EXTENDED-RELEASE TABLETS

Quetiapine fumarate extended-release tablets should be administered once daily, preferably in the evening. Tablets may be crushed and
swallowed whole. Tablets may be split in half after removal from the blister pack; each half should be placed in a new blister pack and
preserved as directed. Tablets should not be cut with a sharp object due to risk of crushing.

Initial U.S. Approval: 1997

Dosage

<table>
<thead>
<tr>
<th>Dosage Form</th>
<th>Strength</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extended-release Tablets</td>
<td>150 mg</td>
<td>78</td>
<td>7%</td>
</tr>
<tr>
<td></td>
<td>300 mg</td>
<td>78</td>
<td>7%</td>
</tr>
<tr>
<td></td>
<td>600 mg</td>
<td>29</td>
<td>12%</td>
</tr>
</tbody>
</table>

Warnings and Precautions

■falls

■suicidal thoughts and behaviors

■tardive dyskinesia

■tremor

■weight gain

■weight loss

■cognitive and motor impairment

■hypotension

■orthostatic hypotension

■dizziness

■tachycardia

■tremor

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### Table 1: Patient Characteristics at Baseline

<table>
<thead>
<tr>
<th>Patient</th>
<th>Age</th>
<th>Gender</th>
<th>Disease Severity</th>
<th>Treatment Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1</td>
<td>50</td>
<td>M</td>
<td>Mild</td>
<td>Control</td>
</tr>
<tr>
<td>P2</td>
<td>48</td>
<td>F</td>
<td>Moderate</td>
<td>Treatment A</td>
</tr>
<tr>
<td>P3</td>
<td>60</td>
<td>M</td>
<td>Severe</td>
<td>Treatment B</td>
</tr>
</tbody>
</table>

### Graph 1: Baseline Patient Characteristics

The graph shows the distribution of patient characteristics at baseline for the control and treatment groups. The X-axis represents the age range, while the Y-axis indicates the number of patients. The control group (black) and treatment group (red) are clearly distinguished, with the treatment group showing a higher prevalence of severe disease cases.

### Table 2: Treatment Response Over Time

<table>
<thead>
<tr>
<th>Time Point</th>
<th>Treatment A</th>
<th>Treatment B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>0.5</td>
<td>0.8</td>
</tr>
<tr>
<td>Week 2</td>
<td>0.6</td>
<td>1.0</td>
</tr>
<tr>
<td>Week 3</td>
<td>0.7</td>
<td>1.2</td>
</tr>
<tr>
<td>Week 4</td>
<td>0.8</td>
<td>1.4</td>
</tr>
</tbody>
</table>

### Graph 2: Treatment Response Over Time

The graph illustrates the treatment response over time for both groups. The control group (black) has a steady increase in response, while the treatment group (red) shows a more rapid and pronounced improvement, indicating efficacy of the treatment.

### Table 3: Adverse Events Summary

<table>
<thead>
<tr>
<th>Event</th>
<th>Control</th>
<th>Treatment A</th>
<th>Treatment B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headache</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Hypertension</td>
<td>1</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>

### Graph 3: Adverse Events Distribution

The distribution of adverse events is depicted in the graph, with the control group experiencing more events overall, particularly in the category of hypertension.

---

The detailed analysis and discussion of the data are available in the full report. Further statistical analysis and patient follow-up are ongoing to ensure comprehensive understanding of the outcomes.