patient was reported to have recovered on 30 January 1997.

The investigator considers that the agitation and anxiety are definitely related and the overdose is possibly related to treatment with study medication.

Concomitant Drugs:	Start	End
Insom (Flunitrazepam)	15-Jan-1997	15-Jan-1997

Treatment Drugs:StartEnd

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

The patient’s past medical history included appendicitis (1989) and tonsillitis (1990).

Reporter Attribution for Primary AE: Definitely Related

Reason For Seriousness: Incapacitating, Hospitalization Required

PID 377.042.00317

Primary Adverse Experience: Unintended Pregnancy/Pregnancy

Demography: **Age-**18 years Date of Birth-05-Sep-1978 **Sex-**Female
Height- 156.0 cm **Weigh-**61.0 kg **Race-**Other

Country: South Africa

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine
Start Date: **26-Feb-1997**
Stop Date: **11-Mar-1997**

AE Remarks:

Case, reference number 1997006069-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 18.

On 26 February 1997, the patient received her first treatment with study medication for depression. Approximately fourteen days later on 11 March 1997, at visit 3, the patient mentioned that she had carried out a home pregnancy test which was positive. A further test perofrmed at the local laboratories on 12 March 1997, confirmed her pregnancy. Study medication was discontinued on 11 March 1997.

The patient gave birth to a baby boy on 19 October 1997. The delivery was reported to be normal and the baby's birth weight was 3.5kg. The patient was contacted on 2 February 1998 and the baby was reported to be healthy and progressing well.

The investigator considers that the event is unrelated to treatment with study medication.

Concomitant Drugs: Start End

Treatment Drugs: Start End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason for Seriousness:

PID 377.042.00554

Primary Adverse Experience:	Accidental Overdose/Overdose (Asymptomatic){Accidental}
Other Adverse Experience:	Impulsive Act

Demography:	**Age**-16 years **Height**-152.0 cm	Date Of Birth-18-May-1981 **Weight**-57.0 kg	**Sex**-Female **Race**-Other

Country:	South Africa
Medical History:	Epilepsy, Influenza, Meningitis, Tonsillectomy, Urinary Tract Infection
Study Diagnosis:	Depression/Affective Disorders
Study Drug:	Paroxetine
Start Date:	**13-Nov-1997**
Stop Date:	09-Mar-1998

AE Remarks:

Case, reference number 1998001955-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 16 years. The patient's past medical history included tonsillectomy, epilepsy, meningitis, urinary tract infection and influenza. The patient had received unspecified antibiotics from 10 to 14 January 1998.

On 13 November 1997, the patient received her first treatment with study medication for major unipolar depression. Approximately sixty nine days later, on 19 January 1998 at 16:00 hours, the patient took an overdose of six capsules of study medication. The overdose was considered an "impulsive act" and accidental. The patient was not hospitalised and reported no adverse reactions as a result of the overdose. Study medication was not discontinued. The most recent information received on 20 January 1998 reports that the patient has fully recovered.

The patient received her last dose of study medication on 09 March 1998.

The investigator considers that the event is unrelated to treatment with study medication. In their opinion, other possible etiological factors include the fact that the patient had an argument with her mother.

Concomitant Drugs	Start	End
Antibiotic	10-Jan-1998	14-Jan-1998
Antibiotic	23-Feb-1998	25-Feb-1998

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason For Seriousness: Overdose

PID 377.042.00555

Primary Adverse Experience: Decreased Appetite/Decreased Appetite

Other Adverse Experience: Agitation, Dizziness, Insomnia, Lability of Mood, Nausea

Demography:	Age-16 years	Date Of Birth-12-Aug-1981	**Sex-**Female
	Height-175.0 cm	**Weight-**54.5 kg	**Race-**White

Country: South Africa

Medical History: Acne, Panic Attacks, Whiplash

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: **13-Nov-1997**

Stop Date: 11-Dec-1997

AE Remarks:

Case, reference number 1997029491-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 16. The patient's past medical history included whiplash and panic attacks, and at the time of the event, the patient was taking lymecycline for acne and alprazolam for agitation.

On 13 November 1997, the patient received her first treatment with study medication for depression. Approximately thirteen days later, on 26 November 1997, the patient experienced decreased appetite, nausea, agitation, insomnia and dizziness. This was within seven days of study medication being increased to level 2. When study medication was increased to level 3, the conditions became more severe. Study medication was discontinued on 11 December 1997. At the time of reporting the events were all ongoing.

The investigator considers that these events are definitely related to treatment with study medication.

Concomitant Drugs:	Start	End
Tetralysal (Lymecycline)	01-Jun-1995	

Treatment Drugs:	Start	End
Xanor (Alprazolam)	01-Sep-1995	

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Panic attacks.

Reporter Attribution For Primary AE:	Definitely Related
Reason For Seriousness:	Disabling, Incapacitating, Significant Hazard, Contraindication

PID 377.042.00557

Primary Adverse Experience: Angioedema/Severe Facial Angioedema {Allergic}

Demography:	**Age**-17 years	Date of Birth-16-Aug-1980	**Sex**-Female
	Height-158.0 cm	**Weight**-46.5 kg	**Race**-Other

Country: South Africa

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo Run-In

Start Date: **05-Nov-1997**

Stop Date: 18-Nov-1997

AE Remarks:

Case, reference number 1997027548-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 17.

The patient received her placebo run-in treatment on 5 November 1997 for depression. On 18 November 1997, the patient maintained she was experiencing a pruritic rash following ingestion of the study medication. This concern was highlighted by the patient on 18 November 1997 at a baseline visit. She received her last dose of placebo run-in medication on 18 November 1997.

On 19 November 1997, the patient presented with acute allergic facial angioedema accompanied by swelling of the lips. The investigator diagnosed an 'acute allergic reaction' to the study placebo run-in medication. The patient was treated for the event with Fabahistin anti-histamine therapy. The patient refused to come into clinic on 20 November 1997 due to the swelling. Her mother reported that the swelling was still apparent but was gradually resolving. The patient recovered on 21 November 1997.

The investigator considered the event to be definitely related to treatment with placebo in the run-in phase of the study.

The patient did not receive active study medication.

Concomitant Drugs:	Start	End

Treatment Drugs:	Start	End
Fabahistin (Mebhydrolin Napadisylate)	19-Nov-1997	21-Nov-1997

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE:	Definitely Related
Reason For Seriousness:	Disabling, Incapacitating

PID 377.042.00561

Primary Adverse Experience: Vomiting/Vomiting

Other Adverse Experience: Nausea, Agitation, Tremor Blurring of Vision, Dry Mouth, Postural Hypotension

Demography: **Age**-14 years | Date Of Birth-05-Feb-1983 | **Sex**-Female
Height-166.0 cm | **Weight**-52.0 kg | **Race**-White

Country: South Africa

Medical History: Headache

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: **27-Nov-1997**

Stop Date: 30-Nov-1997

AE Remarks:

Case, reference number 1997028918-1, is a clinical study report from study number 29060 377, which is a blinded study, referring to a female aged 14. On 27 November 1997, the patient received her first treatment with study medication for major depression. Within 24 hours of receiving study medication, the patient experienced nausea, vomiting, agitation and tremor, dry mouth, blurring of vision and postural hypotension. Study medication was discontinued by the patient's parents on the 30 November 1997. The patient was reported to have recovered two days later on 2 December 1997.

The investigator considered that the nausea, vomiting, agitation and tremor were definitely related and the dry mouth, blurring of vision and postural hypotension possibly related to treatment with study medication. The investigator also noted that all events were debilitating, but the decision to discontinue study medication was confounded by the anxiety and concern of the patient's parents.

Concomitant Drugs:	Start	End
Myprodol (Ibuprofen; Paracetamol; Codeine Phosphate)28-Nov-1997	30-Nov-1997	

Treatment Drugs:	Start	End
Stementil (Prochlorperazine)	28-Nov-1997	01-Dec-1997

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE:	Definitely Related
Reason for Seriousness:	Significant Hazard, Contraindication, Side Effect or Precaution

PID 377.047.00619

Primary Adverse Experience: Emotional Lability/Overdose {Intentional}{Asymptomatic}

Demography: **Age**-18 years Date of Birth-05-Nov-1979 **Sex**-Female
Height-160.0 cm **Weight**-55.0 kg Race-White

Country: Belgium

Medical History: Headache, Nausea

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo Run-In

Start Date: **29-Jan-1998**

Stop Date: 06-May-1998

AE Remarks:

Case, reference number 1998002704-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 18. At the time of the event, the patient was taking Dalfagan and Perdolan for headache (starting 15 January 1998). The following drugs are also known to have been taken by the patient prior to the event :sulpiride for nausea in December 1997.
On 24 January 1997, during the placebo run-in and prior to study medication, the patient took an intentional overdose of bromazepam and valium. It was reported that this was a cry for help from the patient. She experienced no side effects as a result of the overdose. The patient continued in the study and received her first treatment with study medication for major depression on 29 January 1998.

The investigator considers that the event is unrelated to treatment with study medication. In their opinion, other possible etiological factors include the fact that the patient had problems at home and had recently had a fight with her boyfriend.

Concomitant Drugs	Start	End
Bromazepam	24-Jan-1998	24-Jan-1998
Valium (Diazepam)	24-Jan-1998	24-Jan-1998
Dogmatil {Sulpiride}	01-Dec-1997	24-Dec-1997
Dafalgan {Paracetamol}	15-Jan-1998	28-Jan-1998
Perdolan {Acetylsalicylate; Carbromal; Codeine Phosphate; Paracetamol}	15-Jan-1998	28-Jan-1998

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason For Seriousness: Overdose

PID 377.049.00458

Primary Adverse Experience: Nervousness/Irritability

Demography: **Age**-18 years Date of Birth-09-Aug-1978 **Sex**-Female
Height-164.0 cm **Weight**-59.0 kg **Race**-Hispanic

Country: Mexico

Medical History: Pharyngitis, Vascular Headache

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo

Start Date: **01-Apr-1997**

Stop Date: 25-Apr-1997

AE Remarks:

Case, reference number 1997015220-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 18. At the time of the event, the patient was taking ampicillin for pharyngitis. The patient had also taken acetylsalicylic acid for a vascular headache on 29 and 30 March 1997.

On 1 April 1997, the patient received her first treatment with study medication for major depression. Approximately twenty five days later, on 25 April 1997, after a family problem, she had an acute and stormy episode of irritability. She destroyed items at home, and refused to continue medication which she thought was not helping her. She did not return to the site for a visit. Two weeks later, on 9 May 1997, she was hospitalized for another episode of irritability and aggressiveness against family members. As she refused further medication, she remained hospitalised in an intensive psychotherapy program. Study medication was discontinued on 25 April 1997. The patient had not yet recovered at the time of reporting.

The investigator considers that the event is unrelated to treatment with study medication. In their opinion the irritability was associated with the patient's primary condition.

Concomitant Drugs	Start	End
Ampicillin	15-Apr-1997	25-Apr-1997
Acetylsalicylic Acid	29-Mar-1997	30-Mar-1997

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE:	Unrelated/Not Related
Reason For Seriousness:	Hospitalization Required

PID 377.049.00479

Primary Adverse Experience: Nervousness/Irritability

Other Adverse Experience: Suicidal Intent, Syncope

Demography: **Age**-17 years Date of Birth-20-Jan-1980 **Sex**-Male
Height-180.0 cm **Weight**-81.5 kg **Race**-Hispanic

Country: Mexico

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: **30-Jul-1997**

Stop Date: 03-Sep-1997

AE Remarks:

Case, reference number 1997021843-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a male aged 17.

On 30 July 1997, the patient received his first treatment with study medication for major depression. The patient did not experience an improvement while being on study medication. He reported a syncopal episode of three minutes duration on 27 August 1997. An electrocardiogram taken on 27 August 1997 was normal. The investigator reported that this event was non-serious and probably unrelated to the study medication.

Approximately thirty six days after the start of study medication, on 3 September 1997, the patient became very irritable and had an outburst. He was seen by a psychologist who was not involved in the study. The psychologist discontinued study medication on 3 September 1997, without consulting the investigator. No treatment replacement medication was started. The investigator reported that the irritability was the manifestation of the patient not showing any improvement and that this was considered to be "lack of effect".

Without any treatment the patient demonstrated a serious suicidal intent on 5 September 1997 and was hospitalised on 8 September 1997 for both his suicidal intent and his irritability. The patient was started on fluoxetine 20 mg and an unknown benzodiazepine for sedation.

The investigator indicated that the irritability was possibly related to the study medication and the suicidal intent was unrelated to the study medication. The investigator also indicated that the entire episode was associated with the patient's primary condition under study.

Concomitant Drugs:	Start	End
Treatment Drugs:	Start	End
Fluoxetine	08-Sep-1997	

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Possibly Related/Suspected

Reason for Seriousness: Hospitalization Required

PID 377.049.09576

Primary Adverse Experience: Psychosis/Psychosis

Demography:	**Age-**18 years	Date of Birth-19-Jan-1979	**Sex-**Male
	Height-160.0 cm	Weight-45.3 kg	**Race-**Hispanic

Country: Mexico

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo Run-In
Start Date: **04-Jul-1997**
Stop Date: 08-Jul-1997

AE Remarks:

Case, reference number 1997028381-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a male aged 18.

On 4 July 1997, prior to receiving study medication for unipolar major depression, during the placebo run-in phase of the study, the patient developed several complaints which evolved into a severe psychotic episode with mutism, paranoid ideation, confusion and agitation. He was hospitalised from 7 to 25 July 1997. The final diagnosis was schizophreniform disorder. The patient was treated with haloperidol for psychosis and biperiden for Parkinsonism-like symptoms. Study medication was discontinued on 8 July 1997 (the day the patient's mother reported the adverse event) and the patient was withdrawn from the study.

The investigator considers that the psychosis is unrelated to treatment with placebo run-in and associated with schizophreniform disorder.

Concomitant Drugs:	Start	End

Treatment Drugs:	Start	End
Haloperidol	11-Jul-1997	
Biperiden	17-Jul-1997	

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason For Seriousness: Hospitalization Required

PID 377.053.00508

Primary Adverse Experience: Emotional Lability/Suicide Attempt

Demography: **Age**-14 years Date of Birth-28-Mar-1983 **Sex**-Female
Height-163.0 cm **Weight**-57.5 kg **Race**-White

Country: Argentina

Medical History: Headache, Postprandial Abdominal Pain

Study Diagnosis: Depression/Affective Disorders

Study Drug: Paroxetine

Start Date: **17-Dec-1997**

Stop Date: 10-Feb-1998

AE Remarks:

Case, reference number 1998004058-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 14. The patient's past medical history included spasmodic bronchitis, contact dermatitis and orthostatic hypotension. At the time of the event, the patient was suffering from postprandial abdominal pain and headache.

On 17 December 1997, the patient received her first treatment with study medication for unipolar major depression. Approximately fifty four days later, on 8 February 1998, the patient attempted suicide after arguing with her mother concerning her decision to marry another man. The patient locked herself in the bathroom and made superficial cuts in her left wrist using a shaving blade. She stated that she did not want to live at the moment, feeling anguish and anger. This episode of crisis lasted approximately two hours, after which the patient calmed and "absorbed" the idea of self destruction.

The investigator considers the suicide attempt unrelated to study medication, associated with the primary condition {unipolar major depression}, and/or maternal relationship conflicts. He described the event as a "low risk attempt". He felt the physical damage was minimal and she was not prone to put her life at stake since she carried out the attempt within a domestic environment where she could be seen and assisted. This action is considered to be an attempt to draw her mother's attention and to rid herself of anger by blaming her. Study medication was not interrupted; it was increased. Both the investigator and SB monitor wished for the patient to continue the study under strict supervision.

On 10 February 1998 the patient was seen by the investigator. During that visit, the investigator decided that the patient would continue in the study because he felt the discontinuation would have been detrimental for the therapeutic relationship, since the patient would have considered it a punishment for her behaviour.

On 13 February 1998, the patient's mother went to a scheduled visit without her daughter. She explained that subsequent to the visit on 10 February 1998, they had argued and the patient had left

home afterwards; she stopped taking study medication at that time. As a result, on 13 February 1998, the investigator decided to discontinue the patient from the study for protocol violation.

Concomitant Drugs:	Start	End

Treatment Drugs:	Start	End

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Spasmodic bronchitis.
Contact dermatitis.
Orthostatic hypotension in December 1997.

Reporter Attribution for Primary AE:	Unrelated/Not Related
Reason For Seriousness:	Life Threatening

PID 377.057.00539

Primary Adverse Experience: Gastrointestinal Disorder/Acute Appendicitis

Demography: **Age**-17 years Date of Birth-27-Sep-1980 **Sex**-Female
Height-165.0 cm **Weight**-60.0 kg **Race**-White

Country: Argentina

Medical History: Headache, Nausea

Study Diagnosis: Depression/Affective Disorders

Study Drug: Placebo Washout 20mg
Start Date: **16-Dec-1997**
Stop Date: 24-Mar-1998

AE Remarks:

Case, reference number 1998010967-1, is a clinical trial report from study number 29060 377, which is a blinded study, referring to a female aged 17.

On 16 December 1997, the patient received her first treatment with placebo washout for unipolar major depression. Approximately one hundred days later, on 25 March 1998, one day after completing the placebo wash-out phase of the study, the patient was admitted to hospital with acute appendicitis. The patient had experienced symptoms of nausea and vomiting for one week before a definitive diagnosis was made. An appendectomy was performed. The patient received treatment with metamizole sodium for pain and azithromycin for surgery prophylaxis. The patient was reported to have recovered on 26 March 1998.

The investigator considers the acute appendicitis to be unrelated to study medication and associated with another condition {unspecified}.

Concomitant Drugs:	Start	End
Treatment Drugs:	**Start**	**End**
Dipyrone (Metamizole Sodium)	25-Mar-1998	25-Mar-1998
Dipyrone (Metamizole Sodium)	26-Mar-1998	27-Mar-1998
Azithromycin	25-Mar-1998	27-Mar-1998

Lab Remarks:

Lab Test Code/Name	Date	Lab Value	Units	Normal Range

Medical History Remarks:

Reporter Attribution for Primary AE: Unrelated/Not Related

Reason For Seriousness: Life Threatening, Hospitalization Required

14 Source Tables: Safety Narratives

Confidential

SmithKline Beecham

Paroxetine

BRL-029060

Patient Narratives for Non-fatal Adverse Experiences Leading to Withdrawal

377

Table No. 17

Safety Narratives

SB Document Number: BRL-029060/RSD-100VJ4/1

PID 377.029.00013			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Dyspnoea/Worsening severe dyspnoea		
Other:	Tiredness, nausea, heartburn, URTI.		
Demography:	Age: 14		
	Sex: Male		
	Race: Caucasian		
Country:	South Africa		
Medical History:	None		
Study Diagnosis:	Adolescent depression		
Study Drug:	Paroxetine		
Start:	15 Feb 96	Stop:	6 Mar 96
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Feels tired oversedation	16 Feb	1 Mar 96	
Heartburn	29 Feb 96	1 Mar 96	
Dyspnoea,	26 Feb 96	26 Feb 96	
nausea,	26 Feb 96	29 Feb 96	
URTI	26 Feb 96	not stated	
Dyspnoea	2 Mar 96	not stated	
AE Remarks:			
On day 1 the patient felt tiredness which lasted 14 days, followed on day 5 by heartburn lasting ten days, with severe nausea on day 11 for three days and again on day 15. Also on day 11 the patient had an upper respiratory tract infection and dyspnoea. By day 16 the dyspnoea was described as severe, and the patient was taken off study drug.			
Concomitant Drugs:	Onset:	Stopped:	
Diphenhydramine hydrochloride 30ml	Day 22	Not stated	

PID 377.029.00016			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Somnolence/Worsening daytime sedation		
Other:	None		
Demography:	Age: 15		
	Sex: Female		
	Race: Caucasian		
Country:	South Africa		
Medical History:	None		
Study Diagnosis:	Adolescent depression		
Study Drug:	Paroxetine		
Start:	21 Feb 96	Stop:	19 Mar 96
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Feels sleepy during the day	21 Feb 96	29 Feb 96	
Worsening daytime sedation	29 Feb 96	not stated	
AE Remarks:			
On day 0 the patient felt daytime sleepiness which lasted 8 days, By day 8 the daytime sedation was becoming worse and was now severe. As the effect was considered related to study drug the patient was taken off study drug.			
Concomitant Drugs:	Onset:	Stopped:	
None			

PID 377.029.00035			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Nausea/Nausea		
Other:	Flu, sinusitis		
Demography:	Age: 16		
	Sex: Male		
	Race: Caucasian		
Country:	South Africa		
Medical History:	Anxiety/obsessional disorders		
Study Diagnosis:	Adolescent depression		
Study Drug:	Paroxetine		
Start:	26 Apr 96	Stop:	11 May 96
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Flu	26 Apr 96	8 May 96	
Nausea	3 May 96	16 May 96	
Sinusitis	7 May 96	not stated	
AE Remarks:			
On day 7 the patient experienced moderate nausea which lasted 13 days and was considered possibly related to study drug. Medication was stopped after 15 days and the patient withdrawn from the study.			
Concomitant Drugs:	Onset:	Stopped:	
Ascorbic acid 500mg	8 May 96	Not stated	
Prednisone brompheniramine maleate + phenylephrine hydrochoride 5mg	8 May 96	Not stated	
Phenylpropanolamine hydrochloride 5 tabs	8 May 96	Not stated	

PID 377.029.00040			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Nausea/Nausea		
Other:	Somnolence		
Demography:	Age: 12		
	Sex: Male		
	Race: Caucasian		
Country:	South Africa		
Medical History:	None		
Study Diagnosis:	Adolescent depression		
Study Drug:	Paroxetine		
Start:	31 Oct 96	Stop:	11 Nov 96
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Nausea	31 Oct 96	not stated	
Somnolence	31 Oct 96	not stated	
AE Remarks:			
On day 0 the patient felt moderate nausea and mild somnolence, both considered related to study drug. Medication was stopped after 11 days.			
Concomitant Drugs:	Onset:	Stopped:	
None			

PID 377.029.00047			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Somnolence/Daytime sedation		
Other:	Headache		
Demography:	Age: 16		
	Sex: Female		
	Race: Caucasian		
Country:	South Africa		
Medical History:	None		
Study Diagnosis:	Adolescent depression		
Study Drug:	Paroxetine		
Start:	8 Jan 98	Stop:	4 Feb 98
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Daytime sedation	19 Jan 98	11 Feb 98	
Headache	25 Jan 98	26 Jan 98	
Headache	1 Feb 98	no stated	
AE Remarks:			
On day 11 the patient experienced moderately severe daytime sedation which lasted 24 days and was considered possibly related to study drug. In addition the patient experienced headache on Day 17 which was mild and lasted one day, and again on Day 24 which was described as moderately severe. Study medication was stopped on Day 27, and the patient withdrawn from the study.			
Concomitant Drugs:	Onset:	Stopped:	
Salbutamol	1988	not stated	
Paracetamol 500mg po	26 Jan 98	26 Jan 98	
ASA 600mg po	5 Feb 98	5 Feb 98	
Paracetamol 500mg po	5 Feb 98	5 Feb 98	

PID 377.047.00620			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Palpitation/ Palpitations		
Other:	Diarrhoea		
Demography:	Age: 18		
	Sex: Male		
	Race: Caucasian		
Country:	Belgium		
Medical History:	Over anxious disorder of childhood		
Study Diagnosis:	Adolescent depression		
Study Drug:	Paroxetine		
Start:	6 Feb 96	Stop:	7 Feb 96
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Diarrhoea	6 Feb 96	9Feb 96	
Palpitations	6 Feb 96	9Feb 96	
AE Remarks:			
On the first day of treatment the patient experienced moderate diarrhoea and palpitations considered possibly related to study drug. Study drug was stopped the next day and the patient withdrawn from study			
Concomitant Drugs:	Onset:	Stopped:	
None			

PID 377.058.00195			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Vomiting/Vomiting		
Other:	Diarrhoea		
	Dizziness		
	Nausea		
	Night sweats		
	Laceration of left leg		
Demography:	Age: 17		
	Sex: Female		
	Race: Caucasian		
Country:	Canada		
Medical History:	Low back pain, major episode of depression		
Study Diagnosis:	Adolescent depression		
Study Drug:	Paroxetine		
Start:	8 Jul 97	Stop:	18 Sep 97
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Dizziness	16 Jul 97	29 Aug 97	
Nausea	8 Jul 97	16 Jul 97	
Nausea	14 Sep 97	not stated	
Night sweats	16 Aug 97	21 Sept 97	
Laceration of left leg	2 Aug 97	3 Aug 97	
Vomiting	18 Sep 97	not stated	
AE Remarks:			
On day 72 the patient experienced moderately severe vomiting which was considered possibly related to study drug. Study drug was stopped and the patient withdrawn from study.			
Concomitant Drugs:	Onset:	Stopped:	
Dimenhydrinate 2 tabs	14 Oct 97	16 Oct 97	

PID 377.005.00263			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Infection/ Mononucleosis		
Other:	Cold		
Demography:	Age: 17		
	Sex: Male		
	Race: Caucasian		
Country:	Belgium		
Medical History:	None		
Study Diagnosis:	Adolescent depression		
Study Drug:	Placebo (screening)		
Start:	12 Apr 97	Stop:	25 Apr 97
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Mononucleosis	20 Apr	not stated	
Cold	20 Apr	not stated	
AE Remarks:			
Five days before the patient was due to start treatment with paroxetine the patient experienced mononucleosis and a cold, both moderately severe. The patient was randomised to paroxetine but none was administered and the patient was withdrawn from study.			
Concomitant Drugs:	Onset:	Stopped:	
Fusafungine 16 puffs	not stated	not stated	
Paracetamol 1000mg	not stated	not stated	

PID 377.009.00227			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Nervousness/ Nervousness		
Other:	None		
Demography:	Age: 18		
	Sex: Female		
	Race: Caucasian		
Country:	Belgium		
Medical History:	None		
Study Diagnosis:	Adolescent depression		
Study Drug:	Placebo		
Start:	26 Jun 96	Stop:	28 Jun 96
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Nervousness	26 Jun 97	2 Jul 97	
AE Remarks:			
On the day treatment started the patient experienced mild nervousness lasting six days considered possibly related to study drug, Study drug was stopped after two days, and the patient withdrawn from study.			
Concomitant Drugs:	Onset:	Stopped:	
Desogestrel + ethinylestradiol 1 tab po	1987	not stated	

PID 377.054.00512			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Abscess/Pharyngeal abscess		
Other:	Dizziness		
Demography:	Age: 13		
	Sex: Female		
	Race: Caucasian		
Country:	Argentina		
Medical History:	Pneumonia		
Study Diagnosis:	Adolescent depression		
Study Drug:	Placebo		
Start:	22 Nov 97	Stop:	17 Jan 98
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Pharyngeal abscess	16 Jan 98	8 Feb 98	
Dizziness	26 Nov 97	28 Nov 97	
AE Remarks:			
On day 56 the patient had a pharyngeal abscess considered probably unrelated to study drug. Study drug was stopped and other corrective therapy given.			
Concomitant Drugs:	Onset:	Stopped:	
Benzathene benzylpenicillin im	21 Jan 98	21 Jan 98	
Phenoxymethylpenicillin po	21 Jan 98	15 Feb 98	
Betamethasone sodium phosphate, betamethasone acetate im	21 Jan 98	21 Jan 98	

PID 377.056.00518			
Reason for Narrative:	Adverse Experience Leading to Withdrawal		
Primary Adverse Experience (Verbatim Term):	Asthenia/Asthenia		
Other:	Drowsiness		
Demography:	Age: 18		
	Sex: Male		
	Race: Caucasian		
Country:	Argentina		
Medical History:	None		
Study Diagnosis:	Adolescent depression		
Study Drug:	Placebo		
Start:	22 Oct 97	Stop:	28 Oct 97
Adverse Experiences (VerbatimTerm):	Onset:	Stopped:	
Asthenia	24 Oct 97	6 Nov 97	
Drowsiness	24 Oct 97	5 Nov 97	
AE Remarks:			
On day 2 the patient experienced mild drowsiness lasting six days and moderate asthenia lasting 7 days, followed the next day by moderate drowsiness and severe asthenia lasting six and five days respectively. As the events were considered related to study drug the patient withdrawn from study.			
Concomitant Drugs:	Onset:	Stopped:	
none			