Fluvoxamine
An Overview of its Pharmacological Properties and Review of its Therapeutic Potential in Non-Depressive Disorders

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Fluvoxamine is a selective serotonin reuptake inhibitor which was initially developed as an antidepressant. Additional clinical research has identified several other disorders of the central nervous system in which fluvoxamine has potential benefits, and which are the focus of this review.

At present, the largest volume of data concerns the use of fluvoxamine in obsessive-compulsive disorder. Oral fluvoxamine at dosages of up to 300 mg/day is effective in alleviating, although not preventing, the symptoms of obsessive-compulsive disorder in 40 to 50% of patients, and limited data indicate that it is as effective as clomipramine. Encouraging initial data are also available regarding the efficacy of fluvoxamine in panic disorder. Further data are required to fully establish the efficacy of fluvoxamine in preventing panic attacks, and to investigate possible beneficial effects in the treatment of anxiety symptoms, bulimia nervosa, alcohol (ethanol)-induced amnesia, schizophrenia and several other psychiatric disorders, and pain states. Comparative and long term data in all disorders in which fluvoxamine shows potential are also required.

Fluvoxamine is well tolerated by the majority of patients. Nausea is the most frequent adverse effect and can lead to withdrawal from treatment. However, nausea and most other adverse effects are generally mild to moderate in nature. Fluvoxamine induces less anticholinergic and sedative effects than tricyclic antidepressants, and does not appear to have cardiotoxic effects. In addition, as with many other antidepressants there is no evidence that fluvoxamine induces suicidal behaviour. Compared with tricyclic antidepressants, fluvoxamine is relatively safe in overdose.

Thus, studies available to date have demonstrated the efficacy of fluvoxamine in obsessive-compulsive disorder. Efficacy in other central nervous system disorders has been indicated but further confirmatory data are required, as are comparative data in all disorders. The improved tolerability profile of fluvoxamine compared with many other agents used in these conditions will help to establish the agent as a useful alternative in obsessive-compulsive disorder, and in other conditions if preliminary efficacy findings are confirmed.

Fluvoxamine is a potent and selective inhibitor of serotonin reuptake. In addition to its lack of effects on other monoamine reuptake mechanisms, fluvoxamine has little or no effect on the neuronal function of other monoamines and has a low affinity for the receptors of a variety of neurotransmitters. While acute inhibition of serotonin reuptake by fluvoxamine is well documented, clinical response is slower and therefore is not readily explained by this acute effect.

Studies in animals and humans have shown that fluvoxamine, unlike the tricyclic antidepressants, has relatively few cardiovascular or anticholinergic effects. In addition, fluvoxamine does not appear to have pro-convulsive or sedative effects, and does not impair cognition. Fluvoxamine has anxiolytic and anti-