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There are no submission or page charges.

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Papers that do not conform to the general criteria for publication in *European Psychiatry* will be returned immediately to authors to avoid unnecessary delay in submission elsewhere.

Organisation of the manuscript. Manuscripts should be typewritten/printed double-spaced with wide margins throughout. Title page, abstracts, tables, legends to figures and reference list should each be provided on separate sheets of paper. The title page should include: the title, the name(s) and affiliation(s) of the author(s), an address for correspondence, and telephone/fax numbers for editorial queries. All original and review articles should include an abstract (a single paragraph of no more than 150 words) and 3-6 key words for abstracting and indexing purposes. For original and review articles, the text should be ordered under the following headings: Introduction, Subjects and methods/Materials and methods, Results, Discussion (may be combined with Results), Conclusion, Acknowledgments (when appropriate), References.

• **Short communications** should not exceed 1 500 words or the equivalent space including figures and tables, with abstracts of no more than 50 words.

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• **Letters to the Editor** (maximum of 500 words) will be processed rapidly and therefore should be sent to the Deputy Editors. To ensure speedy publication, please adhere strictly to the general instructions on style and arrangement; provide only figures and tables suitable for direct reproduction.

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Colour figures will be included subject to the author's agreement to defray part of the cost.

• **Tables.** All tables must be cited in the text, have titles and be numbered consecutively with roman numerals. Only horizontal lines should be included, and kept to a minimum.

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For a book, the editor's names, book title, publisher and publisher's location should appear before volume and page numbers.

Examples:

Journal article

Lão H, Rein W, Souche A, Dufour H, Guelfi JD, Malka R, Olié JP. Psychopathological and sociodemographic characteristics of 1231 depressed patients with and without co-existing alcoholism. *Psychiatr & Psychobiol* 1990;5:249-56

Book

Takahashi R, Flor-Henry P, Gruzelier J, Niwa SI. *Dynamics, Laterality and Psychopathology*. Amsterdam: Elsevier, 1987

Chapter in a book

Pinard G, Tetreault L. Concerning semantic problems in psychological evaluation. In: Pichot P, ed. *Psychological Measurements in Psychopharmacology. Modern Problems in Pharmacopsychiatry*. Basel: Karger, 1974; 7:8-22

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TRAITEMENT DE L'INHIBITION
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PRAZINIL

CARPIPRAMINE



Forme et présentation : Etui de 24 comprimés sécables dosés à 50 mg de carpipramine (DCI) base sous forme de dichlorhydrate monohydraté. **Propriétés :** Psychotrope désinhibiteur. **Indications :** • Inhibition au cours des états anxieux. • Les psychoses schizo-phréniques à symptomatologie déficitaire, qu'il s'agisse de psychoses déficitaires d'emblée (forme hébéphréniques, schizo-phrénies simples) ou de déficit progressif survenant au cours de l'évolution des psychoses chroniques. **Contre-indications :** • Troubles de la conduction et du rythme cardiaque. • Ne pas associer aux IMAO ; respecter un délai de 15 jours après l'arrêt d'un traitement comportant ce type de médicament. • Affections hépatiques et rénales sévères. • Grossesse ; chez une espèce animale, l'expérimentation met en évidence à très forte dose une embryotoxicité. Dans l'espèce humaine, le risque n'est pas connu ; par conséquent, par mesure de prudence, éviter de prescrire pendant la grossesse. • L'allaitement est déconseillé pendant le traitement. • Effets sur la capacité de conduire des véhicules ou d'utiliser des machines. **Précautions d'emploi :** • Surveillance en début de traitement (psychique et somatique) notamment chez les patients avec risque suicidaire. • Surveillance renforcée chez les épileptiques. • Surveillance particulière en cas d'anesthésie générale. • A utiliser avec précautions en cas d'affection cardio-vasculaire grave, d'insuffisance rénale et/ou hépatique. **Interactions médicamenteuses :** Association déconseillée avec l'alcool. **Associations à prendre en compte :** • Antihypertenseurs ; effet antihypertenseur et risque d'hypotension orthostatique majorés. Captopril et Enalapril ; effet antihypertenseur et risque d'hypertension orthostatique majorés. • Autres déprimeurs du système nerveux central ; majoration de la dépression centrale pouvant avoir des conséquences importantes, notamment en cas de conduite automobile ou d'utilisation de machines. **Effets indésirables :** • Quelques cas de difficultés d'endormissement ont été rapportés. • Possibilité d'hypotension orthostatique (en particulier chez le sujet âgé). • Très rares cas de galactorrhée et surdosage massif ; procéder à l'évacuation rapide du produit ingéré, hospitaliser le patient en milieu spécialisé. Il n'existe pas d'antidote spécifique. Liste I. A.M.M. 320 437.0 (1976). **Prix : 62,10 F (24 comprimés). Remboursé Sécurité Sociale à 65%. Admis aux Collectivités.**

Cet étui contient un gramme deux cents milligrammes (1,2 g) de carpipramine. A conserver à l'abri de la lumière. **Composition :** dichlorhydrate de carpipramine monohydraté, quantité exprimée en carpipramine base cinquante milligrammes (50 mg). **Excipient :** n.s.p. 1 comprimé pelliculé sécable. **Indications, contre indications, posologie, précautions d'emploi, effets indésirables, mode d'emploi :** voir notice intérieure.