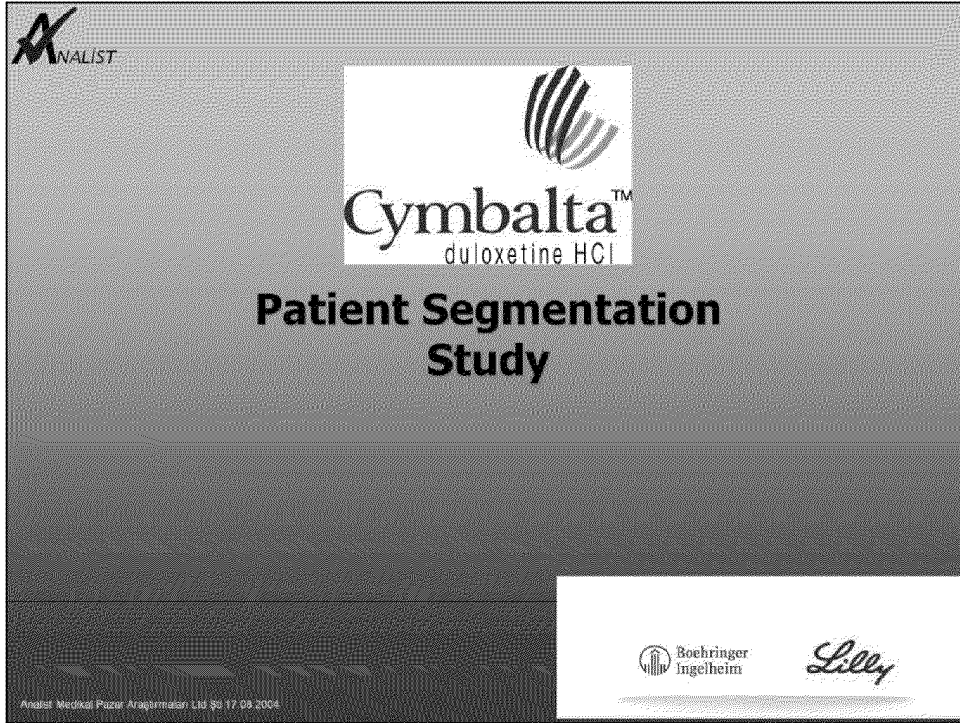



EXHIBIT 10






Study Objectives

- Current motivators to prescribe anti depressants (symptoms that urges doctors to prescribe anti depressants)
- Which antidepressants are especially preferred in this case (referring to cases which will be determined in the previous item),
- The positioning of current antidepressants in the market,
- What is the "unmet need" that physicians would like to fulfill in a new antidepressant?
- How often do painful physical symptoms relate to depression? Are there specific anti-depressants to be prescribed in this case? The degree of satisfaction with current therapies?
- Patient sizes in each of the "Patient Segments" which will be presented to the doctors (patient segments pre-determined by B.Engelheim/Lilly),
- Other important parameters which doctors identify, segment their patients for anti-depressant therapy,
- Reactions to Cymbalta
- For which (pre-determined) patient segments Cymbalta will be suitable.

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Methodology

- Structured face-to-face interviews (through a questionnaire) lasting max. 35-40 minutes were realized.
- The field part of the study was realized between May 26 – June 25, 2004.

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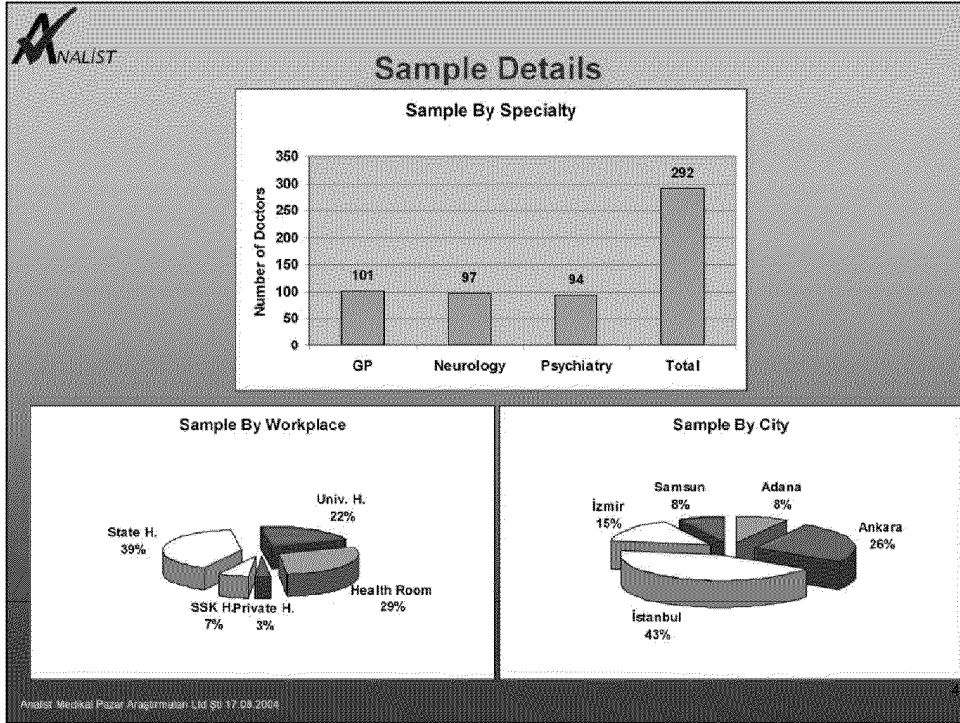
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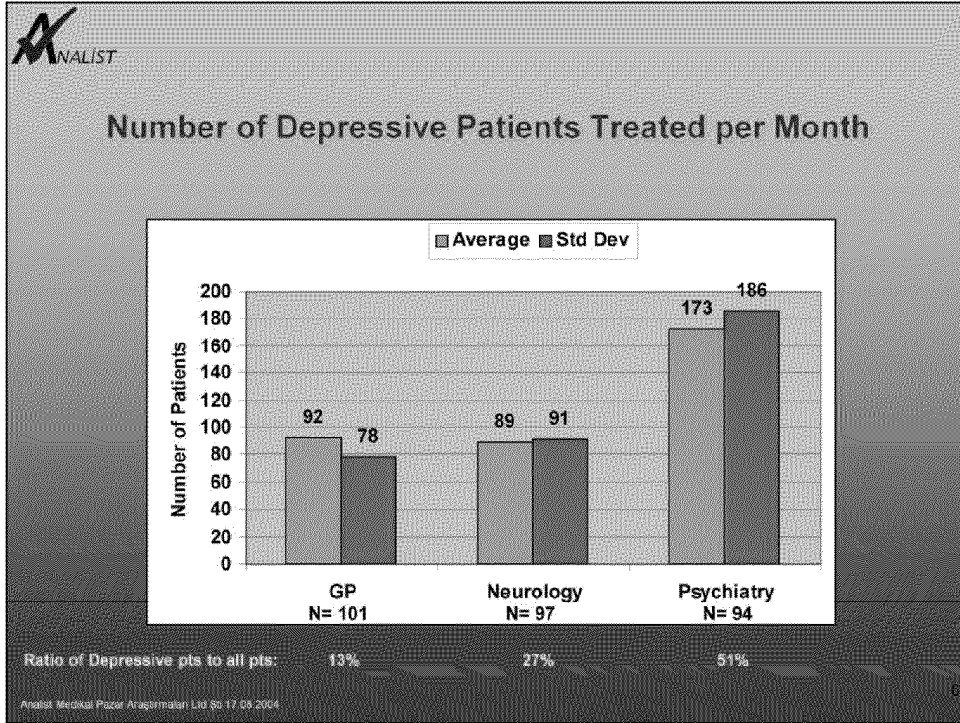
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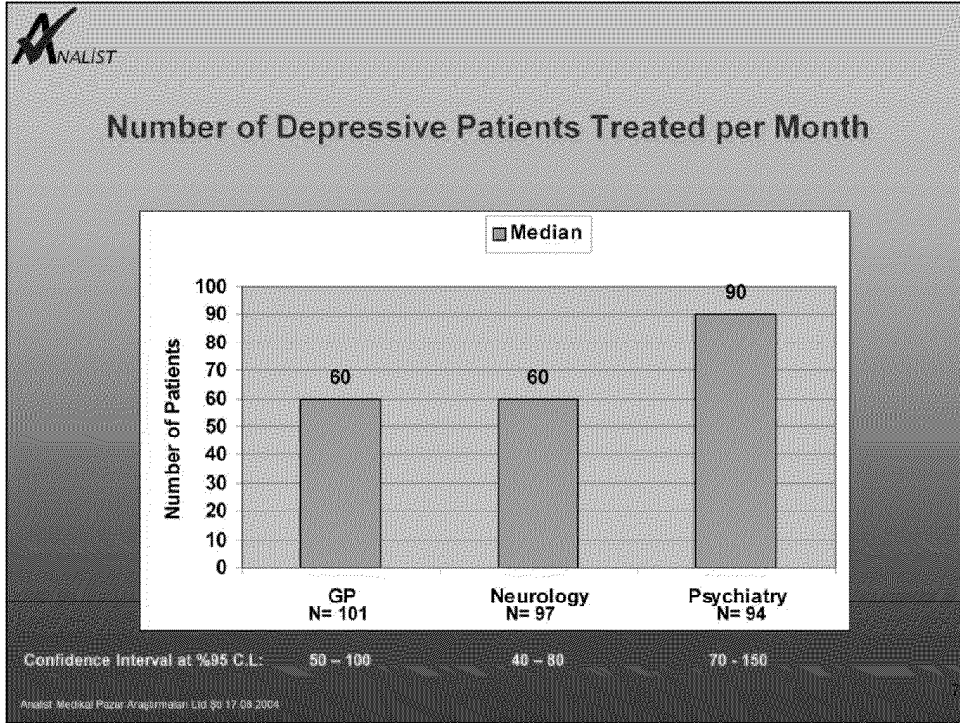
- The study was realized in 5 cities (Adana, Ankara, Istanbul, Izmir, Samsun) with a total of 292 physicians.
- The sample was consisted of 101 GPs, 97 Neurologists and 94 Psychiatrists.
- Doctors were selected from the list which was supplied by Lilly.
- There was a screening filter for doctors to be included in the sample: Each doctor should treat at least 5 patients with depression in a month.
- More details about the sample can be found at the next page.

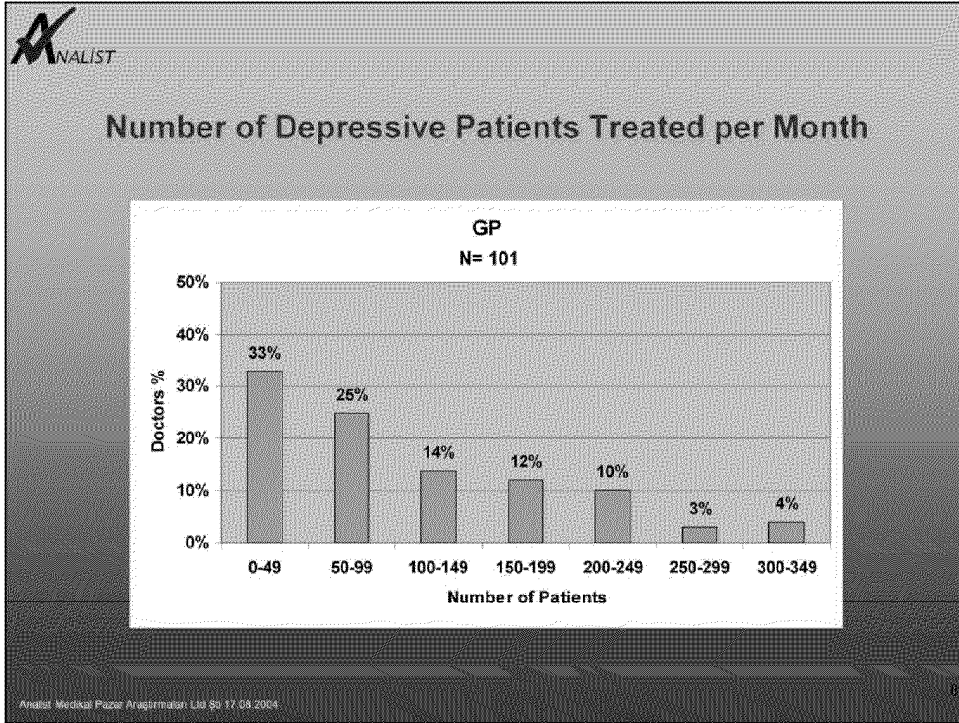
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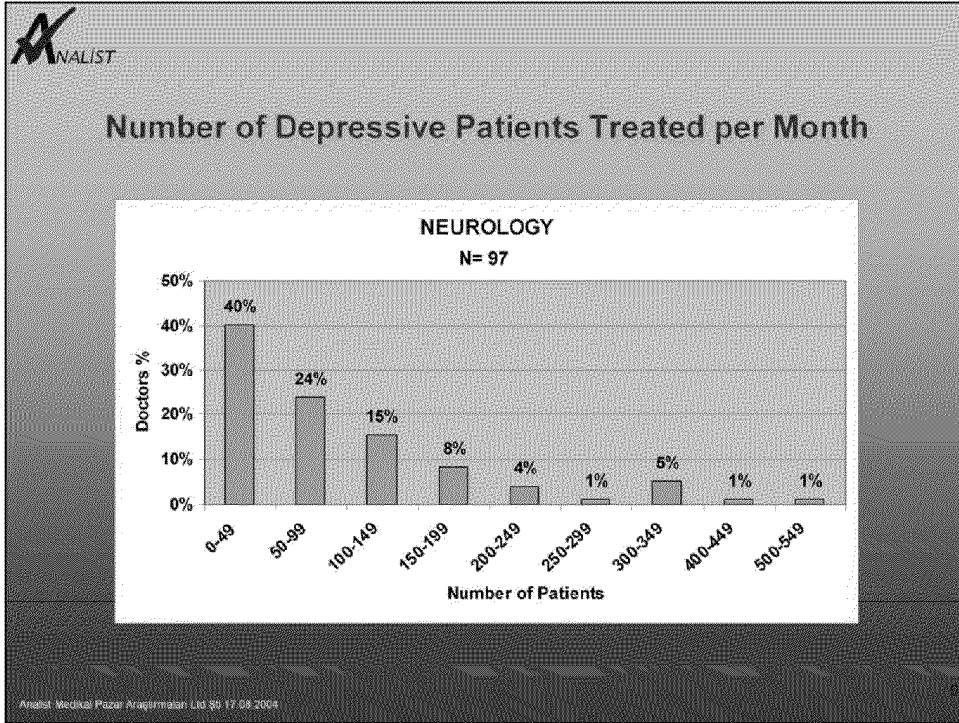


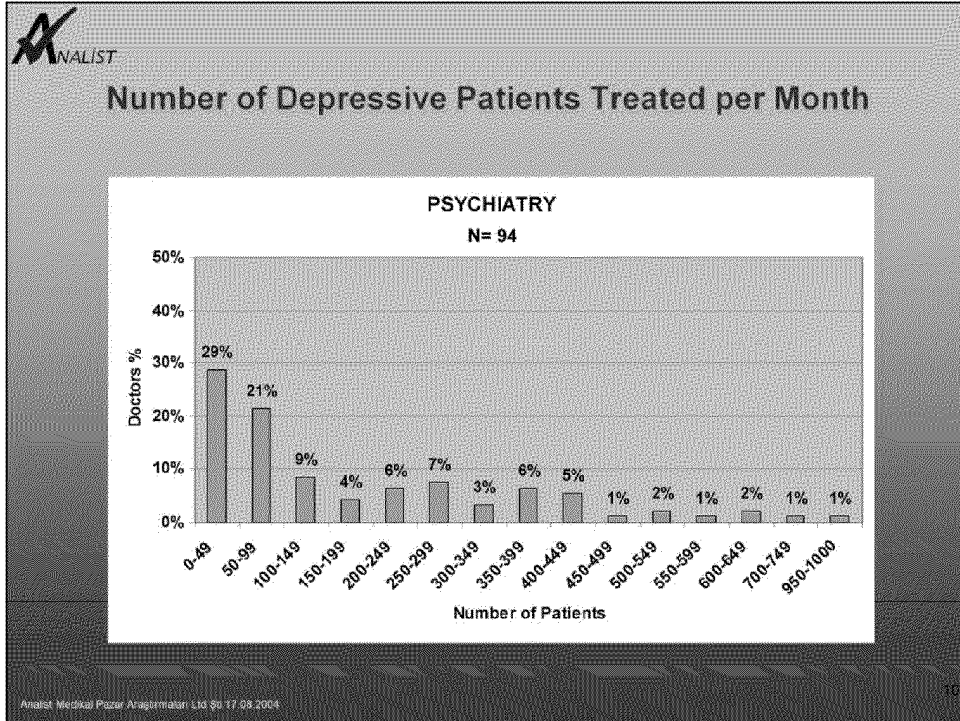


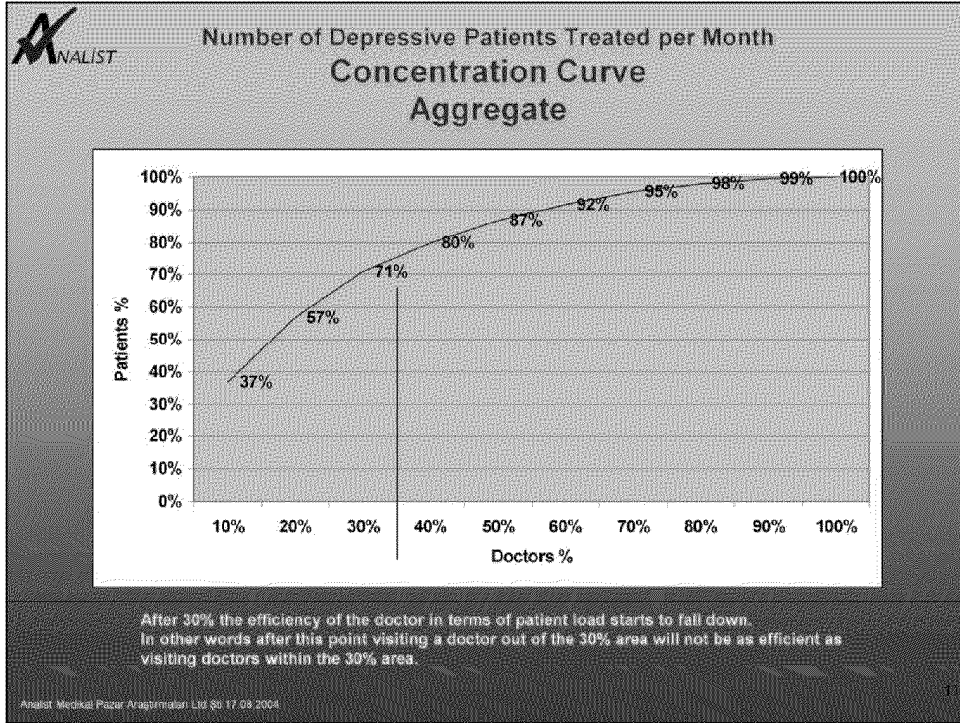


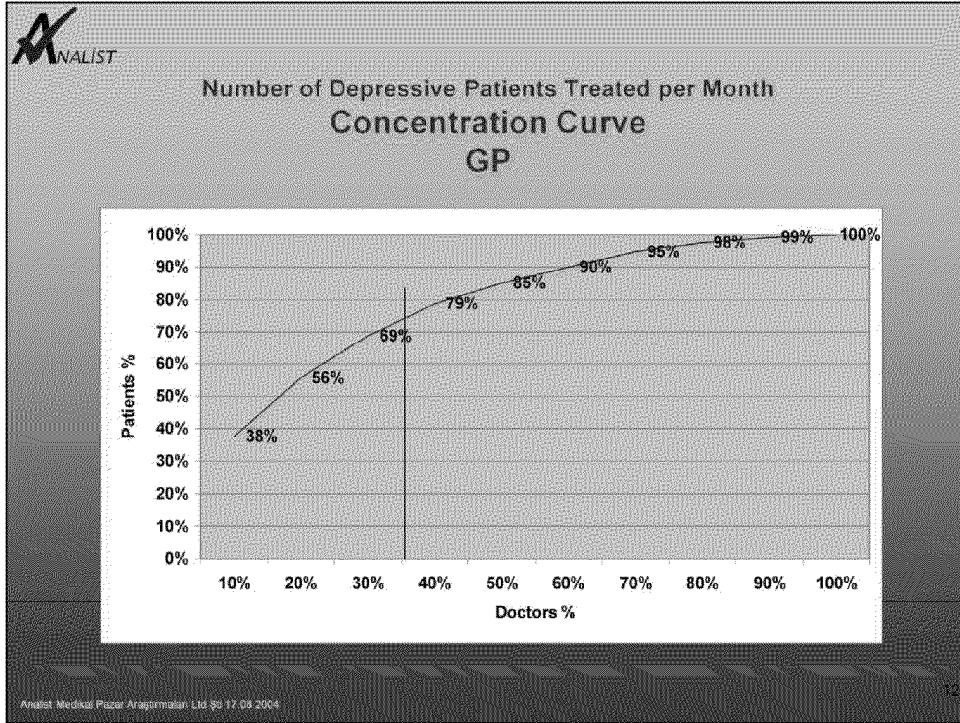


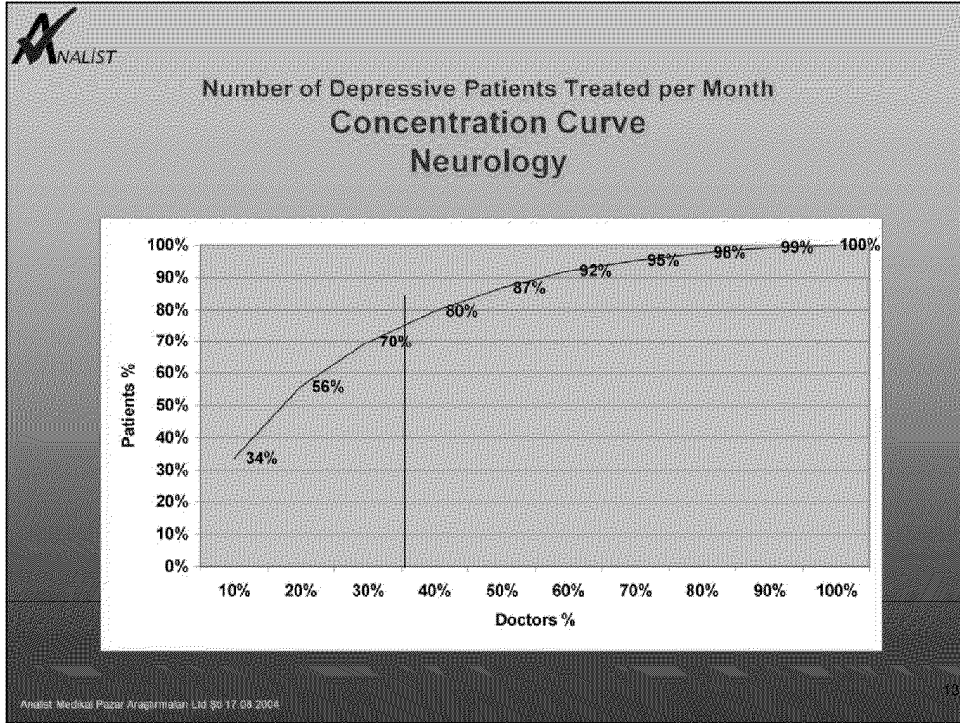


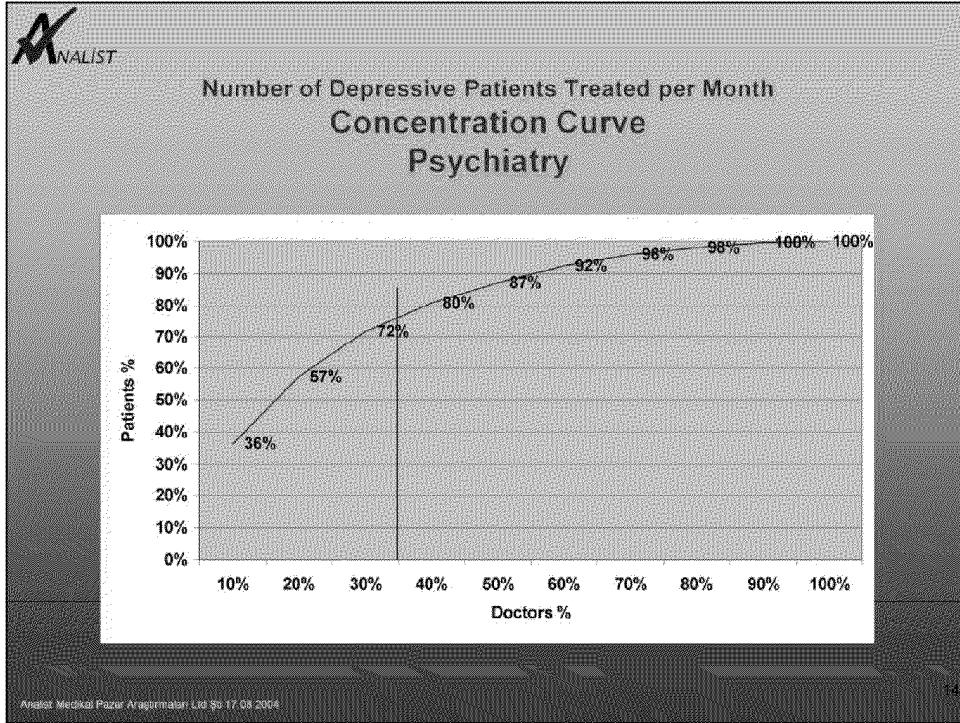


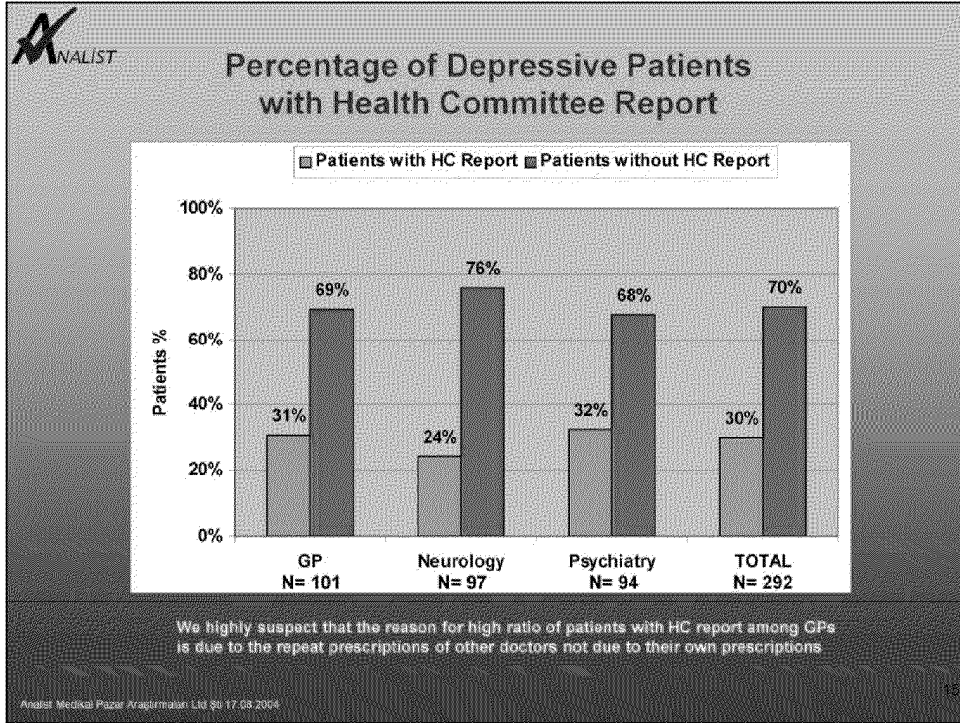


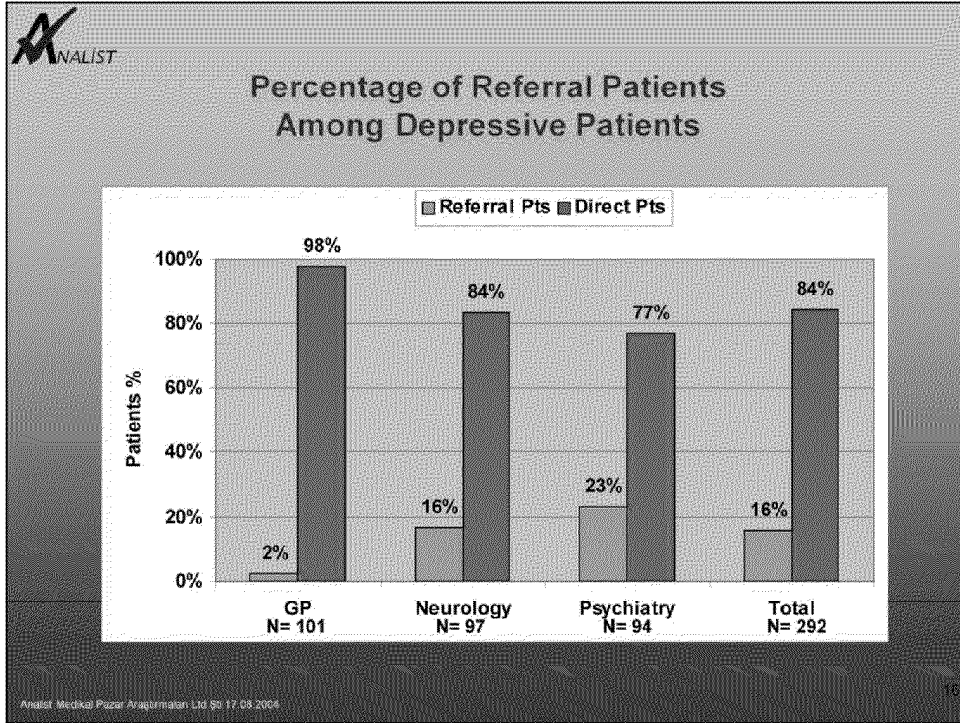
















Specialties Depressive Patients Referred From

Patient Ratio	N=	2	62	94	158
Referred From	Referred to				
Referred From	GP	Neurology	Psychiatry	Total	
Internal Medicine	0%	38%	29%	31%	
Neurology	0%	1%	31%	22%	
GP	100%	22%	17%	21%	
Cardiology	0%	6%	9%	8%	
Psychiatry	0%	12%	3%	5%	
Neurosurgery	0%	9%	2%	4%	
PTR	0%	4%	4%	4%	
ENT	0%	4%	1%	2%	
Dermatology	0%	0%	2%	2%	
Surgery	0%	4%	0%	1%	
Oncology	0%	0%	0%	0%	
Orthopedics	0%	0%	0%	0%	
Urology	0%	0%	0%	0%	
Emergency	0%	1%	0%	0%	
Gynecology	0%	0%	0%	0%	
Ophthalmology	0%	0%	0%	0%	
Total	100%	100%	100%	100%	

It seems that Neurology is referring (sending to other doctors) depressive patients as much as receiving referred patients. They are certainly a potential and therefore organizing training programs for Neurologists will pay off. The company who trains them will certainly attract attention to company's brand.

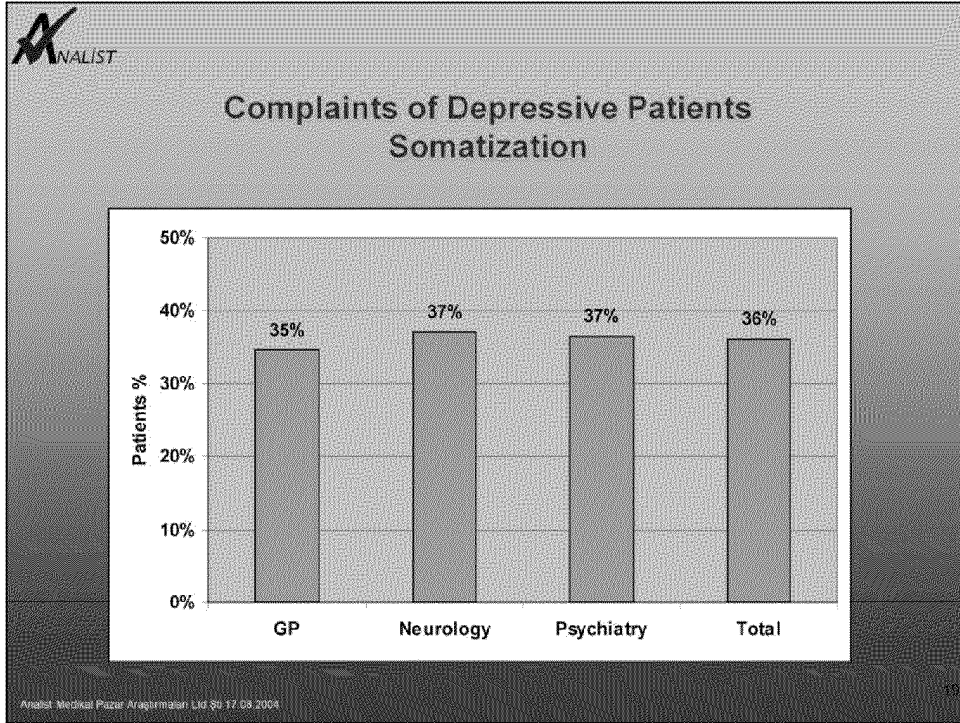
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Complaints of Depressive Patients

- Respondents were asked with which complaints the depressive patients came to the doctor. This was an open ended question. Patient percentages were also demanded from respondents. In case the respondent did not mention "somatization", the respondent was reminded of it with an explanation of what it was and asked about the patient percentage:
- Somatization was explained as conditions including insomnia, headache, GI problems, dizziness, pain (eg. back / joint pain), loss of appetite.

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Complaints of Depressive Patients

Complaint	N:			Total
	101	97	94	
Patient Ratio	Specialty			
	GP	Neurology	Psychiatry	
Insomnia	19%	21%	27%	23%
Do not enjoy life	10%	9%	22%	16%
Headache	15%	26%	6%	14%
Worried	7%	5%	9%	8%
Pain	4%	7%	8%	7%
Loss of appetite	6%	5%	7%	6%
Loss of energy	3%	4%	9%	6%
Dizziness	5%	5%	0%	3%
Stress	1%	1%	4%	2%
Agitation	2%	2%	1%	2%
Fatigue	2%	1%	2%	2%
Getting angry	1%	1%	2%	1%
Anxiety	2%	1%	2%	1%
Feeling depressed	1%	1%	1%	1%
Loss of confidence	1%	0%	2%	1%
Feeling of guilt	0%	0%	2%	1%
Suicidal thoughts	0%	0%	2%	1%
Sleeping too much	0%	0%	2%	1%
Tachycardia	1%	0%	1%	1%
Nausea	1%	0%	1%	0%
Feeling worthless	0%	0%	1%	0%
Allergy	0%	0%	1%	0%
Fear	1%	0%	0%	0%
Weight gain	0%	1%	0%	0%
Total	84%	91%	110%	98%

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Which Complaints of Depressive Patients are More Important In the Treatment of Depression

- After asking doctors the complaints with which the patients have come to the doctor, respondents were asked about the importance of complaints in the treatment of depression. Respondents were asked to rank order them:
- Initially the analysis done on the first rank. In other words, most encountered complaints at the first rank were listed with doctor percentages.


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AWALIST Which Complaints of Depressive Patients are More Important
 In the Treatment of Depression
 Most Important (Rank 1)

Doctor %	N= 101	97	94	292	
Complaint	GP	Neurology	Psychiatry	Total	
Somatization	30%	26%	21%	29%	In Cymbalta prescriptions to Neurologists Cymbalta's efficacy in headache can be more emphasized.
Headache	10%	34%	7%	17%	
Insomnia	22%	10%	14%	15%	To GPs efficacy in insomnia.
Do not enjoy life	10%	7%	19%	12%	
Worried	6%	4%	5%	5%	
Pain	5%	7%	2%	5%	To Psychiatrists efficacy in Somatization and Mood disorders can be more emphasized.
Feeling depressed	1%	6%	7%	5%	
Suicidal thoughts	1%	1%	6%	3%	
Agitation	1%	1%	2%	1%	
Loss of energy	1%	0%	3%	1%	
Stress	0%	0%	3%	1%	
Feeling worthless	1%	0%	1%	1%	
Anxiety	0%	1%	1%	1%	
Panic attack	1%	0%	0%	0%	
Diabetic pain	0%	0%	1%	0%	
Fatigue	0%	0%	1%	0%	
Loss of appetite	0%	0%	1%	0%	
Loss of concentration	0%	0%	1%	0%	
Tachycardia	0%	0%	1%	0%	
Sleeping too much	0%	0%	1%	0%	
Dizziness	0%	1%	0%	0%	
Fear	1%	0%	0%	0%	
Loss of confidence	1%	0%	0%	0%	
Nausea	1%	0%	0%	0%	
Total	100%	100%	100%	100%	

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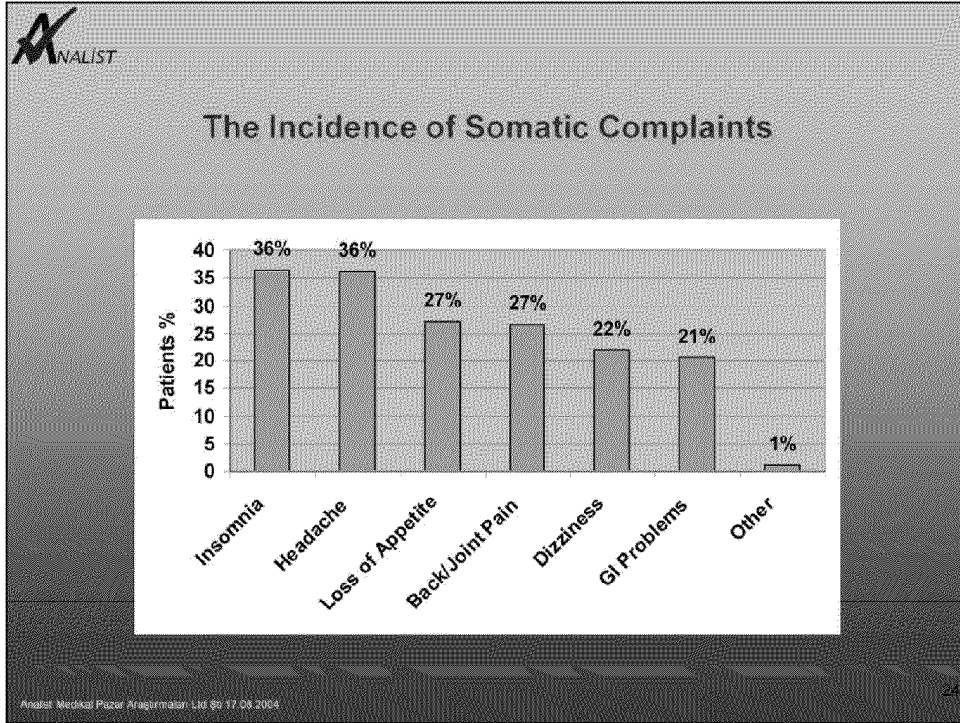



The Incidence of Somatic Complaints

- This time respondents were given a list somatic complaints and were asked to specify the percentage of patients experiencing each of the complaints. Respondents based their percentages on the total number of depressive patients experiencing somatic problems:

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The Incidence of Somatic Complaints

Complaints	N=	101	97	94	292
		GP	Neurology	Psychiatry	Total
Insomnia		32%	38%	39%	36%
Headache		32%	44%	33%	36%
Loss of Appetite		22%	27%	32%	27%
Back/Joint Pain		22%	30%	28%	27%
Dizziness		17%	27%	22%	22%
GI Problems		17%	22%	23%	21%
Other		1%	1%	1%	1%
TOTAL		145%	189%	178%	170%

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How Somatic Complaints Handled? (Mono / Combination Treatment)

- In this question respondents were asked how they generally handled each somatic complaint: They were given the alternatives of "Only Antidepressant" or "Two different antidepressants" or "One antidepressant and a drug from another therapeutic class":

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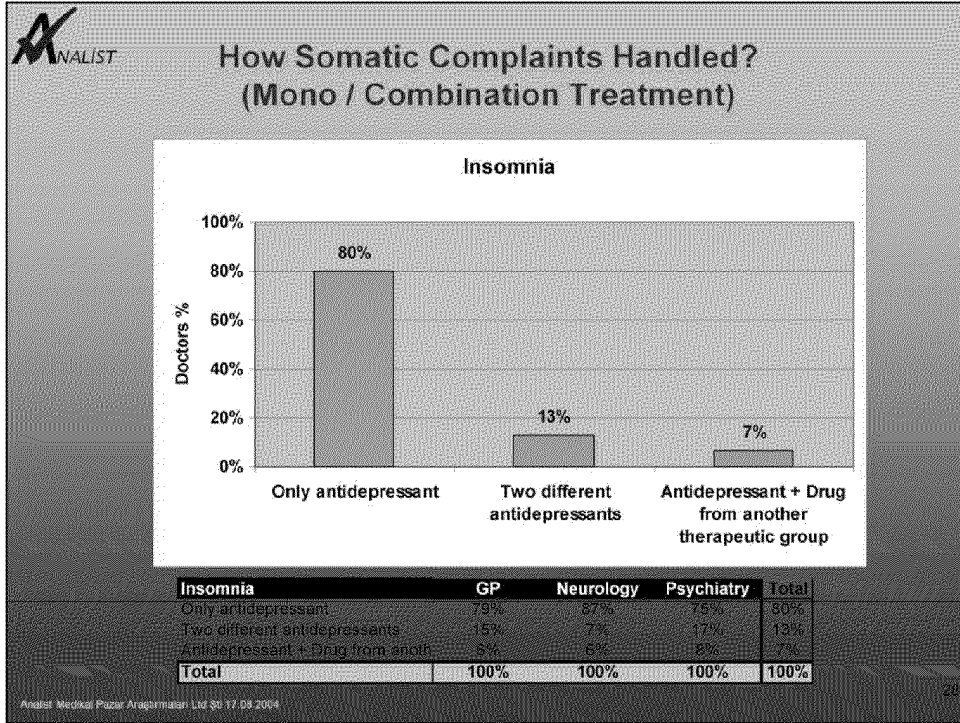
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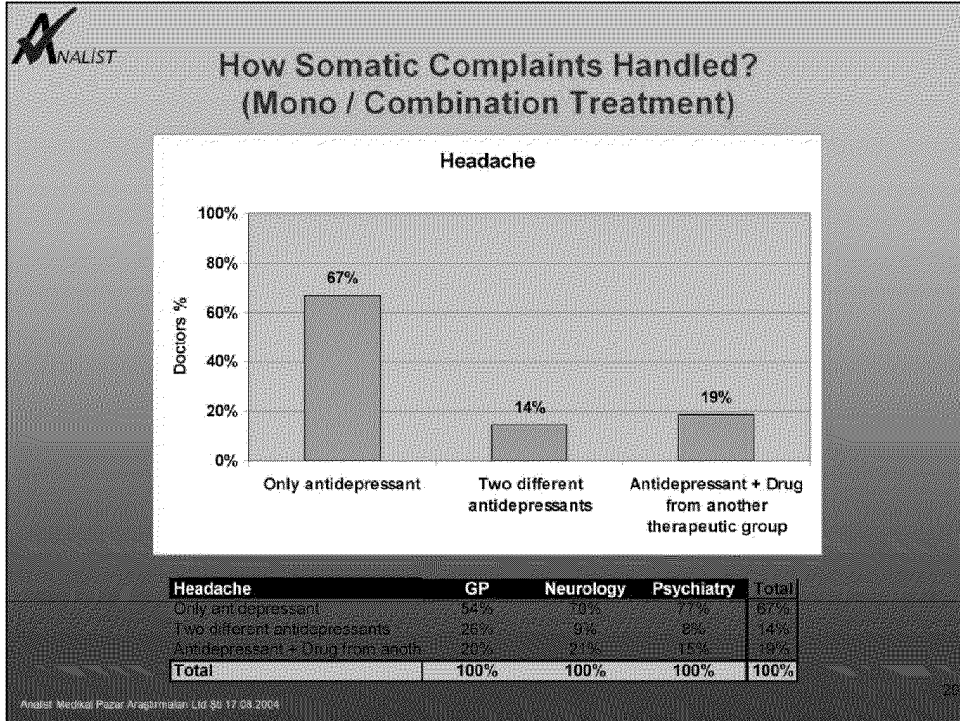


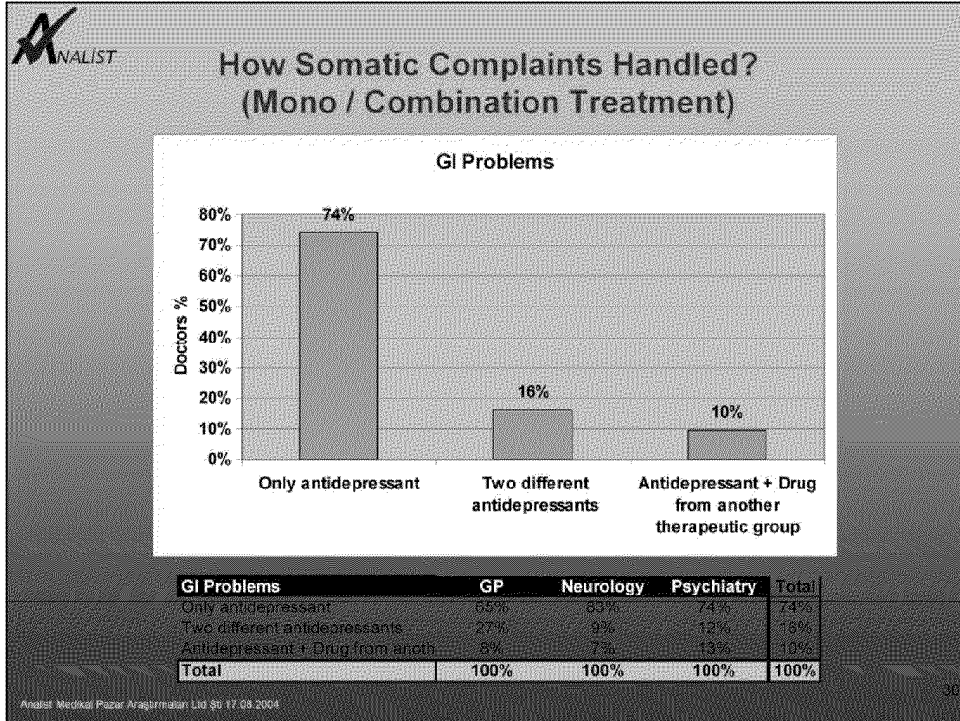
How Somatic Complaints Handled? (Mono / Combination Treatment)

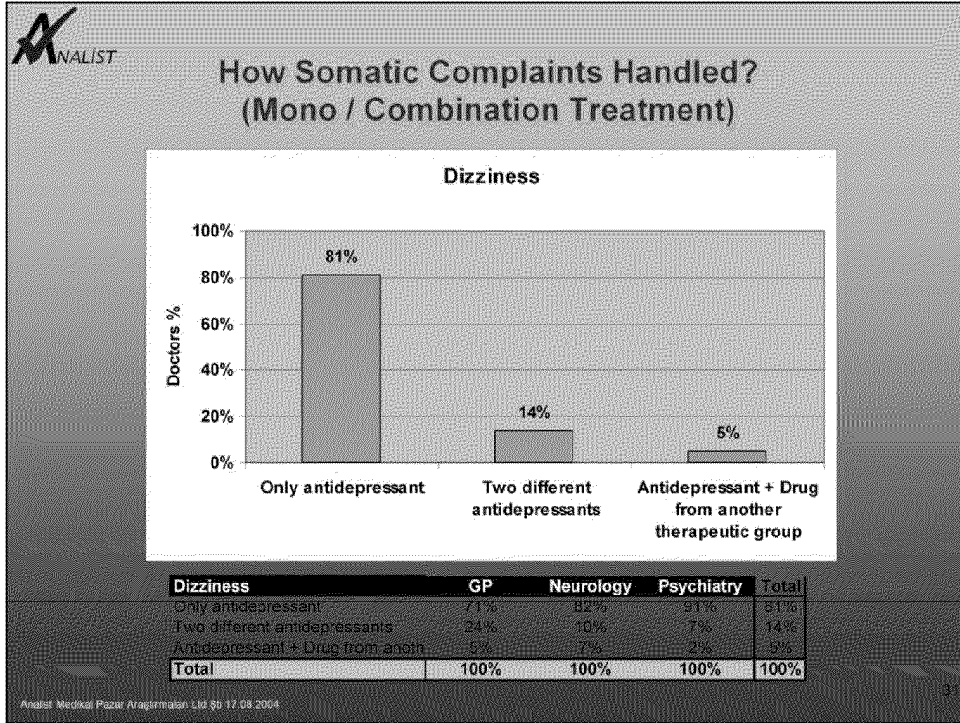
- *As observed in majority of the cases "Only antidepressant" therapy is preferred. This is a good news for Cymbalta:*
- *The good news is that doctors are ready to accept a single therapy that deals with every aspect of depression (from somatic problems to mood problems).*

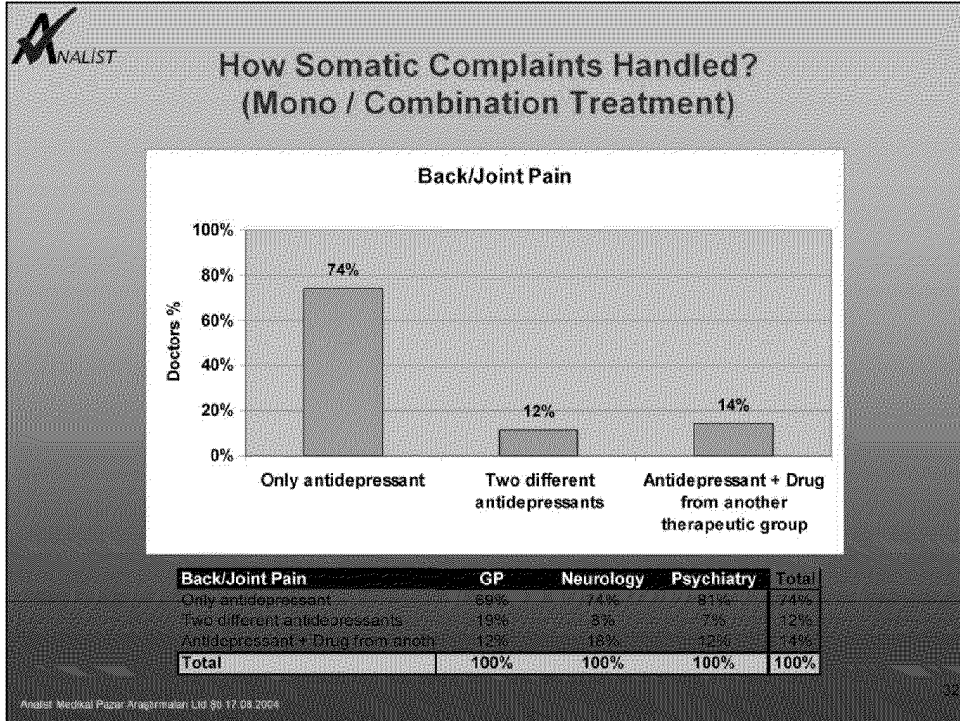
Analist Medical Pazar Arastirmaları Ltd Şti 17.08.2004

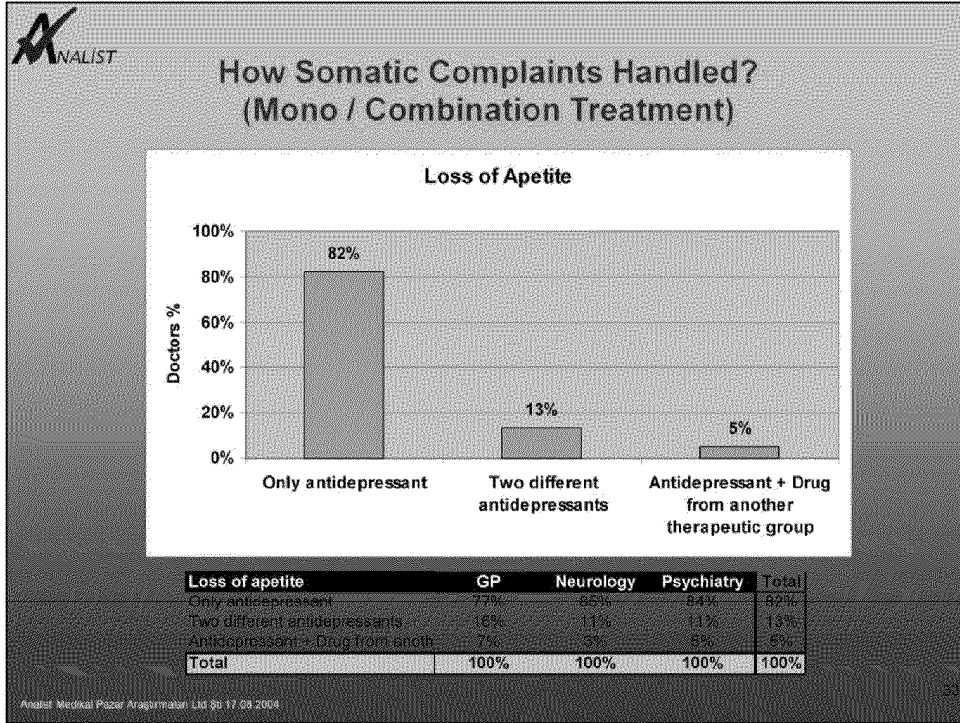















First Preferred Antidepressant in Case of Somatic Complaints

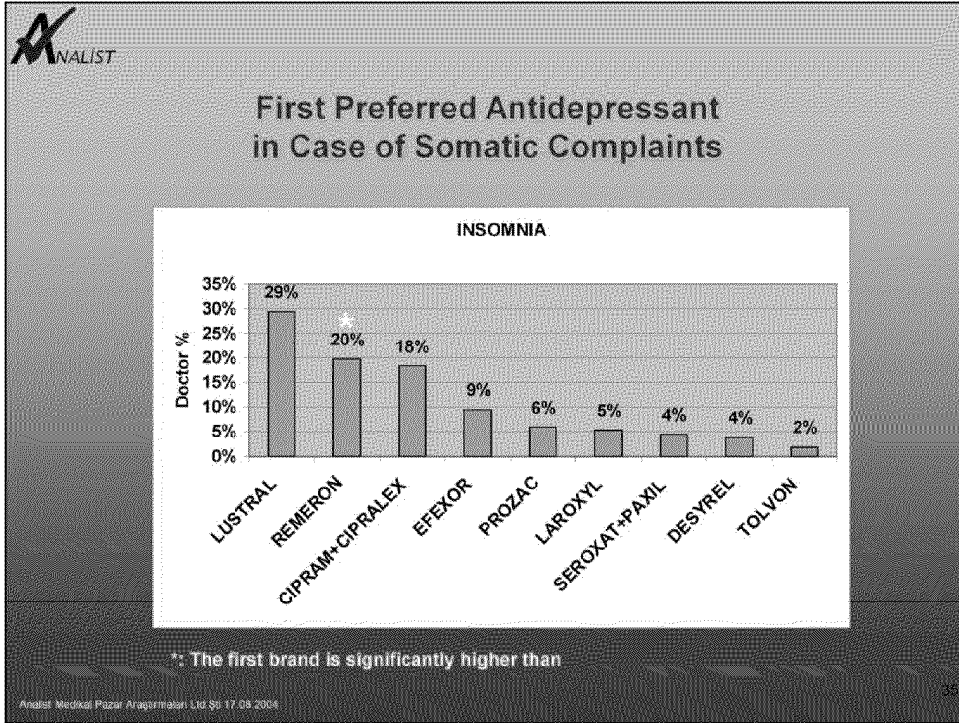
- Respondents were asked which antidepressant was their first preference in case of certain somatic problems:


AGGREGATE

- In all the somatic complaints more respondents mentioned Lustral as their first choice. In all the complaints Lustral's lead is a significant one except in Back / Joint Pain. It shares the leadership with Efexor in Back / Joint Pain.

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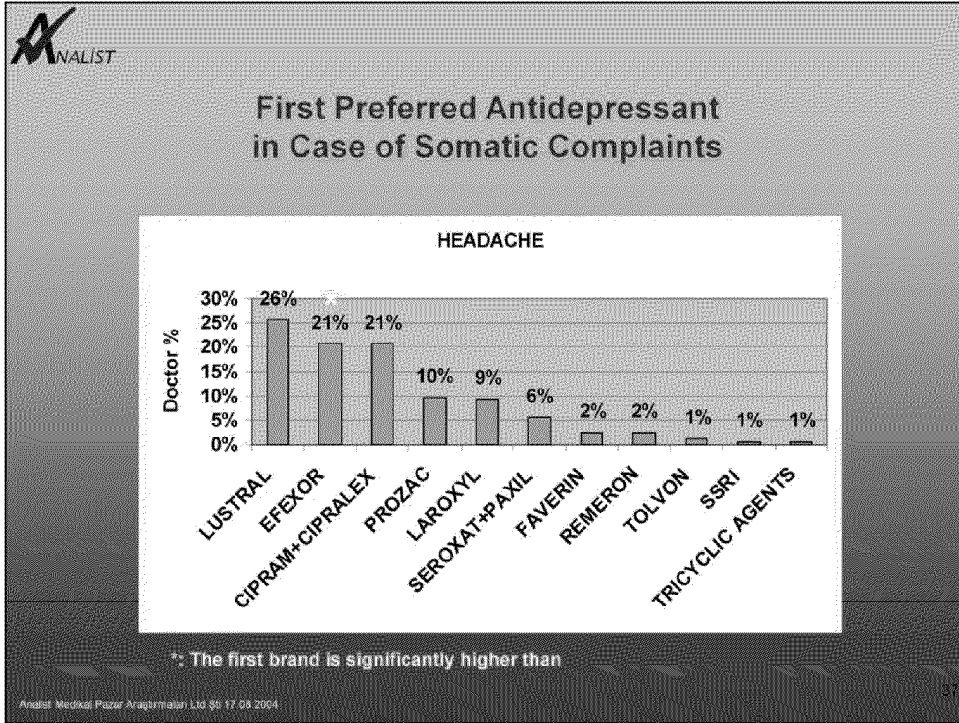





First Preferred Antidepressant in Case of Somatic Complaints

Insomnia - Preferred Antidepress.	GP	Neurology	Psychiatry	Total
LUSTRAL	41%	23%	24%	29%
REMERON	17%	18%	25%	20%
CIPRAM+ CIPRALEX	22%	17%	16%	18%
EFEKOR	4%	18%	6%	9%
PROZAC	8%	1%	9%	6%
LAROXYL	3%	6%	6%	5%
SEROXAT+PAXIL	1%	8%	4%	4%
DESYREL	2%	3%	6%	4%
TOLVON	1%	3%	2%	2%
ESLOPRAM	0%	1%	0%	0%
FAVERIN	0%	0%	1%	0%
SELECTRA	0%	1%	0%	0%
SSRI	1%	0%	0%	0%
TOFRANIL	0%	1%	0%	0%
Total	100%	100%	100%	100%

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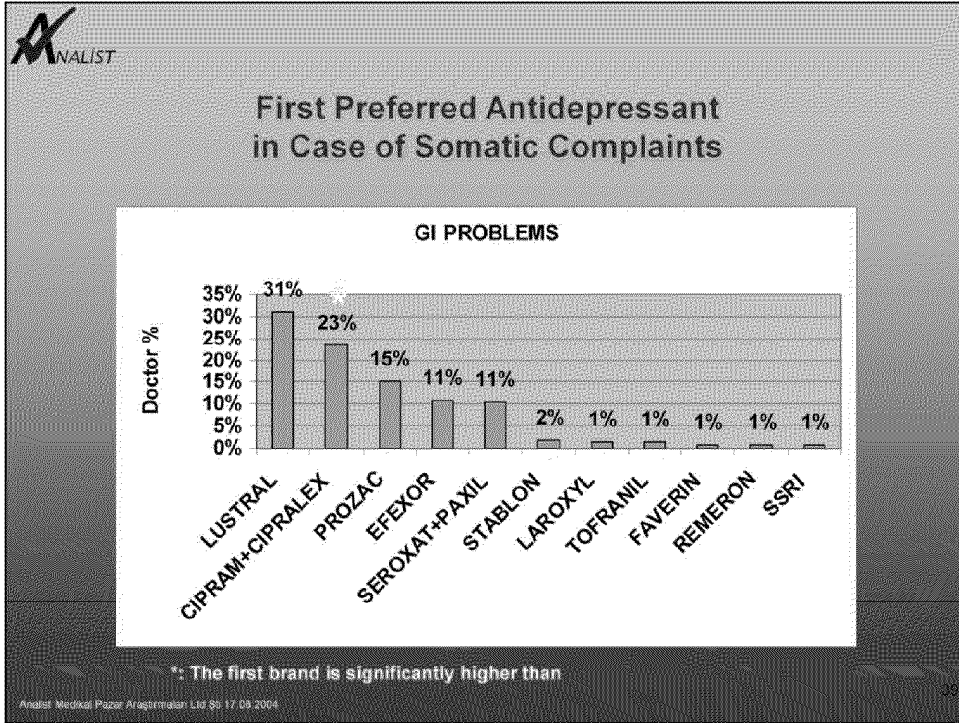





First Preferred Antidepressant in Case of Somatic Complaints

Headache - Preferred Antidepress.	GP	Neurology	Psychiatry	Total
LUSTRAL	32%	24%	21%	26%
EFEEXOR	10%	27%	26%	21%
CIPRAM+CIPRALEX	32%	18%	12%	21%
PROZAC	0%	9%	15%	10%
LAROXYL	5%	11%	12%	9%
SEROXAT+PAXIL	9%	8%	1%	6%
FAVERIN	1%	1%	5%	2%
REMERON	0%	4%	3%	2%
TOLVON	1%	0%	3%	1%
SSRI	1%	0%	1%	1%
TRICYCLIC AGENTS	1%	1%	0%	1%
AURORIX	1%	0%	0%	0%
CITOL	1%	0%	0%	0%
SERDEP	1%	0%	0%	0%
Total	100%	100%	100%	100%

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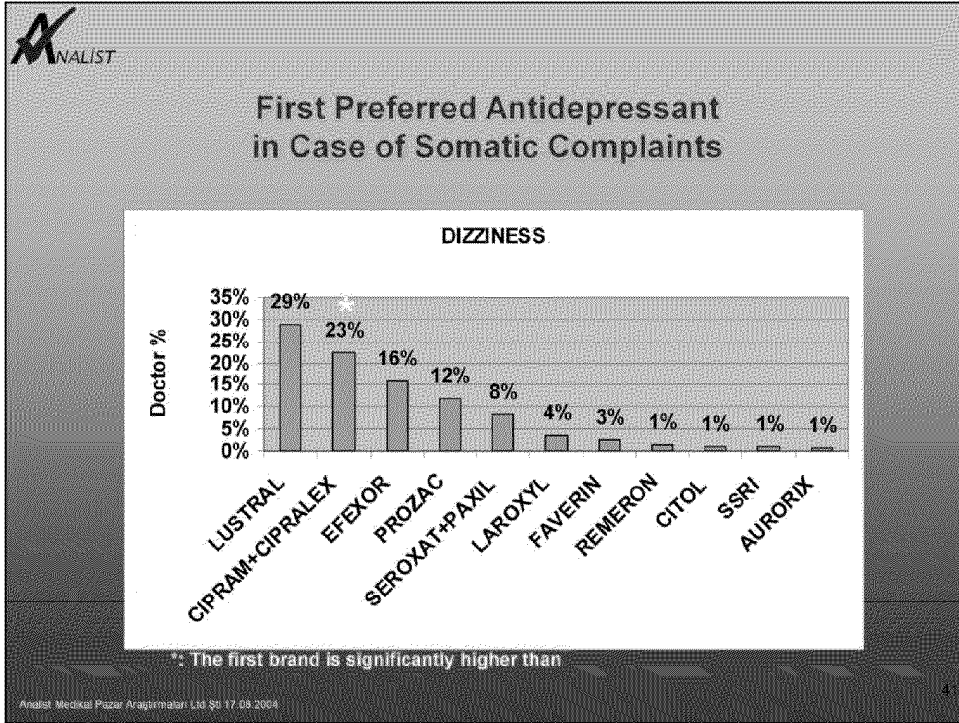



First Preferred Antidepressant in Case of Somatic Complaints

GI Problems - Preferred Antidepress.	GP	Neurology	Psychiatry	Total
LUSTRAL	34%	37%	22%	31%
CIPRAM+CIPRALEX	23%	28%	18%	23%
PROZAC	18%	13%	15%	15%
EFEXOR	10%	9%	13%	11%
SEROXAT+PAXIL	10%	7%	15%	11%
STABLON	2%	0%	3%	2%
LAROXYL	0%	1%	3%	1%
TOFRANIL	0%	2%	2%	1%
FAVERIN	0%	1%	1%	1%
REMERON	0%	0%	2%	1%
SSRI	0%	0%	2%	1%
AURORIX	0%	1%	0%	0%
DESYREL	0%	0%	1%	0%
INSOMIN	1%	0%	0%	0%
IXEL	0%	0%	1%	0%
TRICYCLIC AGENTS	1%	0%	0%	0%
Total	100%	100%	100%	100%

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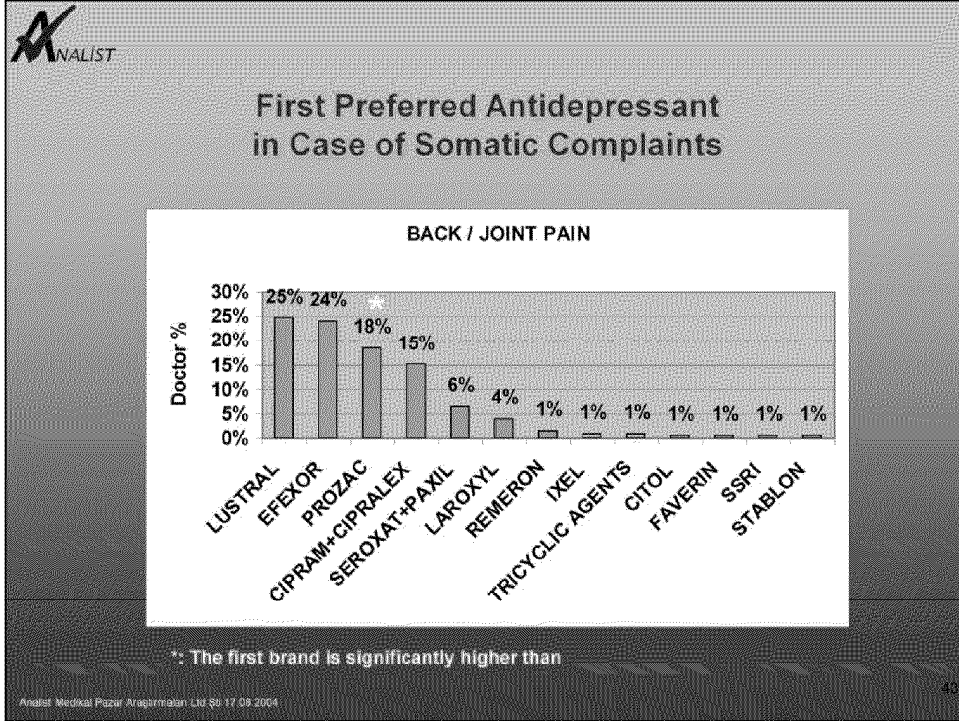





First Preferred Antidepressant in Case of Somatic Complaints

Dizziness - Preferred Antidepress.	GP	Neurology	Psychiatry	Total
LUSTRAL	43%	19%	26%	29%
CIPRAM+CIPRALEX	29%	24%	14%	23%
EFEEXOR	12%	20%	16%	16%
PROZAC	9%	14%	13%	12%
SEROXAT+PAXIL	4%	11%	9%	8%
LAROXYL	1%	7%	2%	4%
FAVERIN	0%	0%	8%	3%
REMERON	1%	1%	2%	1%
CITOL	0%	2%	1%	1%
SSRI	1%	0%	2%	1%
AURORIX	0%	1%	1%	1%
STABLON	0%	1%	1%	1%
TOLVON	0%	0%	2%	1%
ANAFRANIL	0%	0%	1%	0%
DESYREL	0%	0%	1%	0%
TRICYCLIC AGENTS	1%	0%	0%	0%
Total	100%	100%	100%	100%

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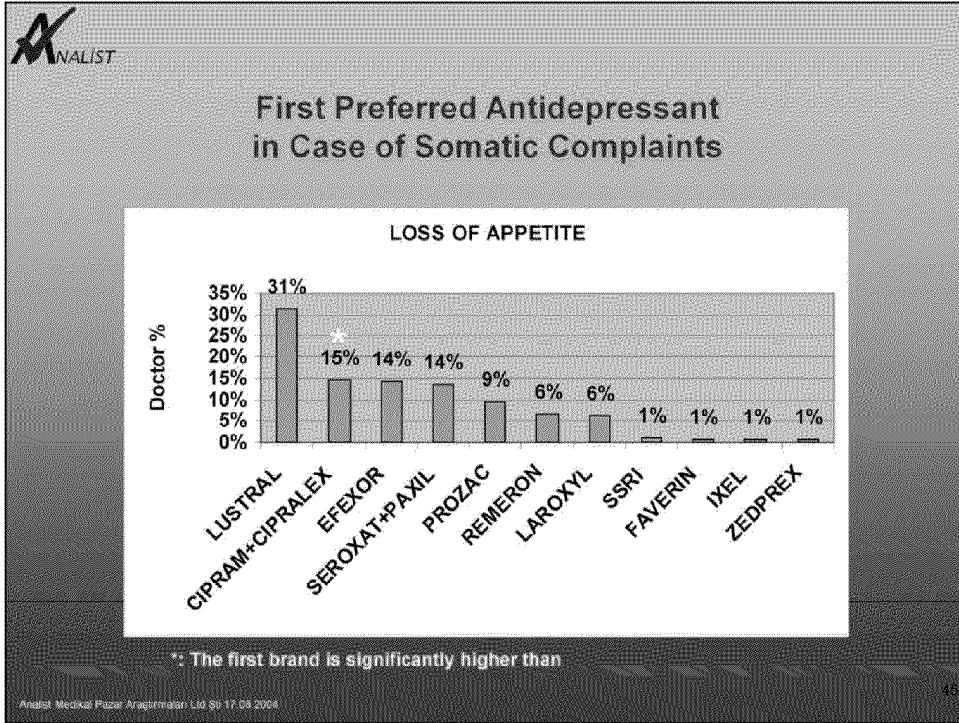





First Preferred Antidepressant in Case of Somatic Complaints

Back/Joint Pain - Preferred Antidepress.	GP	Neurology	Psychiatry	Total
LUSTRAL	24%	23%	27%	25%
EFEXOR	24%	25%	22%	24%
PROZAC	21%	11%	24%	18%
CIPRAM+CIPRALEX	16%	20%	9%	15%
SEROXAT+PAXIL	6%	8%	4%	6%
LAROXYL	2%	6%	3%	4%
REMERON	0%	3%	1%	1%
IXELU	0%	1%	2%	1%
TRICYCLIC AGENTS	3%	0%	0%	1%
CITOL	0%	1%	1%	1%
FAVERIN	0%	0%	2%	1%
SSRI	0%	0%	2%	1%
STABLON	0%	1%	1%	1%
AURORIX	1%	0%	0%	0%
SERDEP	1%	0%	0%	0%
Total	100%	100%	100%	100%

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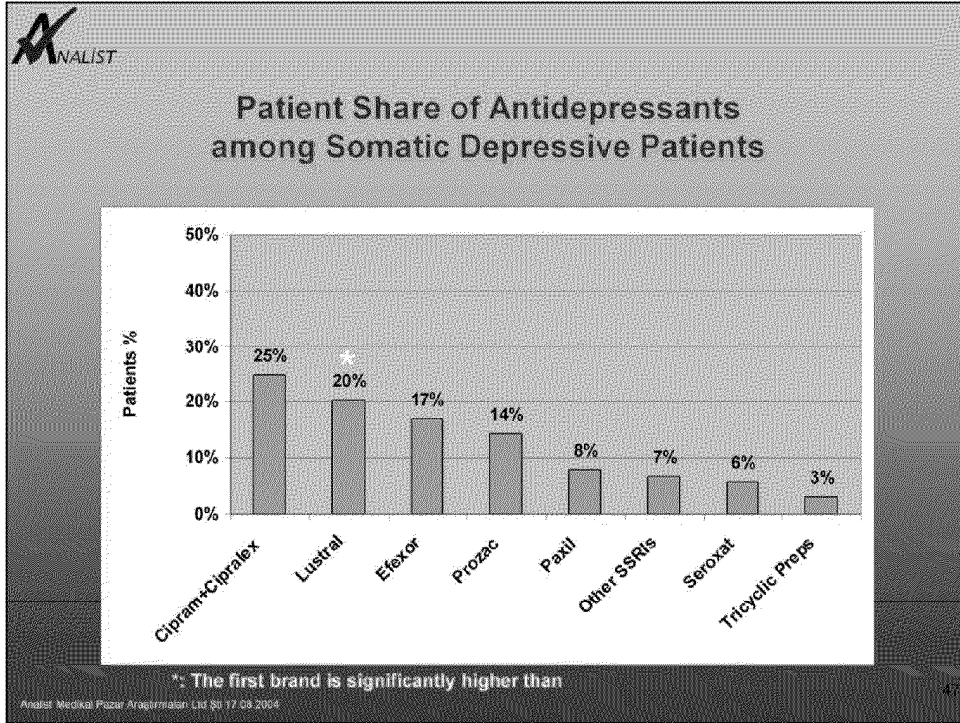


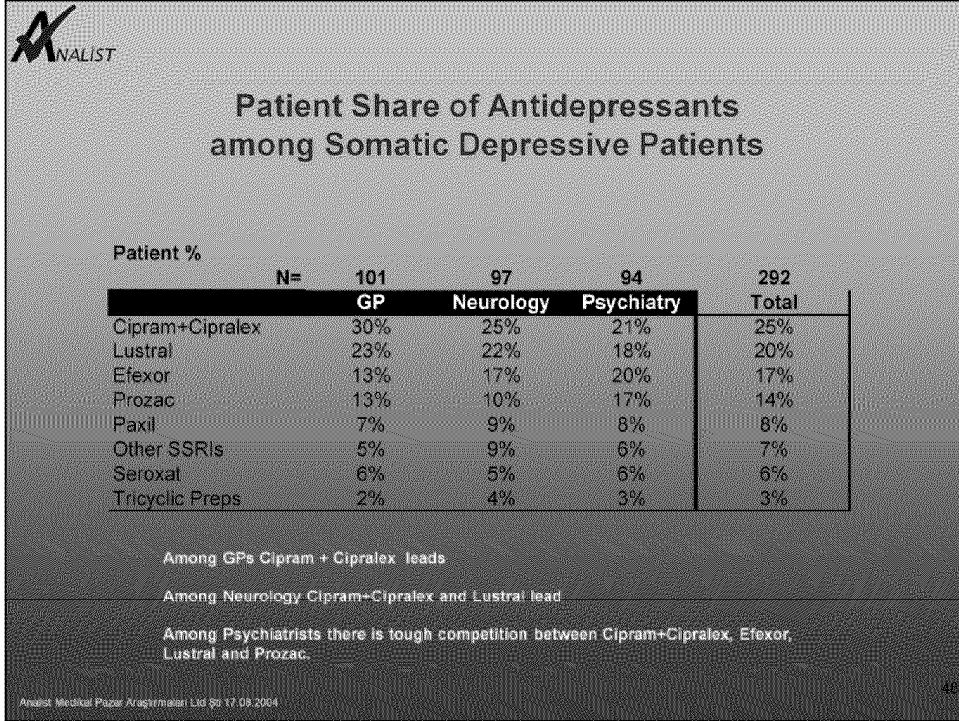


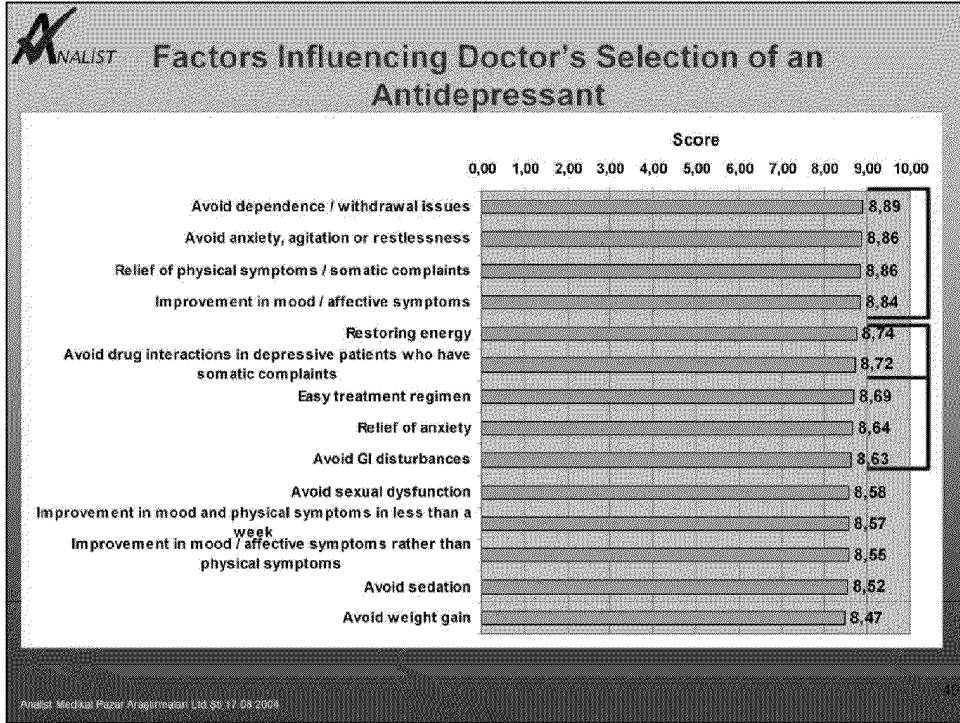
First Preferred Antidepressant in Case of Somatic Complaints


Loss of Appetite - Preferred Antidepress.	GP	Neurology	Psychiatry	Total
LUSTRAL	27%	34%	33%	31%
CIPRAM+CIPRALEX	16%	17%	12%	15%
EFEEXOR	11%	15%	17%	14%
SEROXAT+PAXIL	17%	14%	11%	14%
PROZAC	19%	4%	5%	9%
REMERON	6%	4%	10%	6%
LAROXYL	2%	11%	4%	6%
SSRI	1%	0%	2%	1%
FAVERIN	0%	0%	2%	1%
IXEL	0%	0%	2%	1%
ZEDPREX	0%	1%	1%	1%
INSOMIN	1%	0%	0%	0%
TRICYCLIC AGENTS	1%	0%	0%	0%
Total	100%	100%	100%	100%

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Factors Influencing Doctor's Selection of an Antidepressant (Sorted according to Total)

	N=			292
	101	97	94	Total
	GP	Neurology	Psychiatry	
Avoid dependence / withdrawal issues	8.89	8.88	8.91	8.89
Avoid anxiety, agitation or restlessness	8.71	8.69	9.19	8.86
Relief of physical symptoms / somatic complaints	8.81	9.11	8.64	8.86
Improvement in mood / affective symptoms	8.77	8.81	8.94	8.84
Restoring energy	8.62	8.77	8.82	8.74
Avoid drug interactions in depressive patients who have somatic complaints	8.59	8.70	8.88	8.72
Easy treatment regimen	8.53	8.60	8.86	8.69
Relief of anxiety	8.30	8.73	8.93	8.64
Avoid GI disturbances	8.57	8.66	8.66	8.63
Avoid sexual dysfunction	8.37	8.60	8.79	8.58
Improvement in mood and physical symptoms in less than a week	8.27	8.71	8.74	8.57
Improvement in mood / affective symptoms rather than physical symptoms	8.25	8.69	8.74	8.55
Avoid sedation	8.37	8.63	8.59	8.52
Avoid weight gain	8.29	8.53	8.60	8.47

The results show that when promoting Cymbalta to doctors four factors ("Avoid dependence / withdrawal issues", "Avoid anxiety, agitation or restlessness", "Relief of physical symptoms / somatic complaints", "Improvement in mood / affective symptoms" must be addressed in order for a productive communication.

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**Factors Influencing Doctor's Selection of an Antidepressant
(Sorted according to GP)**

	N=	101	97	94	292
		GP	Neurology	Psychiatry	Total
Avoid dependence / withdrawal issues		8.89	8.88	8.91	8.89
Relief of physical symptoms / somatic complaints		8.81	9.11	8.64	8.86
Improvement in mood / affective symptoms		8.77	8.81	8.94	8.84
Avoid anxiety, agitation or restlessness		8.71	8.69	9.19	8.86
Restoring energy		8.62	8.77	8.82	8.74
Avoid drug interactions in depressive patients who have somatic complaints		8.59	8.70	8.88	8.72
Avoid GI disturbances		8.57	8.66	8.66	8.63
Easy treatment regimen		8.53	8.69	8.86	8.69
Avoid sexual dysfunction		8.37	8.60	8.79	8.59
Avoid sedation		8.37	8.63	8.59	8.52
Relief of anxiety		8.30	8.73	8.93	8.64
Avoid weight gain		8.29	8.53	8.60	8.47
Improvement in mood and physical symptoms in less than a week		8.27	8.71	8.74	8.57
Improvement in mood / affective symptoms rather than physical symptoms		8.25	8.69	8.74	8.55

Same comment as aggregate (total) result

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Factors Influencing Doctor's Selection of an Antidepressant (Sorted according to Neurology)

	N=	101	97	94	292
		GP	Neurology	Psychiatry	Total
Relief of physical symptoms / somatic complaints		8,81	9,11	8,64	8,86
Avoid dependence / withdrawal issues		8,89	8,88	8,81	8,89
Improvement in mood / affective symptoms		8,77	8,81	8,84	8,84
Restoring energy		8,62	8,77	8,82	8,74
Relief of anxiety		8,30	8,73	8,93	8,64
Improvement in mood and physical symptoms in less than a week		8,27	8,71	8,74	8,57
Avoid drug interactions in depressive patients who have somatic complaints		8,59	8,70	8,88	8,72
Avoid anxiety, agitation or restlessness		8,71	8,69	9,19	8,86
Easy treatment regimen		8,53	8,69	8,85	8,69
Improvement in mood / affective symptoms rather than physical symptoms		8,25	8,69	8,74	8,55
Avoid GI disturbances		8,57	8,66	8,65	8,63
Avoid sedation		8,37	8,63	8,59	8,52
Avoid sexual dysfunction		8,37	8,60	8,79	8,58
Avoid weight gain		8,29	8,53	8,60	8,47

These results (together with the previous ones) indicate that when promoting Cymbalta to Neurologists "Relief of somatic symptoms" has to be mentioned at the first place.

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Factors Influencing Doctor's Selection of an Antidepressant (Sorted according to Psychiatry)


	N=	101	97	94	292
		GP	Neurology	Psychiatry	Total
Avoid anxiety, agitation or restlessness		8,71	8,69	9,19	8,86
Improvement in mood / affective symptoms		8,77	8,81	8,94	8,84
Relief of anxiety		8,30	8,73	8,93	8,64
Avoid dependence / withdrawal issues		8,89	8,88	8,91	8,89
Avoid drug interactions in depressive patients who have somatic complaints		8,59	8,70	8,88	8,72
Easy treatment regimen		8,53	8,69	8,86	8,69
Restoring energy		8,62	8,77	8,82	8,74
Avoid sexual dysfunction		8,37	8,60	8,79	8,58
Improvement in mood and physical symptoms in less than a week		8,27	8,71	8,74	8,57
Improvement in mood / affective symptoms rather than physical symptoms		8,25	8,69	8,74	8,55
Avoid GI disturbances		8,57	8,65	8,65	8,63
Relief of physical symptoms / somatic complaints		8,81	9,11	8,64	8,86
Avoid weight gain		8,29	8,53	8,60	8,47
Avoid sedation		8,37	8,63	8,59	8,52

When promoting Cymbalta to Psychiatrists, to gain confidence to the drug, it has to be mentioned that Cymbalta does not cause anxiety, agitation or restlessness.

It is a positive point for Cymbalta to see that "Improvement in mood / affective symptoms rather than physical symptoms" were evaluated to be medium to low importance compared to other factors. This means that physical symptoms areas important as mood /affective symptoms.

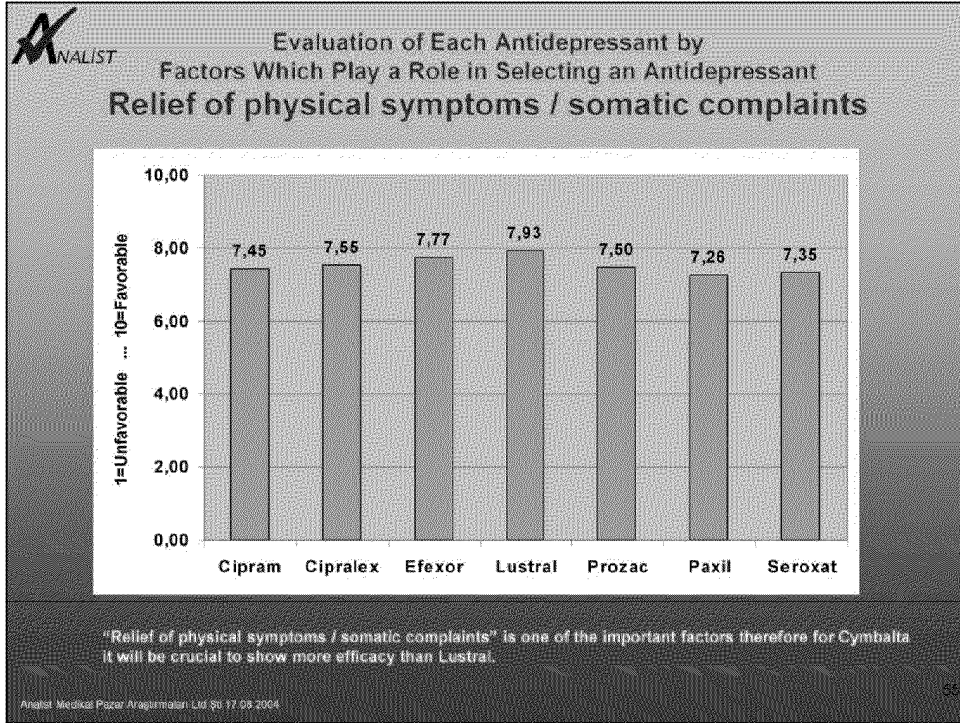
Nevertheless when promoting to Psychiatrists talking first about Cymbalta's efficacy to mood symptoms then its efficacy to physical symptoms will be more appropriate.


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 **Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Relief of physical symptoms / somatic complaints**

- Doctors were presented with factors which play a role in preferring an antidepressant and were requested to rate some of the antidepressants according to each factor. There were 7 antidepressants (Cipram-citalopram, Cipralex-escitalopram, Efexor-venlafaxin, Lustral-sertraline, Paxil-paroxetine, Prozac-fluoxetine, Seroxat-paroxetine) and doctors were asked to rate each antidepressant for each factor on a scale of 1= Do not agree at all / Not Successful ..., 10= I totally agree / Very successful; for "No idea" "X" was used. No idea was not included in calculations.

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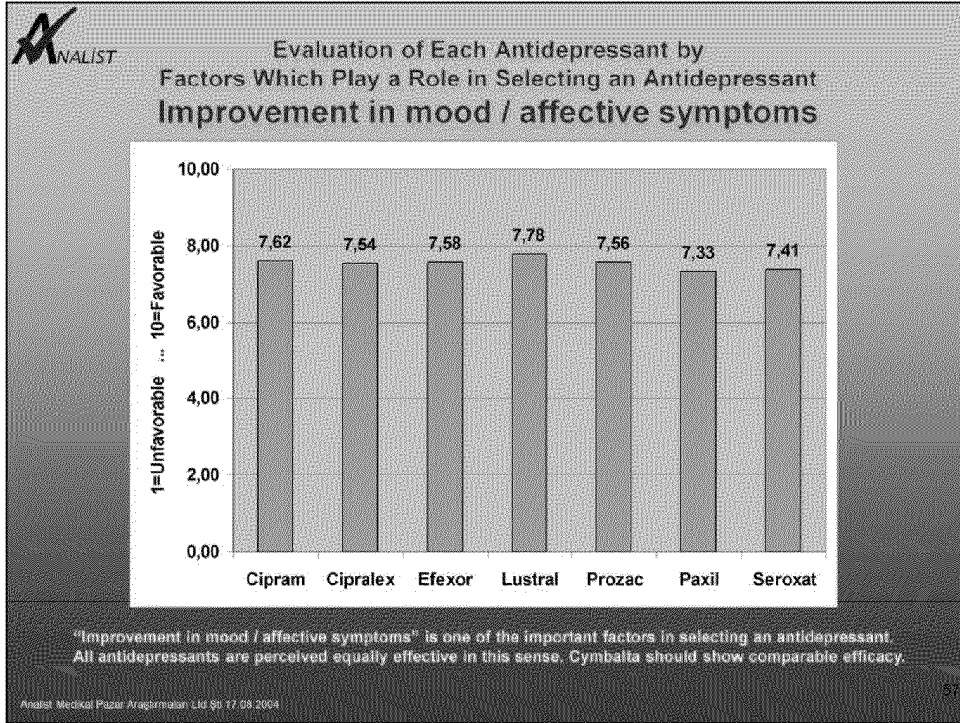





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Relief of physical symptoms / somatic complaints**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7,80	7,49	7,02	7,45	273,00
Cipralex	7,73	7,59	7,31	7,55	245,00
Efexor	7,64	7,79	7,88	7,77	282,00
Lustral	8,26	7,77	7,72	7,93	283,00
Prozac	7,82	7,27	7,38	7,50	274,00
Paxil	7,37	7,22	7,19	7,26	234,00
Seroxat	7,38	7,34	7,32	7,35	251,00

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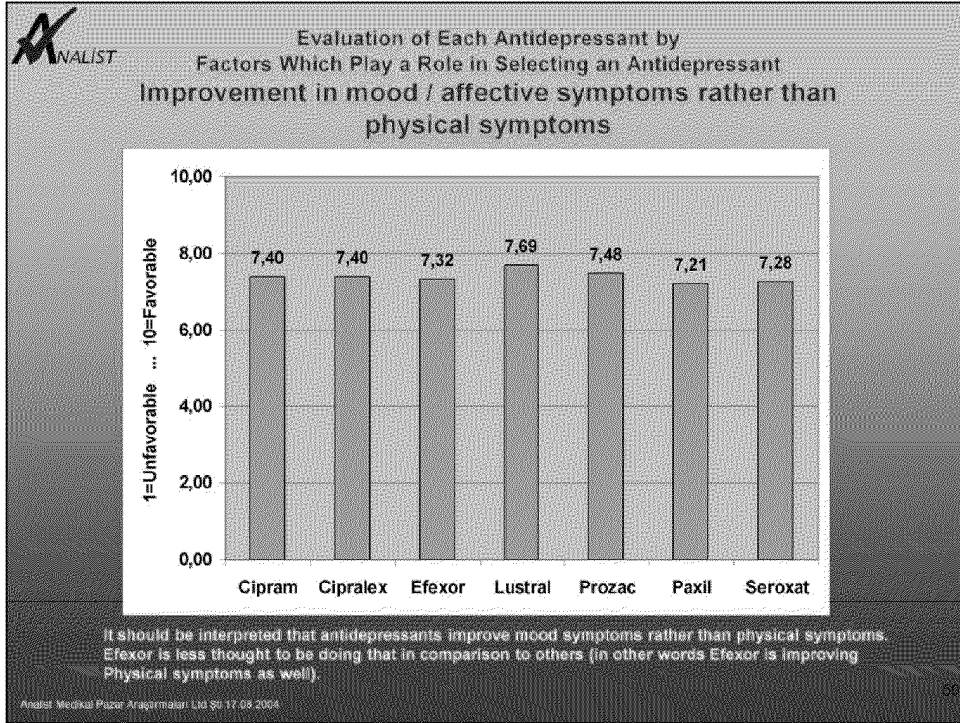





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Improvement in mood / affective symptoms**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7,69	7,57	7,58	7,62	272,00
Cipralext	7,63	7,54	7,44	7,54	246,00
Efexor	7,60	7,54	7,60	7,58	261,00
Lustral	7,96	7,66	7,70	7,78	260,00
Prozac	7,57	7,56	7,56	7,56	277,00
Paxil	7,19	7,51	7,30	7,33	231,00
Seroxat	7,29	7,41	7,54	7,41	249,00

Analist Medical Pazar Arastirmalari Ltd 01.12.08.2009

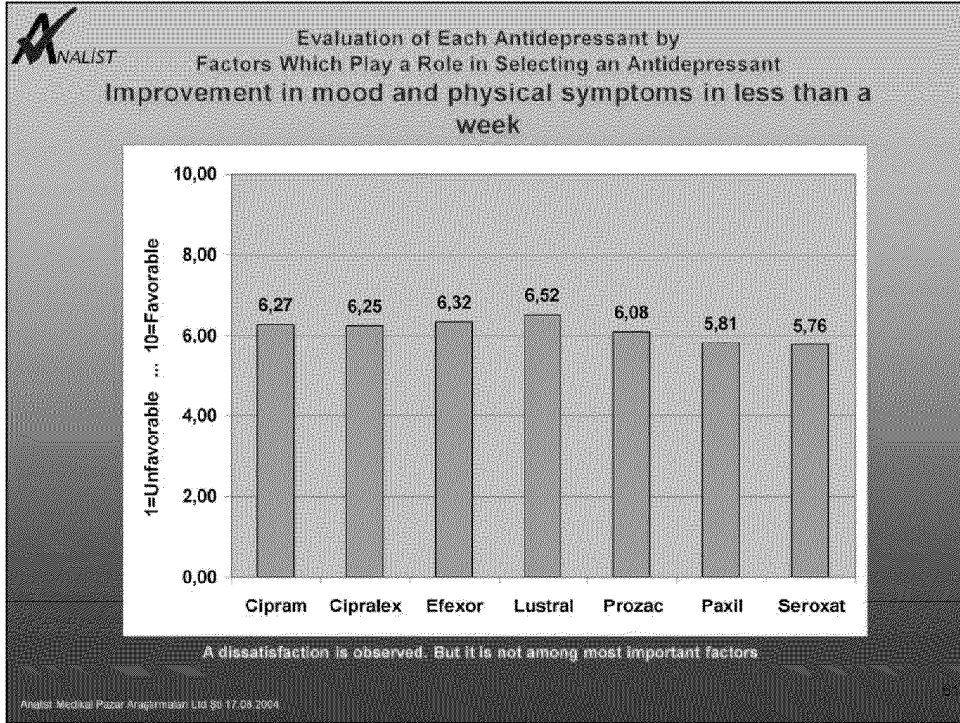





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Improvement in mood / affective symptoms rather than
physical symptoms**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7,47	7,42	7,32	7,40	266,00
Ciprallex	7,51	7,34	7,35	7,40	240,00
Efexor	7,35	7,36	7,26	7,32	275,00
Lustral	7,90	7,42	7,74	7,69	276,00
Prozac	7,33	7,36	7,75	7,48	272,00
Paxil	7,08	7,35	7,21	7,21	228,00
Seroxat	7,20	7,25	7,42	7,28	244,00

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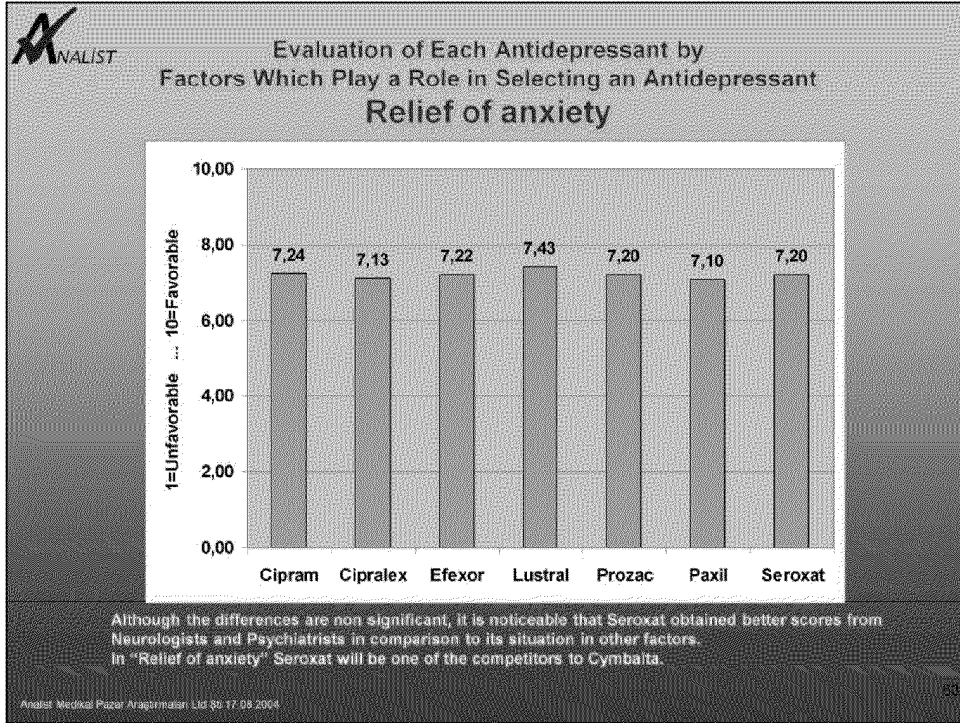





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Improvement in mood and physical symptoms in less than a
week**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	6,53	6,16	6,08	6,27	267,00
Cipralext	6,53	6,19	6,01	6,25	241,00
Efexor	6,38	6,28	6,30	6,32	276,00
Lustral	6,85	6,42	6,26	6,52	276,00
Prozac	6,36	6,14	5,72	6,08	270,00
Paxil	6,17	5,90	5,37	5,61	225,00
Sercxat	6,14	5,72	5,36	5,76	244,00

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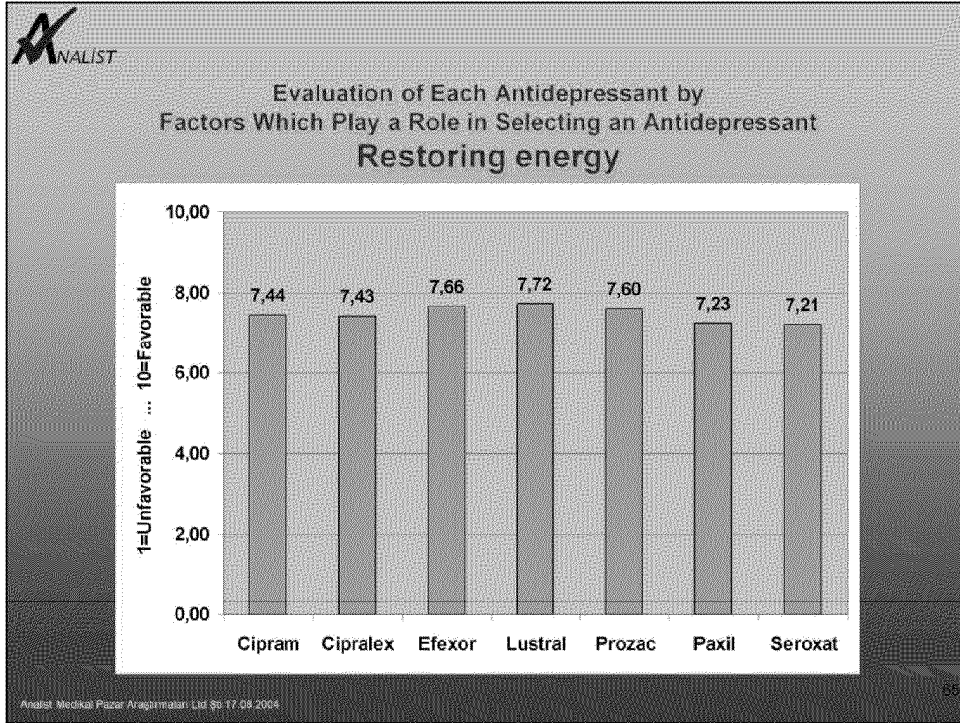





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Relief of anxiety**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7,65	7,01	7,04	7,24	264,00
Cipralext	7,49	6,95	6,95	7,13	239,00
Efexor	7,31	7,12	7,24	7,22	272,00
Lustral	7,57	7,21	7,49	7,43	270,00
Prozac	7,32	6,99	7,30	7,20	268,00
Paxil	7,10	6,96	7,24	7,10	220,00
Seroxat	7,01	7,14	7,46	7,20	237,00

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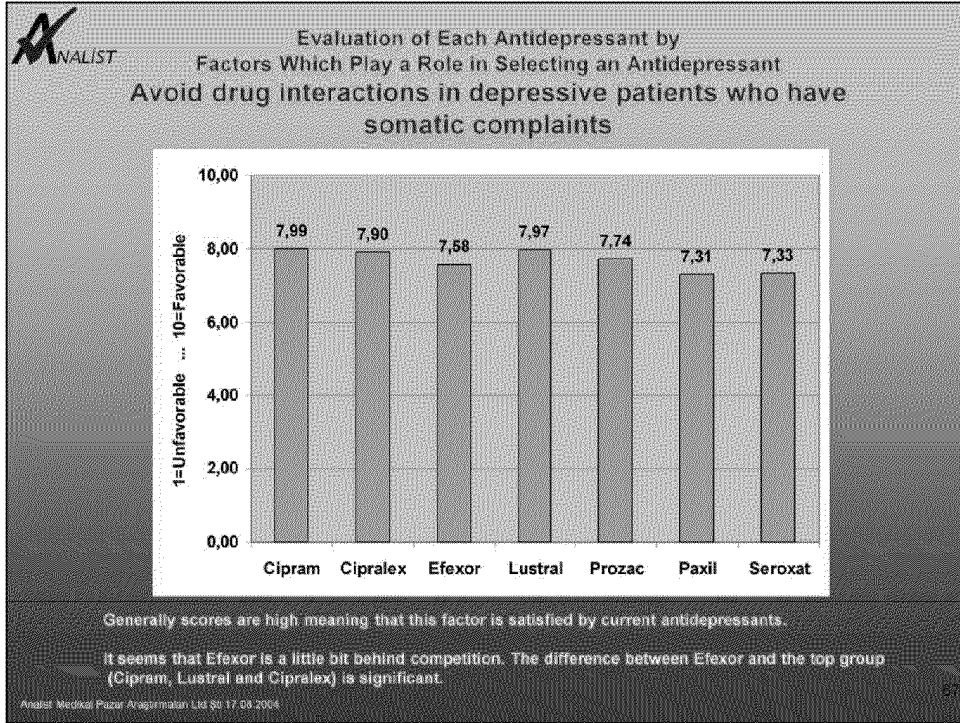





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Restoring energy**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7.80	7.34	7.18	7.44	268.00
Cipralext	7.75	7.35	7.19	7.43	242.00
Efexor	7.73	7.63	7.61	7.66	277.00
Lustral	7.95	7.52	7.69	7.72	276.00
Prozac	7.85	7.32	7.62	7.60	270.00
Paxil	7.51	7.18	7.01	7.23	226.00
Seroxat	7.44	7.09	7.05	7.21	243.00

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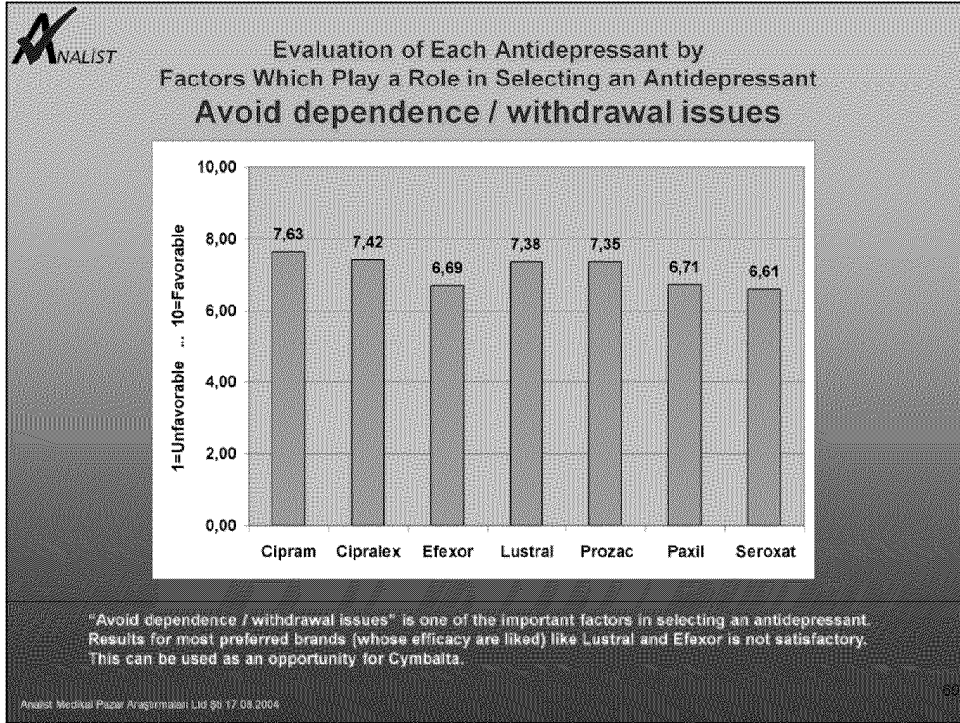




**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Avoid drug interactions in depressive patients who have
somatic complaints**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	8,23	7,83	7,87	7,99	268,00
Cipralext	8,19	7,80	7,68	7,90	242,00
Efexor	7,83	7,48	7,43	7,58	276,00
Lustral	8,22	7,81	7,87	7,97	276,00
Prozac	7,86	7,61	7,63	7,74	249,00
Paxil	7,57	7,30	7,05	7,31	225,00
Seroxat	7,67	7,17	7,10	7,33	242,00

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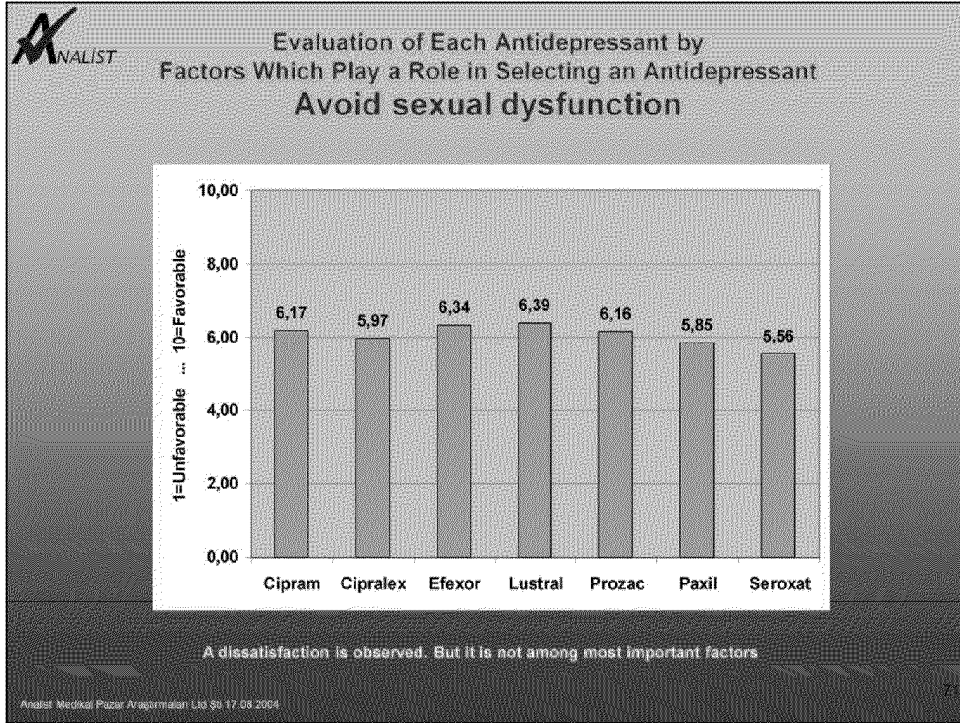



Evaluation of Each Antidepressant by
 Factors Which Play a Role in Selecting an Antidepressant
Avoid dependence / withdrawal issues

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7.86	7.36	7.63	7.63	268.00
Cipralext	7.79	7.15	7.27	7.42	244.00
Efexor	6.97	6.70	6.37	6.69	280.00
Lustral	7.87	7.13	7.06	7.38	279.00
Prozac	7.62	7.02	7.40	7.35	273.00
Paxil	7.32	6.84	6.01	6.71	227.00
Seroxat	7.13	6.52	6.11	6.61	247.00

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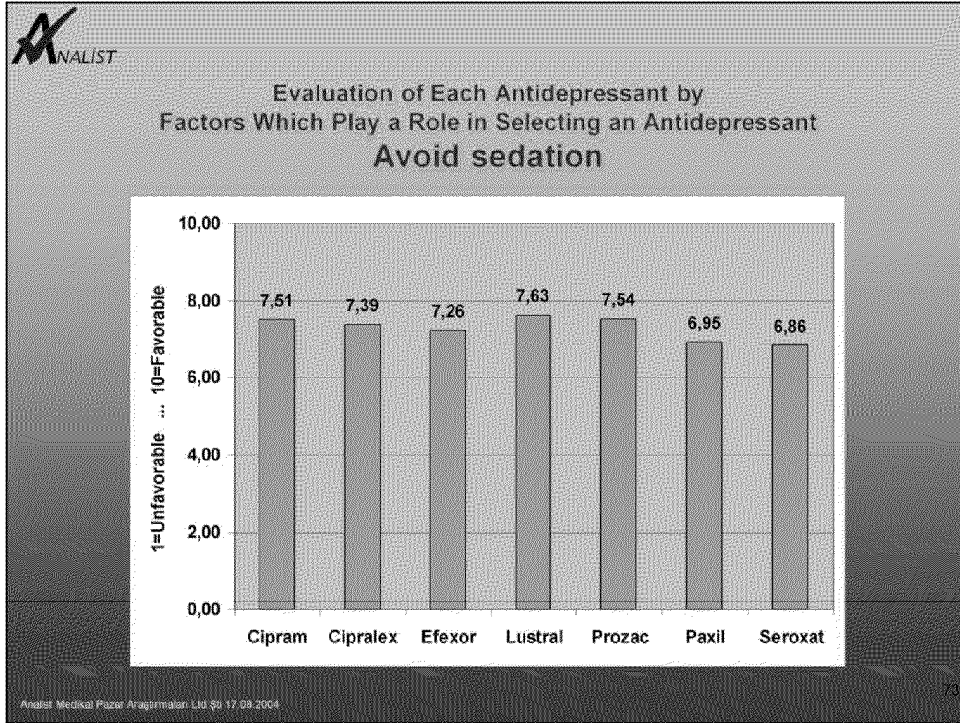





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Avoid sexual dysfunction**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7.00	6.00	5.45	6.17	264.00
Cipralext	6.82	5.82	5.17	5.97	239.00
Efexor	6.97	6.19	6.83	6.34	273.00
Lustral	6.96	6.17	5.97	6.39	275.00
Prozac	6.74	5.91	5.78	6.16	269.00
Paxil	6.70	5.77	5.05	5.85	223.00
Seroxtat	6.27	5.41	4.87	5.56	241.00

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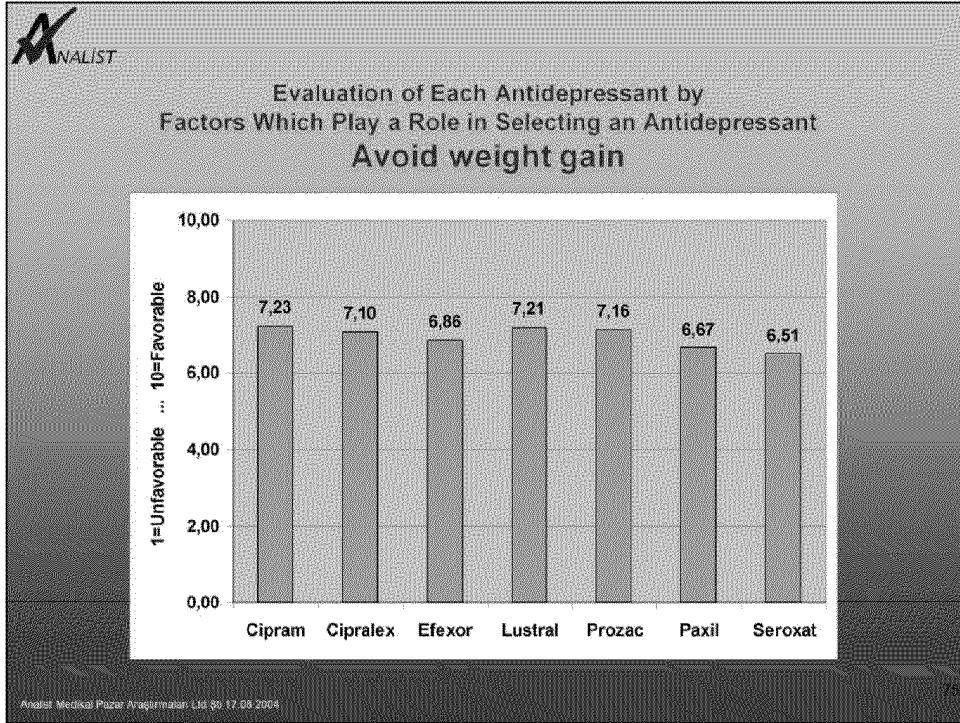




**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Avoid sedation**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7,76	7,23	7,53	7,51	263,00
Cipralex	7,74	7,22	7,19	7,39	235,00
Efexor	7,53	6,93	7,30	7,26	258,00
Lustral	8,04	7,20	7,61	7,63	273,00
Prozac	7,71	7,32	7,57	7,54	256,00
Paxil	7,50	6,93	6,47	6,95	219,00
Seroxel	7,34	6,61	6,59	6,66	238,00

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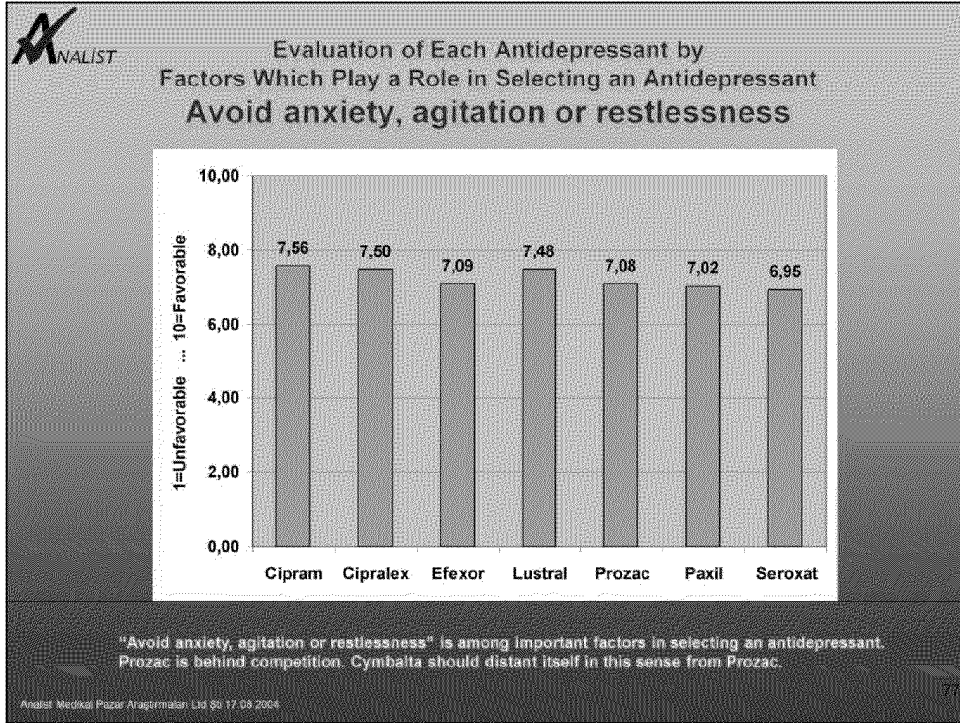



Evaluation of Each Antidepressant by
 Factors Which Play a Role in Selecting an Antidepressant
Avoid weight gain

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7,59	7,00	7,07	7,23	267,00
Cipralext	7,46	6,93	6,82	7,10	241,00
Efexor	7,01	6,83	6,69	6,86	280,00
Lustral	7,53	7,02	7,06	7,21	279,00
Prozac	7,25	7,00	7,23	7,16	270,00
Paxil	7,39	6,63	6,04	6,67	223,00
Seroxat	7,02	6,29	6,16	6,51	245,00

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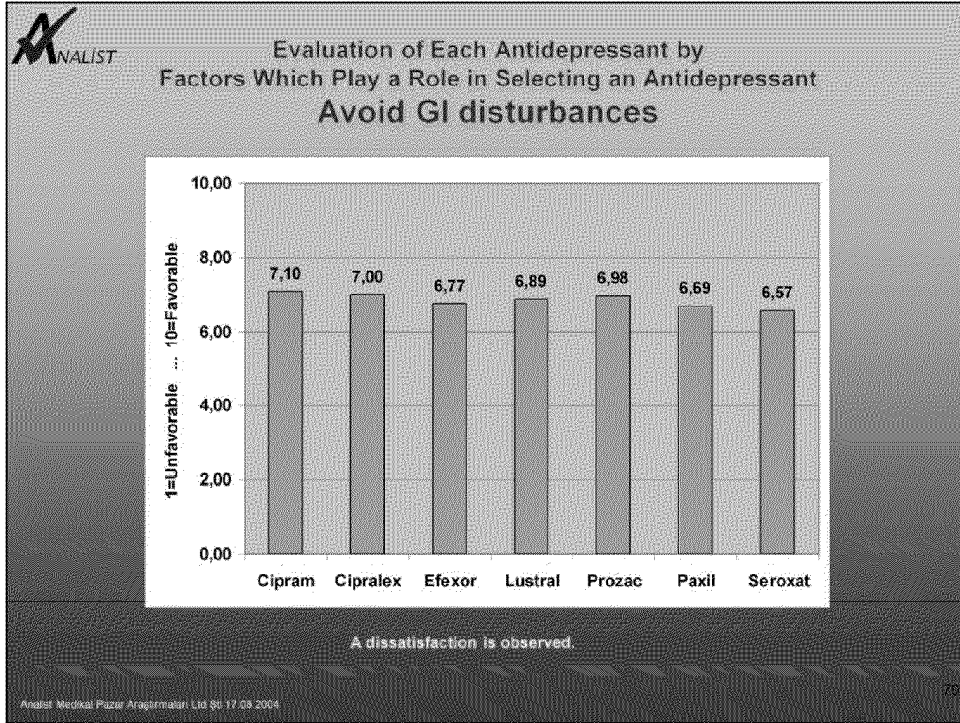





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Avoid anxiety, agitation or restlessness**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7.81	7.29	7.57	7.56	261.00
Cipralext	7.87	7.29	7.32	7.50	238.00
Efexor	7.56	6.90	6.78	7.09	276.00
Lustral	7.79	7.27	7.37	7.48	275.00
Prozac	7.47	6.89	6.88	7.06	267.00
Paxil	7.59	6.88	6.65	7.02	224.00
Seroxat	7.20	6.84	6.79	6.95	249.00

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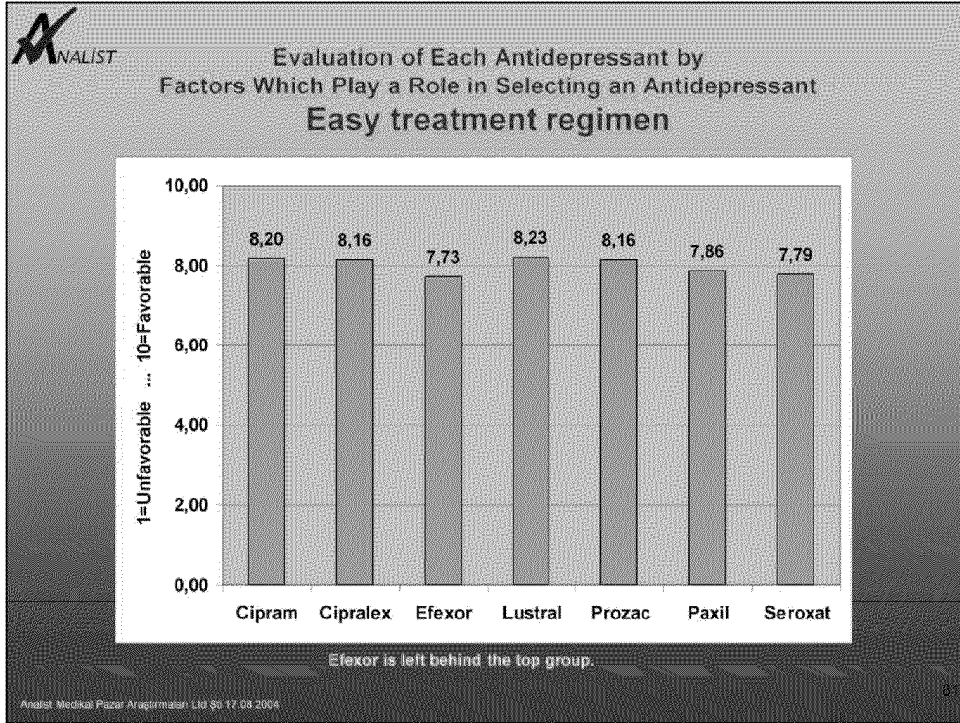





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Avoid GI disturbances**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	7,41	6,94	6,92	7,10	268,00
Cipralext	7,34	6,85	6,78	7,00	244,00
Efexor	7,32	6,51	6,47	6,77	277,00
Lustral	7,42	6,79	6,40	6,89	279,00
Prozac	7,26	6,79	6,88	6,98	274,00
Paxil	7,29	6,70	6,09	6,69	228,00
Seroxat	6,99	6,61	6,06	6,57	247,00

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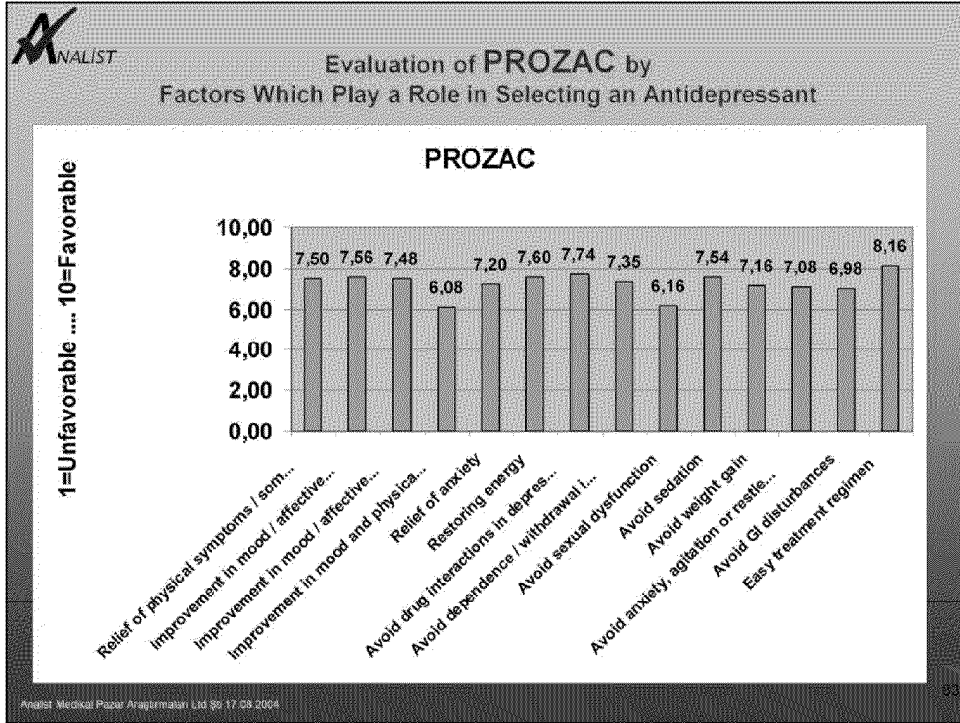





**Evaluation of Each Antidepressant by
Factors Which Play a Role in Selecting an Antidepressant
Easy treatment regimen**

Veri	Specialty			Total	N
	GP	Neurology	Psychiatry		
Cipram	8.23	8.00	8.34	8.20	268.00
Ciprelex	8.25	7.91	8.30	8.16	244.00
Etexor	7.84	7.45	7.87	7.73	277.00
Lustral	8.39	7.91	8.36	8.23	279.00
Prozac	8.16	7.94	8.38	8.16	274.00
Paxil	8.00	7.82	7.78	7.86	228.00
Seroxat	7.91	7.54	7.90	7.79	247.00

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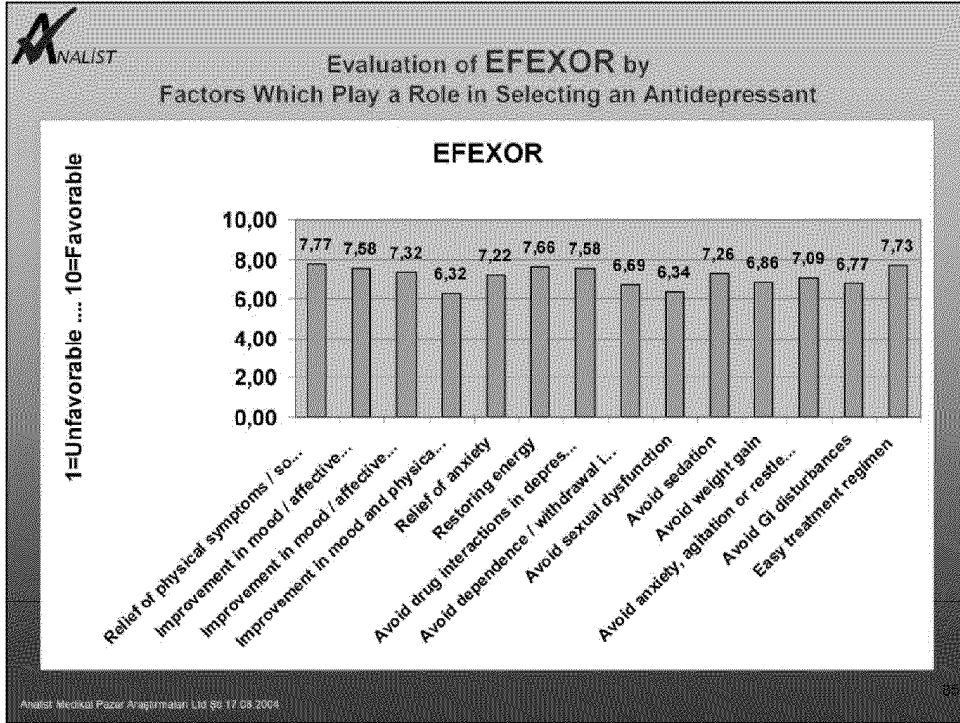





Evaluation of PROZAC by Factors Which Play a Role in Selecting an Antidepressant

	GP	Neurology	Psychiatry	Total
Relief of physical symptoms / somatic complaints	7.82	7.27	7.38	7.50
Improvement in mood / affective symptoms	7.57	7.56	7.56	7.56
Improvement in mood / affective symptoms rather than physical symptoms	7.33	7.36	7.75	7.48
Improvement in mood and physical symptoms in less than a week	6.36	6.14	5.72	6.08
Relief of anxiety	7.32	6.99	7.30	7.20
Restoring energy	7.85	7.32	7.62	7.60
Avoid drug interactions in depressive patients who have somatic complaints	7.96	7.61	7.63	7.74
Avoid dependence / withdrawal issues	7.82	7.02	7.40	7.35
Avoid sexual dysfunction	6.74	5.91	5.78	6.16
Avoid sedation	7.71	7.32	7.67	7.54
Avoid weight gain	7.25	7.00	7.23	7.16
Avoid anxiety, agitation or restlessness	7.47	6.89	6.88	7.08
Avoid GI disturbances	7.26	6.79	6.88	6.98
Easy treatment regimen	8.16	7.94	8.38	8.16

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**Evaluation of EFEXOR by
Factors Which Play a Role in Selecting an Antidepressant**

	GP	Neurology	Psychiatry	Total
Relief of physical symptoms / somatic complaints	7,64	7,79	7,68	7,77
Improvement in mood / affective symptoms	7,60	7,54	7,60	7,58
Improvement in mood / affective symptoms rather than physical symptoms	7,35	7,36	7,26	7,32
Improvement in mood and physical symptoms in less than a week	6,38	6,28	6,30	6,32
Relief of anxiety	7,31	7,12	7,24	7,22
Restoring energy	7,73	7,63	7,61	7,66
Avoid drug interactions in depressive patients who have somatic complaints	7,83	7,48	7,43	7,58
Avoid dependence / withdrawal issues	6,97	6,70	6,37	6,69
Avoid sexual dysfunction	6,97	6,19	5,63	6,34
Avoid sedation	7,53	6,93	7,30	7,26
Avoid weight gain	7,01	6,88	6,69	6,86
Avoid anxiety, agitation or restlessness	7,50	6,30	6,78	7,09
Avoid GI disturbances	7,32	6,51	6,47	6,77
Easy treatment regimen	7,84	7,45	7,67	7,73

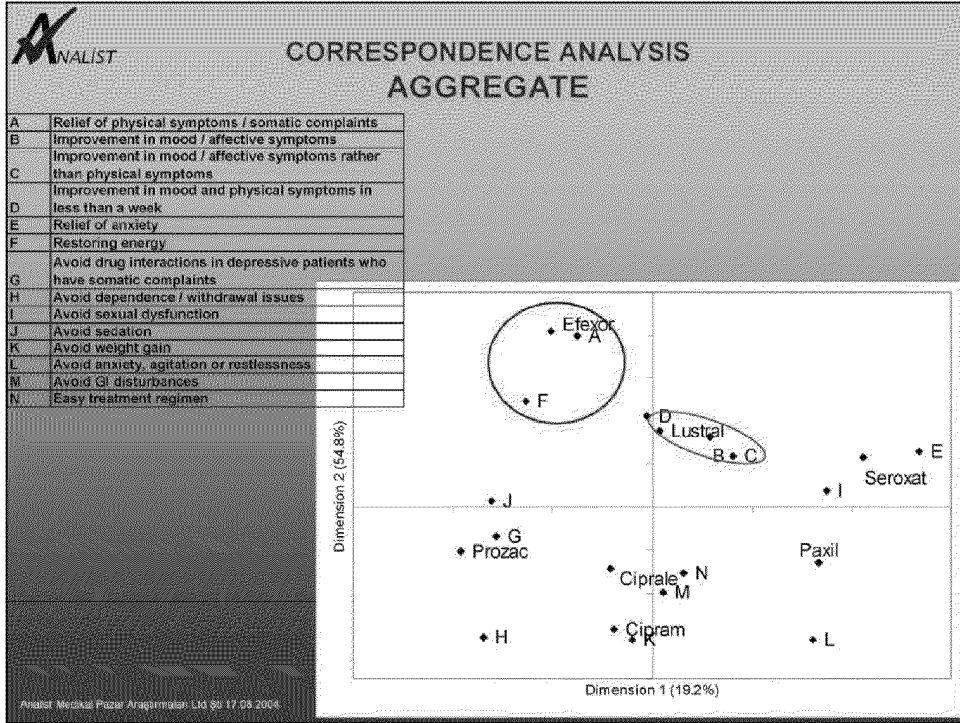
Avalist: Nöroloji Pazar Araştırmaları Ltd Şti 17.09.2004 86



CORRESPONDENCE ANALYSIS

- Factors which play a role in preferring a certain antidepressant and drug evaluations were put together to map associations between factors and antidepressants. In other words the aim of this analysis is to identify brands that come to mind for certain antidepressants and to find their positionings.

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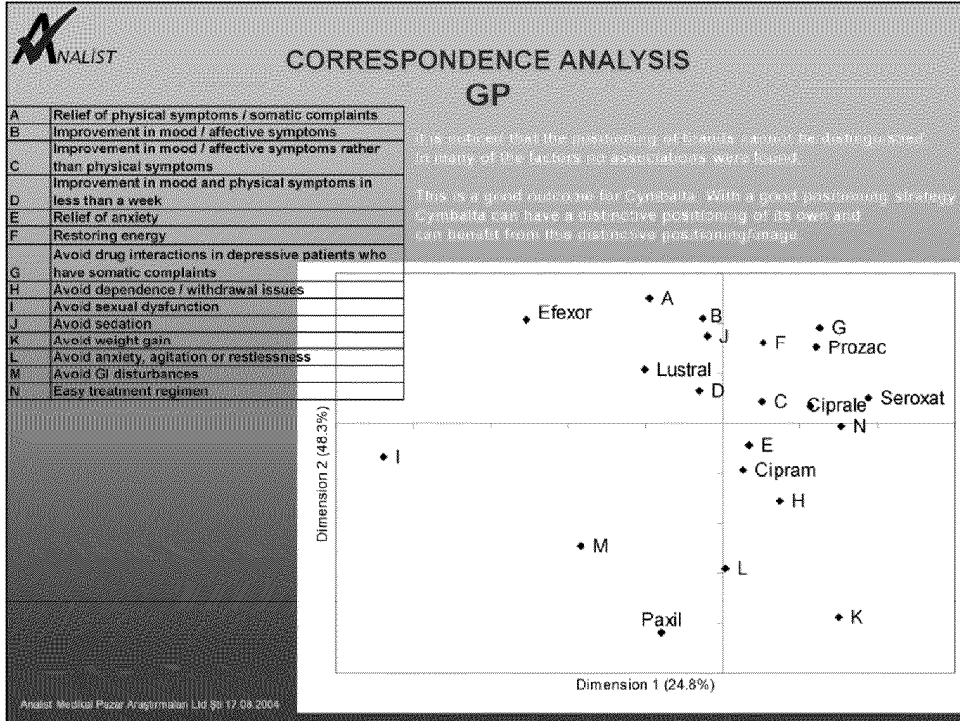
WALIST CORRESPONDENCE ANALYSIS ASSOCIATION – INDEX
AGGREGATE

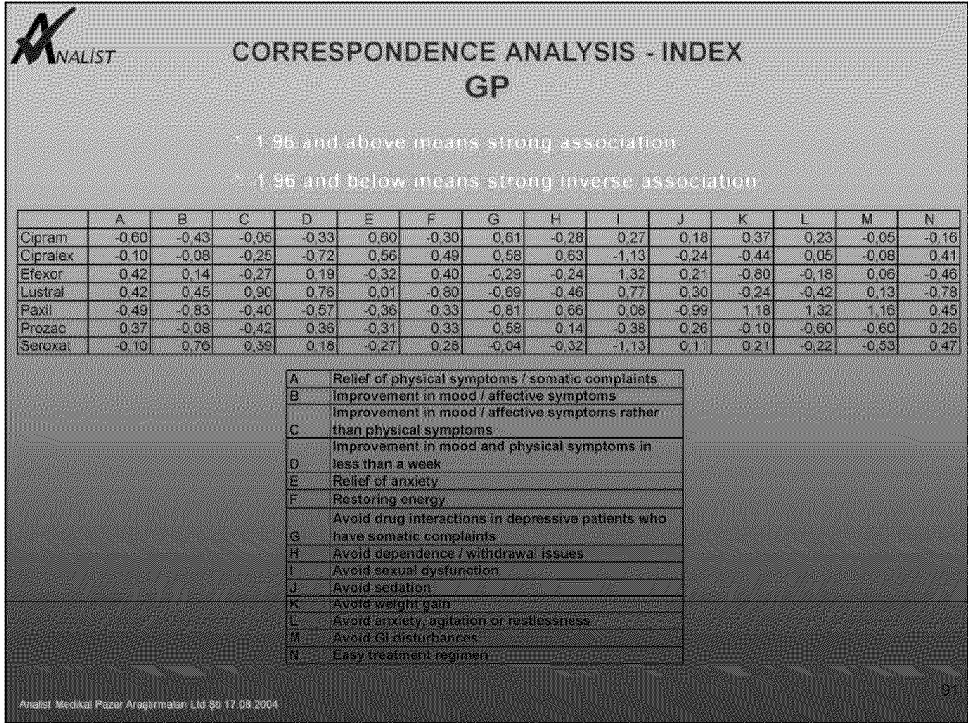
• 1.96 and above means strong association
 • -1.96 and below means strong inverse association

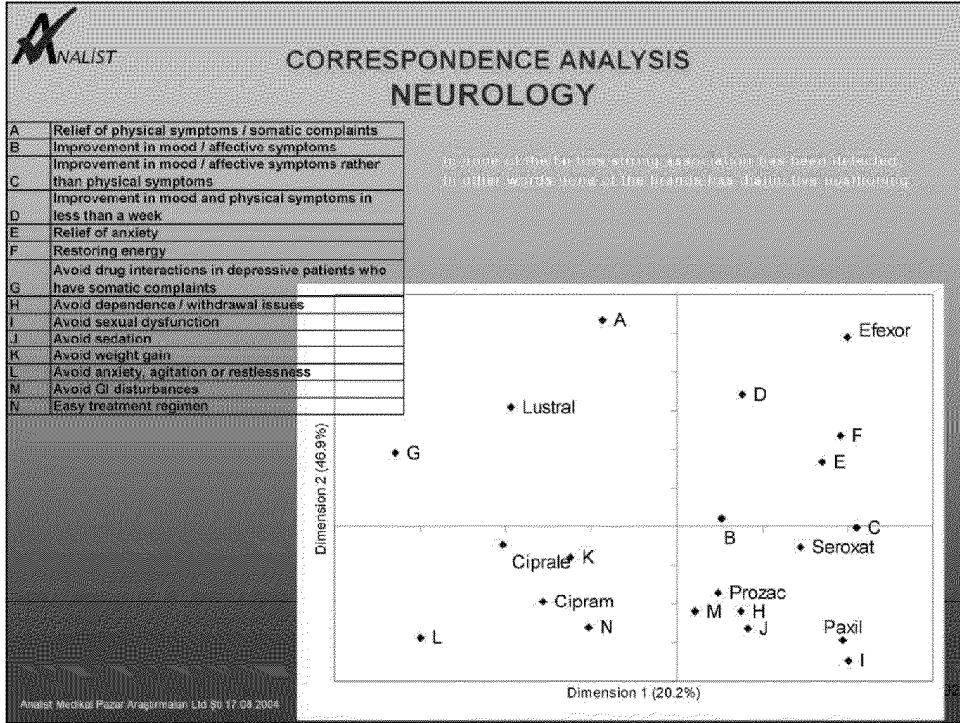
	A	B	C	D	E	F	G	H	I	J	K	L	M	N
Cipram	-1.76	-0.55	-1.40	-0.33	-0.65	-0.93	0.98	1.16	0.64	0.20	0.96	1.27	0.42	0.26
Cipralax	-0.24	-0.25	-1.04	-0.43	-0.03	-0.47	0.91	0.65	-2.01	-0.09	0.72	1.14	0.45	0.22
Effexor	2.04	0.60	-0.47	1.84	0.28	2.16	-0.90	-0.73	0.81	0.25	-0.92	-1.49	-0.81	-2.08
Lustral	1.00	-0.32	0.43	1.36	-0.15	-0.64	0.41	-1.02	1.93	-0.06	-0.57	0.73	-0.06	-0.99
Paxil	-0.43	0.07	0.59	-1.31	0.47	-0.34	-0.93	0.20	-0.10	-0.96	-0.01	1.05	0.40	1.02
Prozac	-1.13	-0.71	0.75	-0.66	-1.12	0.36	-0.10	1.25	-0.23	1.10	0.60	-1.25	0.52	0.58
Seroxat	0.47	1.47	1.36	-0.92	1.48	-0.20	-0.60	-1.01	-1.47	-0.79	-0.55	0.27	-0.95	1.41


A	Relief of physical symptoms / somatic complaints
B	Improvement in mood / affective symptoms
C	Improvement in mood / affective symptoms rather than physical symptoms
D	Improvement in mood and physical symptoms in less than a week
E	Relief of anxiety
F	Restoring energy
G	Avoid drug interactions in depressive patients who have somatic complaints
H	Avoid dependence / withdrawal issues
I	Avoid sexual dysfunction
J	Avoid sedation
K	Avoid weight gain
L	Avoid anxiety, agitation or restlessness
M	Avoid GI disturbances
N	Easy treatment regimen

Analist Medical Pazar Arařirmaları Ltd Şti 17.08.2004









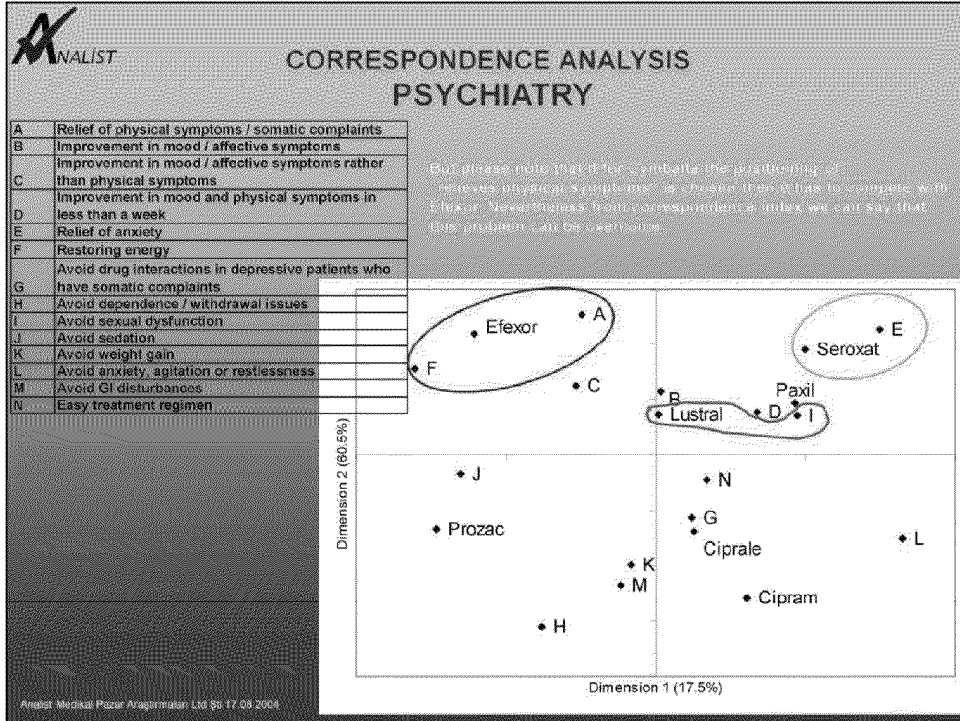
CORRESPONDENCE ANALYSIS - INDEX NEUROLOGY


* 1.96 and above means strong association
 * 1.96 and below means strong inverse association

	A	B	C	D	E	F	G	H	I	J	K	L	M	N
Cipram	-0.51	-0.06	-0.74	-0.81	-0.67	-0.12	0.21	0.69	0.42	0.20	0.53	0.42	-0.37	0.84
Cipralax	0.13	0.09	-0.50	0.10	0.08	-0.83	0.39	-0.35	-1.19	0.19	1.09	1.18	0.18	-0.61
Eflexor	1.26	-0.08	-0.06	1.58	0.81	1.31	-0.47	-0.06	-0.20	-0.34	-0.02	-1.11	-0.72	-1.75
Lustral	1.00	-0.47	-0.69	0.84	-0.27	0.06	1.35	-0.75	0.52	-0.85	-0.34	-0.25	-0.05	-0.25
Paxil	-0.93	0.51	0.91	-1.13	-0.32	-0.20	-0.37	0.56	0.48	0.59	-0.56	-0.10	0.13	0.42
Prozac	-1.34	-0.55	0.47	0.04	-0.67	-0.12	-0.60	0.60	0.42	0.95	0.14	-0.37	0.52	0.68
Seroxat	0.27	-0.79	0.75	-0.96	1.19	-0.19	-0.70	-0.84	-0.51	-0.75	-1.05	0.33	0.33	0.87

A	Relief of physical symptoms / somatic complaints
B	Improvement in mood / affective symptoms
C	Improvement in mood / affective symptoms rather than physical symptoms
D	Improvement in mood and physical symptoms in less than a week
E	Relief of anxiety
F	Restoring energy
G	Avoid drug interactions in depressive patients who have somatic complaints
H	Avoid dependence / withdrawal issues
I	Avoid sexual dysfunction
J	Avoid sedation
K	Avoid weight gain
L	Avoid anxiety, agitation or restlessness
M	Avoid GI disturbances
N	Easy treatment regimen

Analist: Muzikal Pazar Anagirmaları Ltd Şti 17.03.2004 30






CORRESPONDENCE ANALYSIS - INDEX PSYCHIATRY

* 1.96 and above means strong association
 * -1.96 and below means strong inverse association

	A	B	C	D	E	F	G	H	I	J	K	L	M	N
Cipram	-1.96	-0.40	-1.60	0.67	-1.13	-1.23	0.89	1.74	0.39	-0.04	0.82	1.55	1.22	-0.13
Cipralex	-0.60	-0.42	-1.02	-0.07	-0.75	-0.64	0.57	0.79	-1.41	-0.01	0.73	0.96	0.75	0.64
Efexor	1.88	0.75	-0.57	1.66	-0.02	2.17	-0.84	-0.93	0.15	0.52	-0.66	-1.36	-0.80	-1.51
Lustral	0.40	-0.57	0.42	0.77	0.02	-0.27	0.24	-0.65	2.28	0.30	-0.44	-0.66	-0.23	-0.67
Paxli	0.71	0.51	0.53	-0.63	1.57	-0.05	-0.41	-0.94	-0.91	-0.96	-0.90	0.52	-0.88	0.90
Prozac	-1.09	-0.70	1.05	-1.62	-1.03	0.43	-0.22	1.45	-0.05	0.70	1.14	-1.14	1.17	-0.06
Seraxat	0.78	1.12	1.39	-1.10	1.69	-0.36	-0.34	-1.65	-1.07	-0.94	-0.91	0.43	-1.60	1.24

A	Relief of physical symptoms / somatic complaints
B	Improvement in mood / affective symptoms
C	Improvement in mood / affective symptoms rather than physical symptoms
D	Improvement in mood and physical symptoms in less than a week
E	Relief of anxiety
F	Restoring energy
G	Avoid drug interactions in depressive patients who have somatic complaints
H	Avoid dependence / withdrawal issues
I	Avoid sexual dysfunction
J	Avoid sedation
K	Avoid weight gain
L	Avoid anxiety, agitation or restlessness
M	Avoid GI disturbances
N	Easy treatment regimen

Analist Medical Pazar Arařirmaları Ltd 90 17 09 2004 95




Areas that Antidepressants Do Not Satisfy (Unmet Needs)

N: 101 94 292

Number	Specialty	GP %	Neurology %	Psychiatry %	Total %
Areas that antidepressants do not satisfy					
They are generally sufficient		55%	43%	38%	46%
Too many side effects		13%	30%	33%	25%
Causes sexual dysfunction / loss of sexual desire		10%	5%	17%	11%
Need fast onset of action		5%	13%	14%	11%
Should be more effective		9%	9%	10%	9%
GI side effects / problems		3%	9%	7%	7%
Causes weight gain		6%	6%	4%	5%
Insomnia		2%	7%	5%	5%
Causes nausea		5%	4%	3%	4%
Increasing anxiety / Not effective in anxiety		5%	3%	3%	4%
Efficacy changes from patient to patient		2%	4%	2%	3%
Expensive		3%	4%	1%	3%
Sedation		0%	5%	3%	3%
Should not cause somnia		3%	2%	3%	3%
Not much improvement in mood		3%	0%	4%	2%
Withdrawal symptoms		4%	1%	2%	2%
It does not stop recurrence		3%	1%	1%	2%
Drug interactions		0%	3%	1%	1%
I do not have much experience with it		1%	2%	0%	1%
It does not respond to short therapy		3%	0%	0%	1%
Not effective to headache		1%	2%	0%	1%
Not efficacious in severe depression		1%	0%	2%	1%
Not enough efficacy in chronic pain		0%	2%	1%	1%
Not safe in patients with cardiac problems		1%	0%	2%	1%
Cause dizziness		1%	0%	1%	1%
Causes confusion		2%	0%	0%	1%
Causes skin rash		1%	1%	0%	1%
Causes somnia		3%	0%	1%	1%
Difficult pharmacology		0%	2%	0%	1%
Not enough efficacy in major depression		0%	2%	0%	1%
Not enough for physical symptoms		0%	2%	2%	1%
Not enough for sleep disorder		2%	0%	3%	1%
Total		147%	164%	166%	159%

96



Areas that Each Antidepressant Does Not Satisfy


- Respondents were presented with some of the antidepressants and were then asked about issues each of them could not satisfy:

CipraleX

- 41% of the respondents stated that "it is generally sufficient". In other words, 41% of the respondents did not find anything dissatisfactory about CipraleX. The ratio of satisfied doctors is higher among GPs compared to Neurologists and Psychiatrists (50% vs. 36-37%).
- 16% of the respondents could not come up with any suggestion because "they have limited experience" with CipraleX.
- 11% of the respondents mentioned that CipraleX had "too many side effects". More respondents among Psychiatrists mentioned it compared to other specialties (18% vs 11% and 5%)

Analist Medical Pazar Araştırma ve Danışmanlık Ltd Şti 17.09.2004

97




Areas that Each Antidepressant Does Not Satisfy

Cipram

- 41% of the respondents stated that "it is generally sufficient". The ratio of satisfied doctors is higher among GPs compared to Neurologists and Psychiatrists.
- 16% of the respondents could not come up with any suggestion because "they have limited experience" with Cipram.
- 11% of the respondents mentioned that Cipram had "too many side effects". More respondents among Psychiatrists and Neurologists mentioned it compared to GPs (14% vs 5%).

Analist Medical Pazar Arařtirmaları Ltd Şti 17.03.2004 58



Areas that Each Antidepressant Does Not Satisfy

Efexor

- 41% of the respondents stated that "it is generally sufficient". The ratio of satisfied doctors is higher among GPs compared to Neurologists and Psychiatrists (53% vs 35%).
- 13% of the respondents mentioned that Efexor had "too many side effects". More respondents among Psychiatrists and Neurologists mentioned it compared to GPs (19% vs 3%).
- The ratio of respondents who do not have experience with Efexor is 9%.

Analist Medical Pazar Arastirmaları Ltd Şti 17.08.2004

99




Areas that Each Antidepressant Does Not Satisfy

Lustral

- 48% of the respondents stated that "it is generally sufficient". The percentage of satisfied doctors is highest (together with Prozac) compared to other antidepressants. The ratio of satisfied doctors is higher among GPs compared to Neurologists and Psychiatrists (58% vs 44-40%).
- 11% of the respondents mentioned that Lustral had "too many side effects". More respondents among Psychiatrists and Neurologists mentioned it compared to GPs .
- The ratio of respondents who do not have experience with Lustral is 9%.

Analist Medical Pazar Arastirmaları Ltd Şti 07.08.2004 100




Areas that Each Antidepressant Does Not Satisfy

Paxil

- 41% of the respondents stated that "it is generally sufficient". The ratio of satisfied doctors is higher among GPs compared to Neurologists and Psychiatrists (58% vs 44-40%).
- The ratio of respondents who do not have experience with Lustral is 24%. GP ratio is higher than Neurologists and Psychiatrists.
- 11% of the respondents mentioned that Paxil had "too many side effects". More respondents among Psychiatrists and Neurologists mentioned it compared to GPs .

Analist Medical Pazar Arastirmalari Ltd 01 12 04 2004

101




Areas that Each Antidepressant Does Not Satisfy

Prozac

- 48% of the respondents stated that "it is generally sufficient". The percentage of satisfied doctors is highest (together with Lustral) compared to other antidepressants. The ratio of satisfied doctors is higher among GPs compared to Neurologists and Psychiatrists (54% vs 44-42%).
- 11% of the respondents mentioned that Prozac had "too many side effects". More respondents among Psychiatrists and Neurologists mentioned it compared to GPs .
- The ratio of respondents who do not have experience with Prozac is 11%.

Analist Medical Pazar Araştırmaları Ltd Şti 17.08.2014 102




Areas that Each Antidepressant Does Not Satisfy

Seroxat

- 41% of the respondents stated that "it is generally sufficient". The ratio of satisfied doctors is higher among GPs compared to Neurologists and Psychiatrists.
- The ratio of respondents who do not have experience with Seroxat is 18%.
- 12% of the respondents mentioned that Seroxat had "too many side effects". More respondents among Psychiatrists mentioned it compared to GPs and Neurologists.

Analist Medical Pazar Araştırma ve Danışmanlık Ltd. Şti. 08.2004


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**Areas that Each Antidepressant Does Not Satisfy
Cipralelex**

	N: 101	97	94	292
	Specialty			
CIPRALEX	GP %	Neurology %	Psychiatry %	Total %
It is generally sufficient	50%	36%	37%	41%
I do not have much experience with it	12%	21%	16%	16%
Too many side effects	5%	11%	18%	11%
Increasing anxiety / Not effective in anxiety	5%	8%	9%	7%
Should be more effective	6%	5%	7%	6%
GI side effects / problems	1%	8%	4%	4%
Causes nausea	6%	3%	2%	4%
Causes sexual dysfunction / loss of sexual desire	4%	3%	4%	4%
Insomnia	4%	3%	3%	3%
Need fast onset of action	2%	4%	4%	3%
Not much improvement in mood	1%	1%	1%	1%
Not safe in patients with cardiac problems	2%	1%	0%	1%
Sedation	0%	2%	1%	1%
Should not cause somnia	0%	2%	1%	1%
Withdrawal symptoms	3%	0%	0%	1%
Causes hypertension	1%	1%	0%	1%
Loss of appetite	0%	1%	1%	1%
Total	107%	111%	115%	111%


Analist Medical Pazar Arařtırmaları Ltd 09.11.08.2004 104



Areas that Each Antidepressant Does Not Satisfy
Cipram

	N:	101	97	94	292
	Specialty				
CIPRAM	GP %	Neurology %	Psychiatry %	Total %	
It is generally sufficient	49%	40%	33%	41%	
I do not have much experience with it	13%	18%	17%	16%	
Too many side effects	5%	14%	14%	11%	
Should be more effective	5%	6%	5%	5%	
Causes sexual dysfunction / loss of sexual desire	4%	5%	5%	5%	
Need fast onset of action	2%	6%	6%	5%	
Not safe in patients with cardiac problems	1%	5%	7%	4%	
Insomnia	3%	5%	3%	4%	
GI side effects / problems	2%	2%	6%	3%	
Causes nausea	5%	1%	3%	3%	
Should not cause somnia	3%	3%	2%	3%	
Not much improvement in mood	1%	0%	4%	2%	
Causes weight gain	1%	1%	2%	1%	
Increasing anxiety / Not effective in anxiety	2%	1%	1%	1%	
Withdrawal symptoms	4%	0%	0%	1%	
Efficacy changes from patient to patient	1%	1%	0%	1%	
Total	106%	111%	115%	111%	


Analist Medical Pazar Arasirmaları Ltd Şti 17.08.2004 105



Areas that Each Antidepressant Does Not Satisfy
Efexor

EFEXOR	N:	101	97	94	292
	Specialty	GP %	Neurology %	Psychiatry %	Total %
It is generally sufficient		53%	35%	35%	41%
Too many side effects		3%	18%	19%	13%
I do not have much experience with it		7%	10%	10%	9%
Causes hypertension		1%	7%	10%	6%
GI side effects / problems		3%	10%	4%	6%
Should be more effective		5%	6%	4%	5%
Causes nausea		8%	2%	4%	5%
Need fast onset of action		3%	4%	7%	5%
Sedation		1%	4%	3%	3%
Causes sexual dysfunction / loss of sexual desire		2%	1%	4%	2%
Increasing anxiety / Not effective in anxiety		3%	2%	1%	2%
Insomnia		2%	3%	1%	2%
Withdrawal symptoms		2%	0%	3%	2%
Causes weight gain		2%	0%	2%	1%
Not much improvement in mood		3%	0%	1%	1%
Not safe in patients with cardiac problems		2%	1%	1%	1%
Should not causeomnia		1%	1%	1%	1%
Cause dizziness		0%	1%	1%	1%
Loss of appetite		1%	0%	1%	1%
Social phobias		2%	0%	0%	1%
Total		108%	110%	118%	112%


Analist Medical Pazar Arařtırmaları Ltd Şti 17.08.2004 106



Areas that Each Antidepressant Does Not Satisfy
Lustral

LUSTRAL	N: Specialty			
	101 GP %	97 Neurology %	94 Psychiatry %	292 Total %
It is generally sufficient	58%	44%	40%	48%
Too many side effects	4%	14%	16%	11%
I do not have much experience with it	3%	10%	13%	9%
Causes sexual dysfunction / loss of sexual desire	7%	3%	9%	6%
Need fast onset of action	3%	5%	7%	5%
Should be more effective	5%	7%	3%	5%
Cause dizziness	1%	4%	7%	4%
Causes nausea	7%	2%	2%	4%
GI side effects / problems	1%	5%	5%	4%
Increasing anxiety / Not effective in anxiety	4%	4%	2%	3%
Causes weight gain	2%	1%	2%	2%
Insomnia	1%	2%	0%	1%
Not much improvement in mood	1%	0%	2%	1%
Sedation	0%	2%	1%	1%
Causes skin rash	1%	1%	0%	1%
Not enough for sleep disorder	2%	0%	0%	1%
Withdrawal symptoms	2%	0%	0%	1%
Total	106%	110%	113%	110%


Avalist Medical Pazar Arayışmaları Ltd Şti 17 08 2004



Areas that Each Antidepressant Does Not Satisfy
Paxil

	N:	101	97	94	292
	Specialty				
PAXIL	GP %	Neurology %	Psychiatry %	Total %	
It is generally sufficient	45%	38%	30%	38%	
I do not have much experience with it	31%	22%	20%	24%	
Too many side effects	3%	13%	16%	11%	
Should be more effective	5%	8%	3%	5%	
Causes sexual dysfunction / loss of sexual desire	2%	3%	10%	5%	
Need fast onset of action	2%	4%	6%	4%	
Causes weight gain	0%	2%	10%	4%	
Withdrawal symptoms	5%	2%	4%	4%	
Causes nausea	5%	0%	2%	2%	
Insomnia	1%	4%	1%	2%	
GI side effects / problems	1%	1%	3%	2%	
Not much improvement in mood	1%	2%	1%	1%	
Sedation	0%	2%	2%	1%	
Cause dizziness	1%	1%	1%	1%	
Increasing anxiety / Not effective in anxiety	1%	1%	1%	1%	
Not efficacious in severe depression	0%	0%	2%	1%	
Not safe in patients with cardiac problems	1%	0%	1%	1%	
Should not cause somnia	0%	1%	1%	1%	
Total	106%	108%	117%	110%	

Analist Medical Pazar Arayimlari Ltd Q1 17.08.2004




Areas that Each Antidepressant Does Not Satisfy
Prozac

	N: 101	97	94	292
	Specialty			
PROZAC	GP %	Neurology %	Psychiatry %	Total %
It is generally sufficient	54%	42%	44%	47%
Too many side effects	5%	13%	16%	11%
I do not have much experience with it	7%	14%	11%	11%
Causes sexual dysfunction / loss of sexual desire	5%	4%	7%	5%
Should be more effective	4%	7%	3%	5%
Need fast onset of action	4%	3%	5%	4%
Not much improvement in mood	4%	4%	3%	4%
Increasing anxiety / Not effective in anxiety	2%	3%	5%	3%
GI side effects / problems	3%	2%	4%	3%
Causes nausea	5%	1%	2%	3%
Loss of appetite	2%	1%	3%	2%
Causes weight gain	3%	0%	2%	2%
Withdrawal symptoms	4%	0%	1%	2%
Causes skin rash	0%	2%	2%	1%
Insomnia	1%	3%	0%	1%
Not enough efficacy in major depression	0%	2%	2%	1%
Sedation	0%	2%	1%	1%
Should not cause somnia	2%	0%	1%	1%
Efficacy changes from patient to patient	1%	1%	0%	1%
Total	110%	109%	115%	111%

Analist: Medical Pazar Arařtirmaları Ltd 30.17.08.2004

100



Areas that Each Antidepressant Does Not Satisfy
Seroxat

	N: 101	97	94	292
	Specialty			
SEROXAT	GP %	Neurology %	Psychiatry %	Total %
It is generally sufficient	56%	36%	31%	41%
I do not have much experience with it	12%	27%	17%	18%
Too many side effects	6%	10%	20%	12%
Should be more effective	5%	6%	6%	6%
Causes sexual dysfunction / loss of sexual desire	5%	2%	10%	5%
Need fast onset of action	2%	3%	6%	4%
Causes weight gain	3%	1%	5%	3%
Withdrawal symptoms	3%	2%	4%	3%
Causes nausea	4%	2%	2%	3%
GI side effects / problems	2%	3%	2%	2%
Insomnia	1%	2%	4%	2%
Increasing anxiety / Not effective in anxiety	2%	2%	1%	2%
Should not cause somnia	1%	2%	2%	2%
Causes skin rash	1%	2%	1%	1%
Not much improvement in mood	1%	1%	2%	1%
Difficult posology	1%	2%	0%	1%
Cause dizziness	1%	1%	0%	1%
Loss of appetite	1%	1%	0%	1%
Not enough efficacy in major depression	1%	1%	0%	1%
Not safe in patients with cardiac problems	1%	1%	0%	1%
Sedation	0%	1%	0%	1%
Total	111%	110%	119%	113%

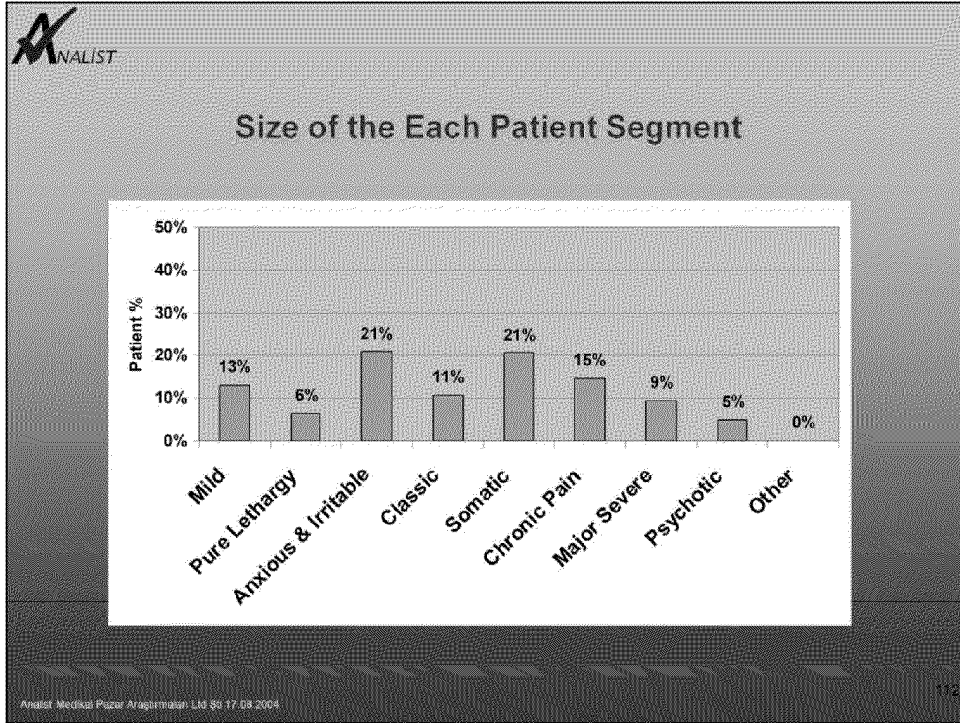
Analist Medical Pazar Araştırmaları Ltd Şti 17.08.2004


WALIST

Size of the Each Patient Segment Segment Descriptions

Temporary Title	Mild	Pure Lethargy	Anxious & Irritable	Classic
Severity	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Typical Patient Complaints	A small cluster of depressive symptoms	Fatigue/Tired, Low Motivation/Energy Sad Others notice Change	Nervous, Irritable, Agitated Stressed (Work & Home) Headaches, GI Upset, Stomach Pain, Other Physical Complaints Worried & Overwhelmed	Worried & Overwhelmed Fatigue/Tired, Low motivation/Energy Sad & Crying Can't Concentrate, Others notice change, Don't enjoy the same things they used to
Temporary Title	Somatic	Chronic Pain	Major Severe	Psychotic
Severity	<input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Typical Patient Complaints	Weight Gain & Appetite Gain Headaches, GI Upset, Stomach Pain, Other Physical Complaints Can't Concentrate, Others notice change, Don't enjoy the same things they used to Fatigue/Tired, Low Motivation/Energy, doesn't feel rested Sad, Crying, Irritable Sleeping too much or frequent Awakening Worried & Overwhelmed	Fatigue, Low Energy Sad, Crying, Irritable Chronic Pain, Other Physical Complaints Weight Gain & Appetite Gain Worried Sleep Disturbance Don't know the cause of the issue	Worried & Overwhelmed, Agitation Difficulty falling Asleep, Frequent Awakening Fatigue/Tired, Low motivation/Energy Flat Affect, Sad, Crying, Guilt, Irritable Headaches, GI Upset, Stomach Pain Can't Concentrate, Others notice change, Don't enjoy the same things they used to	Thought Disturbance, Can't Concentrate Agitation Worried & Overwhelmed Fatigue, Low Energy/Motivation, Delusions/Hallucinations Associated with Depression Sad, Crying, Guilt Sleep Disturbance, Anhedonia

Analist: Medikal Pazar Anasurmalan Ltd Şti 17.08.2004

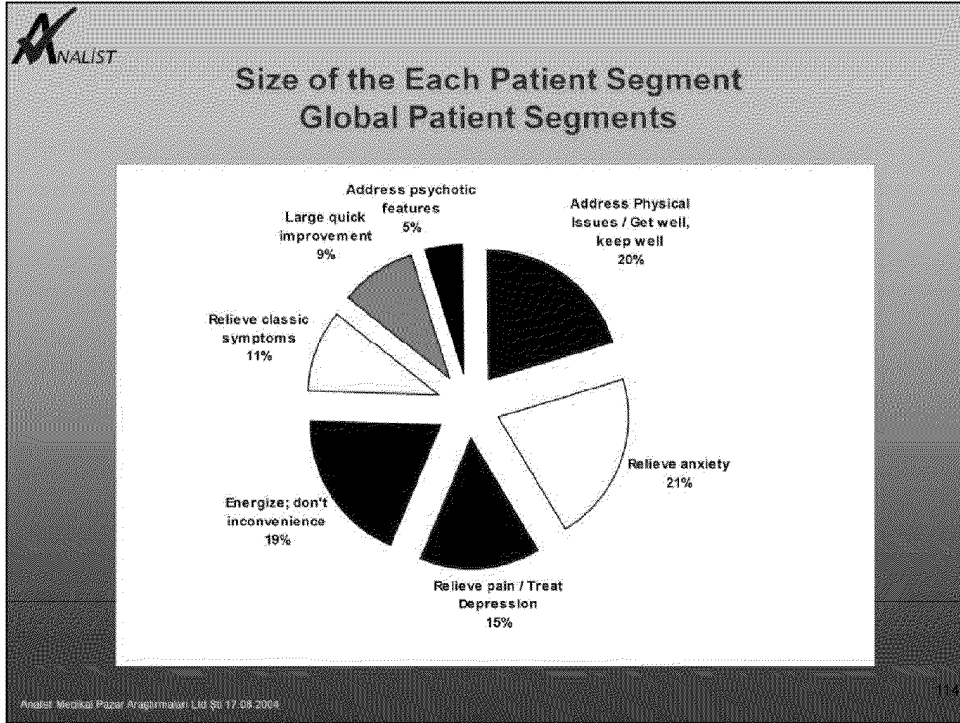





Size of the Each Patient Segment

	N=	101	97	94	292
Patient %					
	GP	Neurology	Psychiatry	Total	
Mild	15%	12%	12%	13%	
Pure Lethargy	6%	6%	6%	6%	
Anxious & Irritable	23%	21%	19%	21%	
Classic	14%	9%	10%	11%	
Somatic	19%	23%	21%	21%	
Chronic Pain	12%	18%	15%	15%	
Major Severe	6%	8%	12%	9%	
Psychotic	5%	3%	5%	5%	
Other	0%	0%	0%	0%	
Total	100%	100%	100%	100%	

Analist Medical Pasar Anagismanan Ltd 90 17 08 2004 113

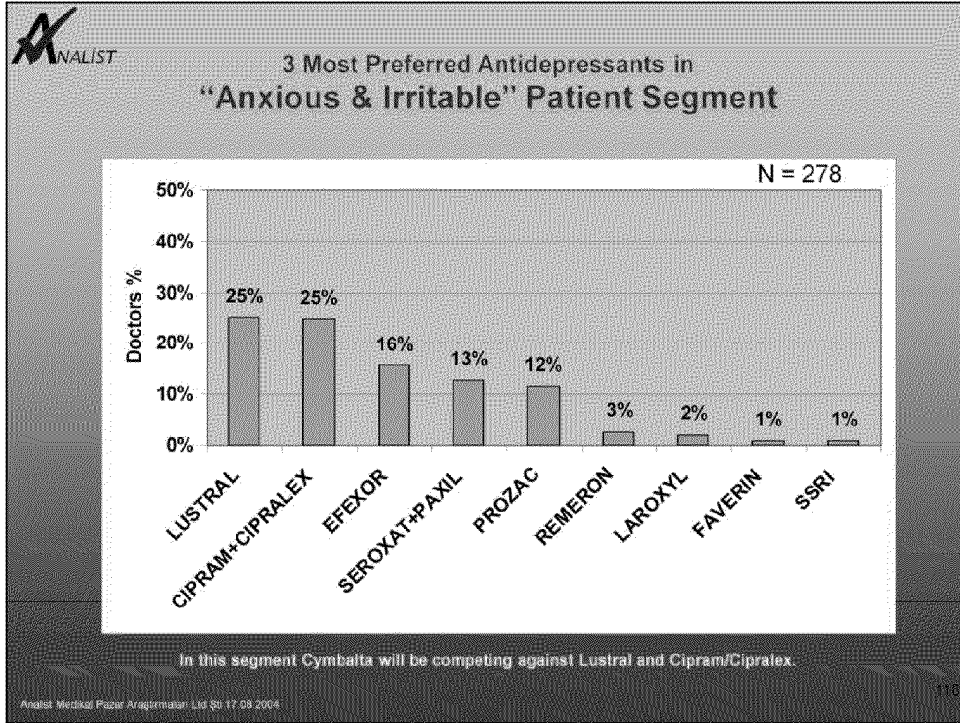





Size of the Each Patient Segment Global Patient Segments

GLOBAL PATIENT SEGMENT	PATIENT SEGMENTS USED IN			TOTAL	
	CYMBALTA STUDY	GP	Neurology		Psychiatry
Address Physical issues	Somatic	19%	23%	21%	21%
Get well, keep well					
Relieve anxiety	Anxious & Irritable	23%	21%	19%	21%
Relieve pain					
Treat depression	Chronic Pain	12%	18%	15%	15%
Energize, don't inconvenience	Mild - Pure Lethargy	22%	18%	19%	18%
Relieve classic symptoms	Classic	14%	9%	10%	11%
Large quick improvement	Major severe	6%	8%	12%	9%
Address psychotic features	Psychotic	5%	3%	6%	5%
TOTAL		100%	100%	100%	100%

Analist Medical Pazar Anasirmatani Ltd 06 17 08 2064 115

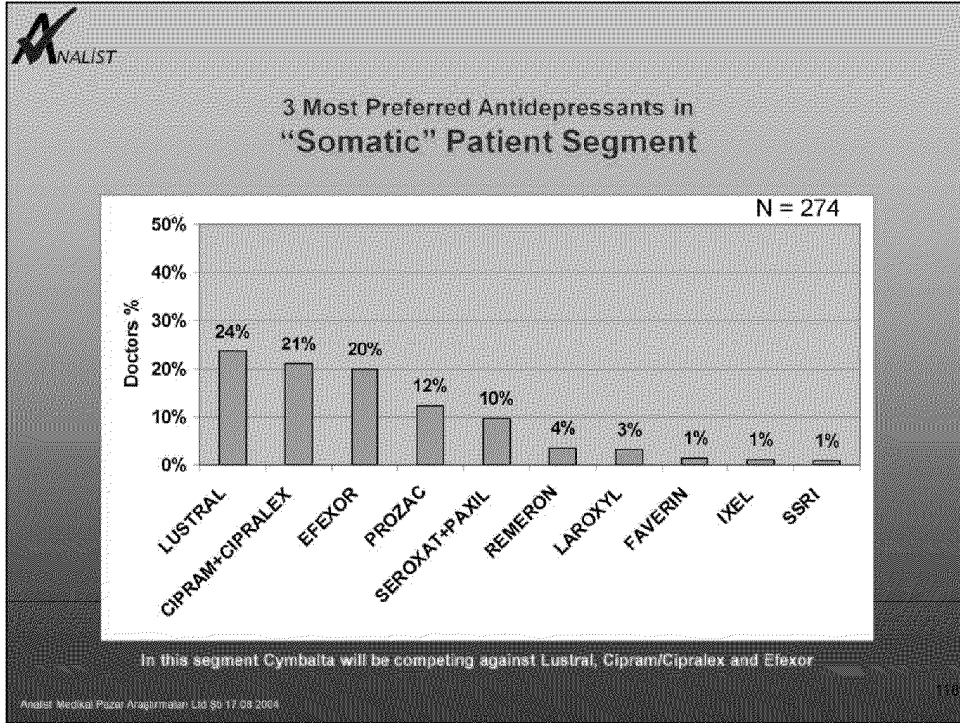





**3 Most Preferred Antidepressants in
"Anxious & Irritable" Patient Segment**

Say Number	N: 97 93 88			Total
	Specialty			
Anxious & Irritable	GP	Neurology	Psychiatry	
LUSTRAL	30%	25%	21%	25%
CIPRAM+CIPRALEX	26%	28%	20%	25%
EFEXOR	13%	18%	16%	16%
SEROXAT+PAXIL	11%	11%	16%	13%
PROZAC	15%	9%	12%	12%
REMERON	2%	3%	3%	3%
LAROXYL	1%	2%	3%	2%
FAVERIN	0%	0%	2%	1%
SSRI	0%	0%	2%	1%
ANAFRANIL	0%	0%	1%	0%
STABLON	0%	1%	0%	0%
AURORIX	0%	0%	0%	0%
DESYREL	0%	0%	1%	0%
TOFRANIL	0%	0%	0%	0%
TOLVON	0%	0%	1%	0%
INSOMIN	0%	0%	0%	0%
LUDIOMIL	0%	0%	0%	0%
NORODOL	0%	0%	0%	0%
SERALIN	0%	0%	0%	0%
SERDEP	0%	0%	0%	0%
TRICYCLIC AGENTS	0%	0%	0%	0%
ZEPREX	0%	0%	0%	0%
Total	100%	100%	100%	100%

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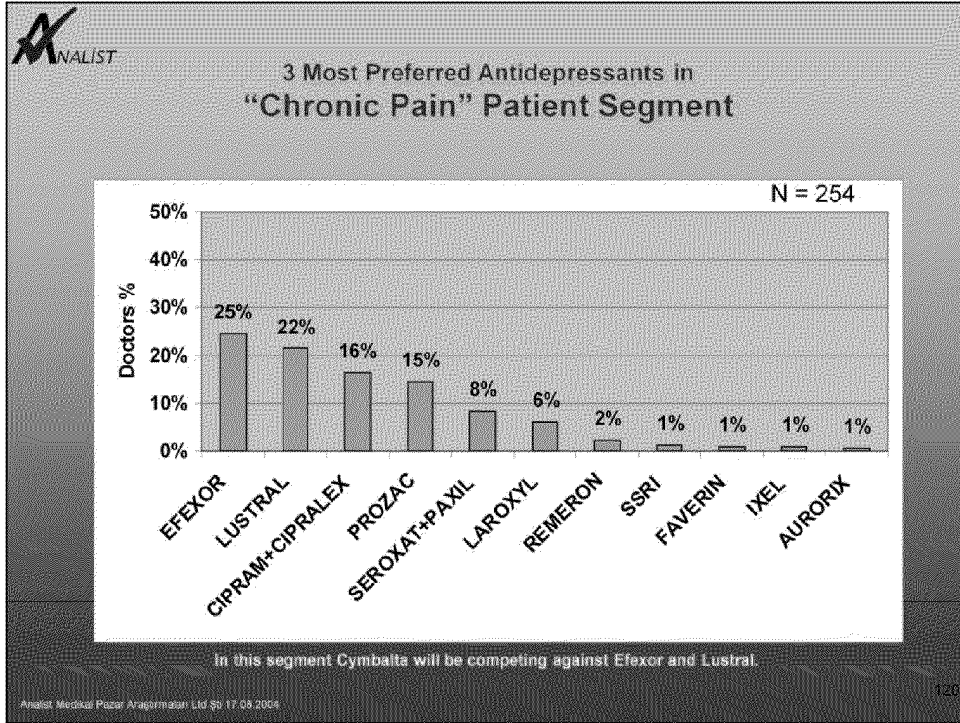





3 Most Preferred Antidepressants in "Somatic" Patient Segment

Say Number	N: 91 91 92			Total
	Specialty			
Somatic	GP	Neurology	Psychiatry	
LUSTRAL	28%	22%	21%	24%
CIPRAM+CIPRALEX	19%	25%	20%	21%
EFEOR	15%	23%	22%	20%
PROZAC	18%	7%	12%	12%
SEROXAT+PAXIL	8%	11%	10%	10%
REMERON	4%	3%	5%	4%
LAROXYL	4%	4%	2%	3%
FAVERIN	1%	0%	3%	1%
IXEL	0%	0%	3%	1%
SSRI	1%	0%	1%	1%
STABLON	0%	1%	0%	0%
ZEDPREX	0%	1%	0%	0%
ANAFRANIL	0%	0%	0%	0%
AURORIX	1%	0%	0%	0%
SERALIN	1%	0%	0%	0%
TOFRANIL	0%	0%	0%	0%
TOLVON	0%	0%	0%	0%
TRICYCLIC AGENTS	1%	0%	0%	0%
DESYREL	1%	0%	0%	0%
INSIDON	1%	0%	0%	0%
SELECTRA	1%	0%	0%	0%
Total	100%	100%	100%	100%

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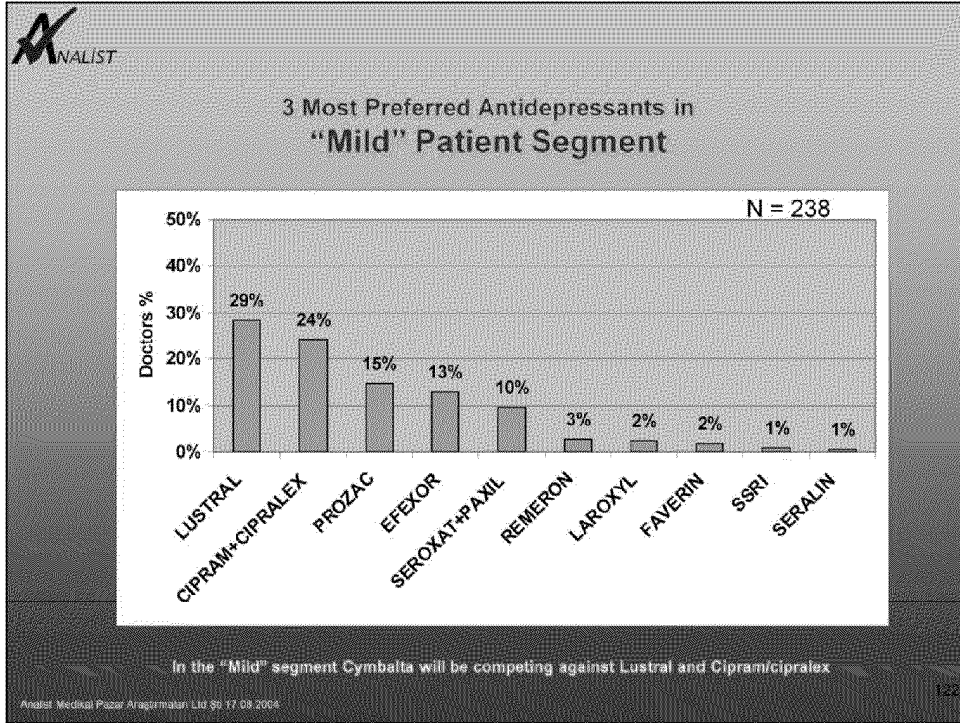





3 Most Preferred Antidepressants in "Chronic Pain" Patient Segment

Say Number	Specialty			Total
	N: 80	87	87	
Chronic Pain	GP	Neurology	Psychiatry	
EFEXOR	23%	26%	26%	25%
LUSTRAL	28%	21%	17%	22%
CIPRAM+CIPRALEX	14%	21%	14%	16%
PROZAC	13%	14%	17%	15%
SEROXAT-PAXIL	11%	7%	7%	8%
LAROXYL	5%	3%	6%	6%
REMERON	2%	2%	3%	2%
SSRI	2%	0%	2%	1%
FAVERIN	1%	1%	2%	1%
IXEL	0%	1%	3%	1%
AURORIX	1%	1%	1%	1%
DESYREL	0%	0%	1%	0%
STABLON	1%	0%	1%	0%
TOLVON	0%	0%	1%	0%
ANAFRANIL	0%	0%	1%	0%
CITOL	0%	1%	0%	0%
MAPROTIL	1%	0%	0%	0%
SERALIN	1%	0%	0%	0%
TOFRANIL	0%	0%	1%	0%
TRICYCLIC-AGENTS	0%	0%	1%	0%
ZEDPREX	0%	1%	0%	0%
Total	100%	100%	100%	100%

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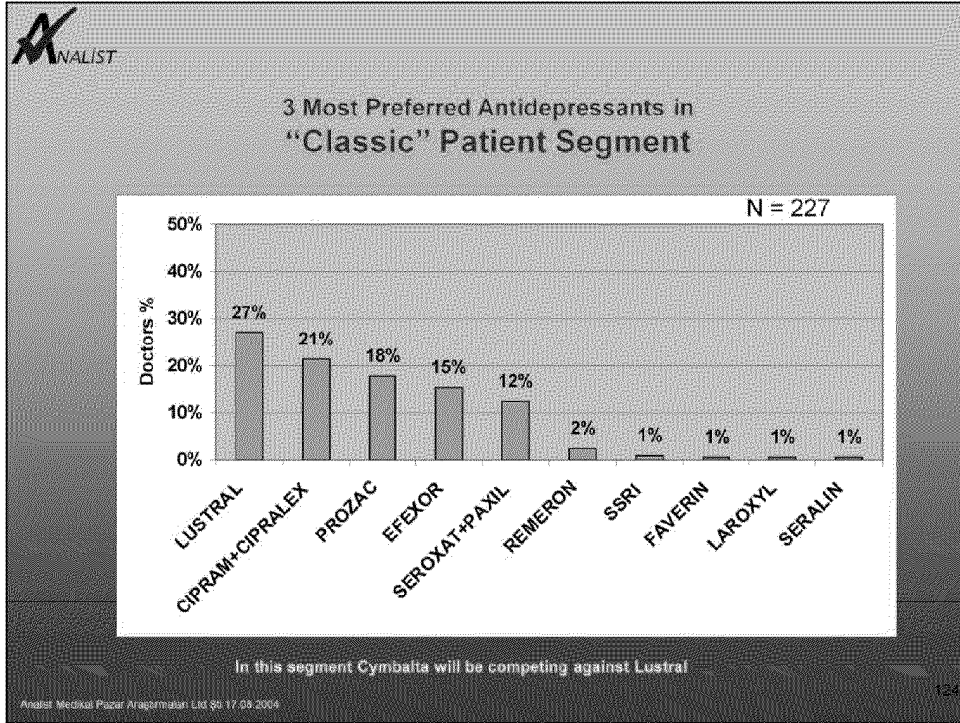





**3 Most Preferred Antidepressants in
"Mild" Patient Segment**

Say Number	Specialty			Total
	N. 81	79	78	
Mild	GP	Neurology	Psychiatry	
LUSTRAL	32%	28%	25%	29%
CIPRAM+CIPRALEX	23%	28%	22%	24%
PROZAC	19%	10%	15%	15%
EFEXOR	11%	13%	14%	13%
SEROXAT+PAXIL	8%	11%	9%	10%
REMERON	2%	2%	4%	3%
LAROXYL	1%	4%	2%	2%
FAVERIN	1%	1%	4%	2%
SSRI	1%	0%	2%	1%
SERALIN	1%	0%	1%	1%
INSIDON	1%	0%	0%	0%
SELECTRA	1%	0%	0%	0%
CITOL	0%	0%	1%	0%
DEPREKS	0%	0%	1%	0%
STABLON	0%	0%	0%	0%
TOLYON	0%	0%	0%	0%
ZEDPREX	0%	0%	0%	0%
Total	100%	100%	100%	100%

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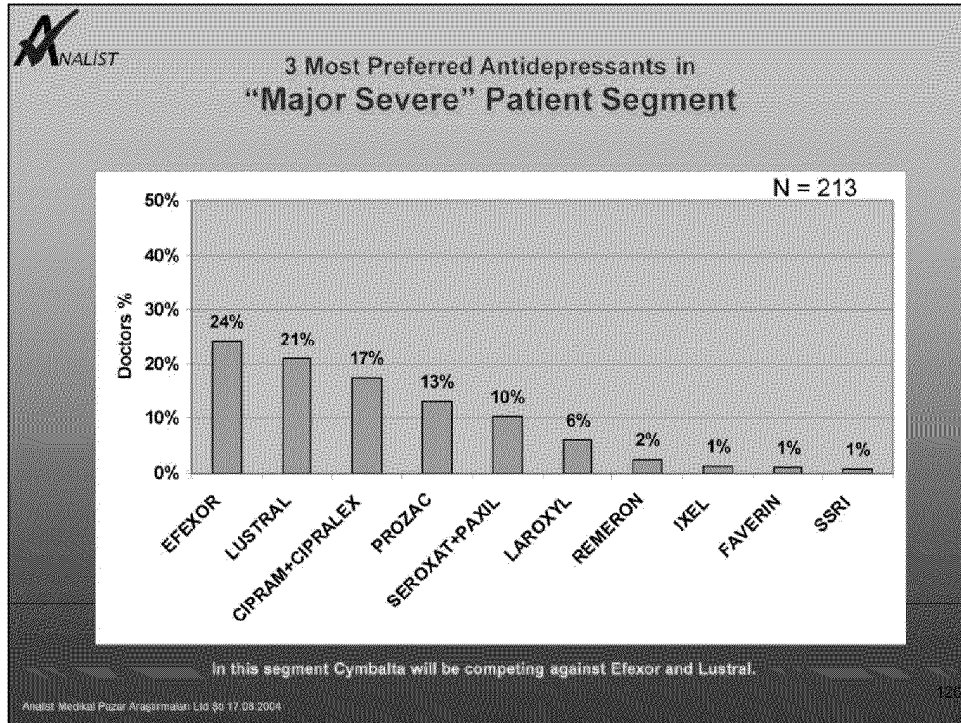





**3 Most Preferred Antidepressants in
"Classic" Patient Segment**

Say Number	N: Specialty			Total
	85	70	72	
Classic	GP	Neurology	Psychiatry	
LUSTRAL	28%	27%	26%	27%
CIPRAM+CIPRALEX	22%	27%	16%	21%
PROZAC	23%	11%	18%	18%
EFEXOR	14%	16%	16%	15%
SEROXAT+PAXIL	9%	14%	14%	12%
REMERON	2%	2%	4%	2%
SSRI	1%	0%	2%	1%
FAVERIN	0%	1%	1%	1%
LAROXYL	0%	2%	1%	1%
SERALIN	1%	1%	1%	1%
NORODOL	0%	0%	1%	0%
SELECTRA	1%	0%	0%	0%
TOLVON	1%	0%	0%	0%
Total	100%	100%	100%	100%

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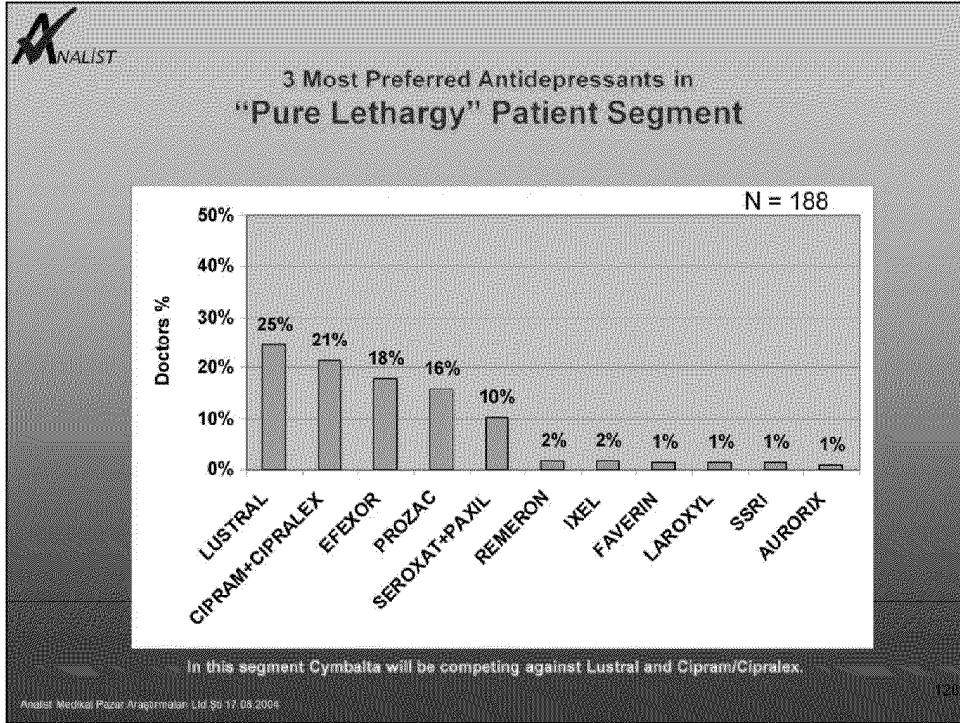





**3 Most Preferred Antidepressants in
"Major Severe" Patient Segment**

Say Number	N: Specialty			Total
	64 GP	70 Neurology	79 Psychiatry	
Major Severe				
EFEXOR	20%	25%	27%	24%
LUSTRAL	21%	23%	20%	21%
CIPRAM-CIPRALEX	17%	21%	15%	17%
PROZAC	20%	10%	10%	13%
SEROXAT+PAXIL	12%	12%	8%	10%
LAROXYL	5%	7%	6%	6%
REMERON	3%	1%	4%	2%
IXEL	0%	1%	3%	1%
FAVERIN	1%	1%	2%	1%
SSRI	1%	0%	2%	1%
ANAFRANIL	0%	0%	1%	0%
SERALIN	1%	0%	1%	0%
AURORIX	0%	0%	1%	0%
DESYREL	0%	0%	1%	0%
LUDIOMIL	1%	0%	0%	0%
TOFRANIL	0%	0%	1%	0%
TRICYCLIC AGENTS	0%	0%	1%	0%
ZEDPREX	0%	1%	0%	0%
Total	100%	100%	100%	100%

Analist Medical Pazar Arařtırmaları Ltd Şti 17.03.2004

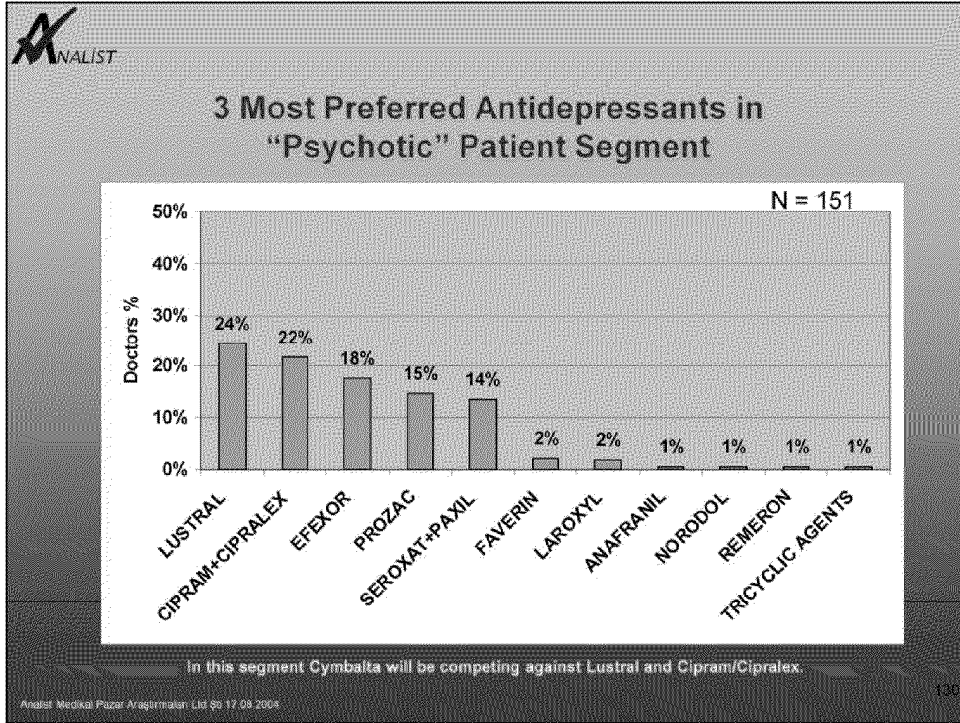





**3 Most Preferred Antidepressants in
"Pure Lethargy" Patient Segment**

Say Number	N:			Total
	54	64	70	
	Specialty			
Pure Lethargy	GP	Neurology	Psychiatry	
LUSTRAL	29%	26%	21%	25%
CIPRAM+CIPRALEX	22%	27%	16%	21%
EFEXOR	18%	16%	19%	18%
PROZAC	15%	13%	19%	16%
SEROXAT+PAXIL	10%	10%	11%	10%
REMERON	2%	1%	3%	2%
IXEL	0%	1%	4%	2%
FAVERIN	0%	3%	1%	1%
LAROXYL	3%	1%	1%	1%
SSRI	0%	1%	2%	1%
AURORIX	0%	1%	1%	1%
EDRONAX	0%	0%	1%	0%
INSIDON	1%	0%	0%	0%
LUDICMIL	0%	0%	1%	0%
SERALIN	1%	0%	0%	0%
SERDEP	1%	0%	0%	0%
ZEDFREX	0%	1%	0%	0%
Total	100%	100%	100%	100%

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**3 Most Preferred Antidepressants in
"Psychotic" Patient Segment**

Say Number	N: Specialty			Total
	50	32	69	
Psychotic	GP	Neurology	Psychiatry	
LUSTRAL	28%	25%	22%	24%
CIPRAM+CIPRALEX	25%	24%	19%	22%
EFEXOR	11%	16%	23%	18%
PROZAC	13%	10%	15%	15%
SEROXAT+PAXIL	17%	16%	10%	14%
FAVERIN	0%	1%	4%	2%
LAROXYL	1%	0%	3%	2%
ANAFRANIL	0%	0%	1%	1%
NORODOL	1%	1%	0%	1%
REMERON	1%	0%	1%	1%
TRICYCLIC AGENTS	1%	0%	1%	1%
DESYREL	0%	0%	1%	0%
IXEL	0%	0%	1%	0%
SERALIN	1%	0%	0%	0%
SSRI	0%	0%	1%	0%
TOFRANIL	0%	1%	0%	0%
Total	100%	100%	100%	100%

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Impressive Characteristics of Cymbalta

- Respondents were given the Cymbalta profile (as profile X) and were asked which features of Cymbalta they found interesting. Responses were recorded in order.

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Impressive Characteristics of Cymbalta First Mentions

Number	N:	101	97	94	292
	Specialty				
Impressive Characteristics of Product X - Rank 1	GP	Neurology	Psychiatry	Total	
Dual reuptake inhibition	18%	29%	33%	26%	
Improvement in pain symptoms	13%	16%	9%	13%	
Efficacy to painful diabetic neuropathy	18%	11%	8%	12%	
Efficacy from week 1	8%	3%	9%	7%	
Good tolerability	7%	7%	5%	7%	
Its high efficacy	5%	3%	11%	6%	
Once a day	4%	4%	9%	5%	
Low side effect profile	8%	0%	3%	4%	
Efficacy in anxiety	1%	6%	2%	3%	
Nothing special / All antidepressants are the same	6%	3%	0%	3%	
Safety in overdose	0%	3%	4%	2%	
Not tricyclic	2%	3%	1%	2%	
Improvement in physical symptoms	1%	3%	0%	1%	
Inhibition of noradrenalin	1%	2%	1%	1%	
Fast onset of action	1%	1%	1%	1%	
FDA approval	3%	0%	0%	1%	
Its efficacy in fibromyalgia	0%	1%	2%	1%	
Wide indication	1%	1%	1%	1%	
Efficacy in major depression	0%	2%	0%	1%	
Efficacy in depression with pain	1%	0%	1%	1%	
Efficacy to depression	1%	0%	1%	1%	
It does not cause dependence	1%	0%	1%	1%	
Total	100%	100%	100%	100%	

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Impressive Characteristics of Cymbalta All Mentions

Number	N: 101 97 94 292			Total %
	Specialty	GP %	Neurology %	
Impressive Characteristics of Product X				
Dual reuptake inhibition	34%	41%	46%	40%
Improvement in pain symptoms	31%	41%	33%	35%
Efficacy to painful diabetic neuropathy	38%	39%	27%	35%
Good tolerability	22%	29%	28%	26%
Low side effect profile	24%	18%	19%	20%
Efficacy from week 1	18%	12%	26%	18%
Once a day	20%	13%	16%	16%
Its high efficacy	11%	11%	21%	14%
Its efficacy in fibromyalgia	8%	23%	10%	13%
Safety in overdose	5%	13%	14%	11%
Efficacy in anxiety	5%	16%	10%	10%
Improvement in physical symptoms	9%	8%	13%	10%
It does not cause dependence	5%	6%	6%	6%
FDA approval	5%	3%	2%	4%
Nothing special / All antidepressants are the same	6%	3%	0%	3%
Efficacy to depression	2%	3%	3%	3%
Not tricyclic	3%	4%	1%	3%
Efficacy in major depression	0%	3%	4%	2%
Wide indication	3%	1%	3%	2%
Efficacy in depression with pain	1%	0%	5%	2%
79% response rate 56% remission	3%	1%	1%	2%
Fast onset of action	1%	1%	3%	2%
Inhibition of noradrenalin	2%	2%	1%	2%
Can be used by other specialties	0%	0%	2%	1%
Efficacy compared to placebo	0%	1%	1%	1%
Total	254%	296%	297%	282%

Compared to other specialties among psychiatrists more respondents mention more features of Cymbalta. This indicates that Psychiatrists may use Cymbalta more efficiently compared to other specialties. In other words psychiatrists may appreciate the qualities of Cymbalta more than other specialties.

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Outstanding Features of Cymbalta

- Later on respondents were asked which features of Cymbalta were different than the current antidepressants:
- *Please note that one cannot expect high percentages to such questions about new drugs which doctors read about for the first time. A percentage of 30% and over should be interpreted as "the drug features were found to be different or interesting". Any percentage between 20 and 30% should be interpreted as "the drug features were found to be moderately interesting". Any percentage below 20% is found to be less interesting.*

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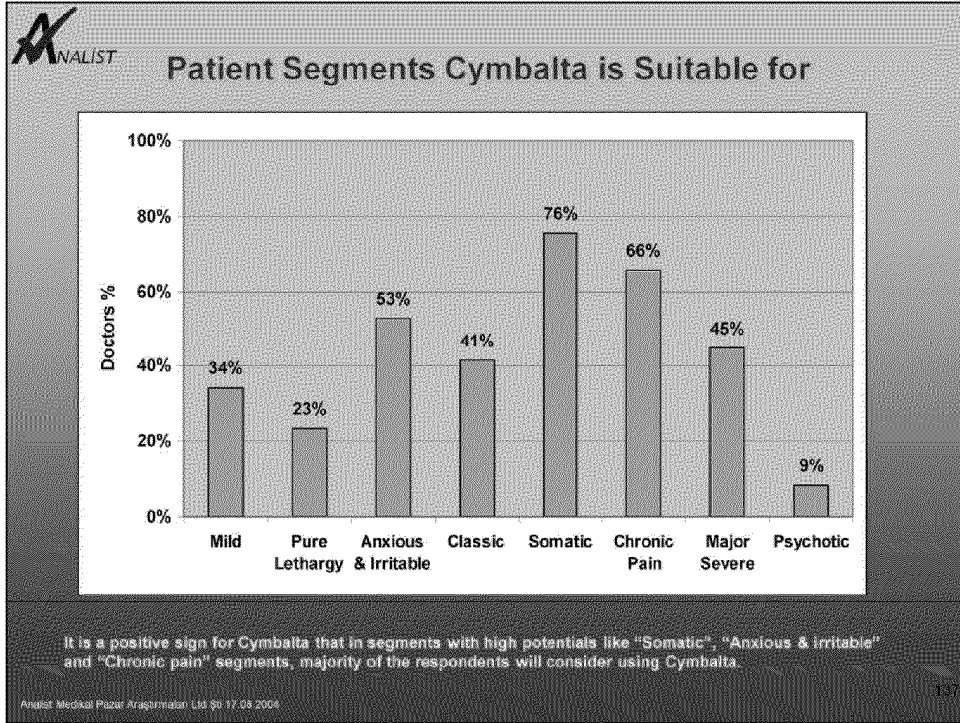
Outstanding Features of Cymbalta

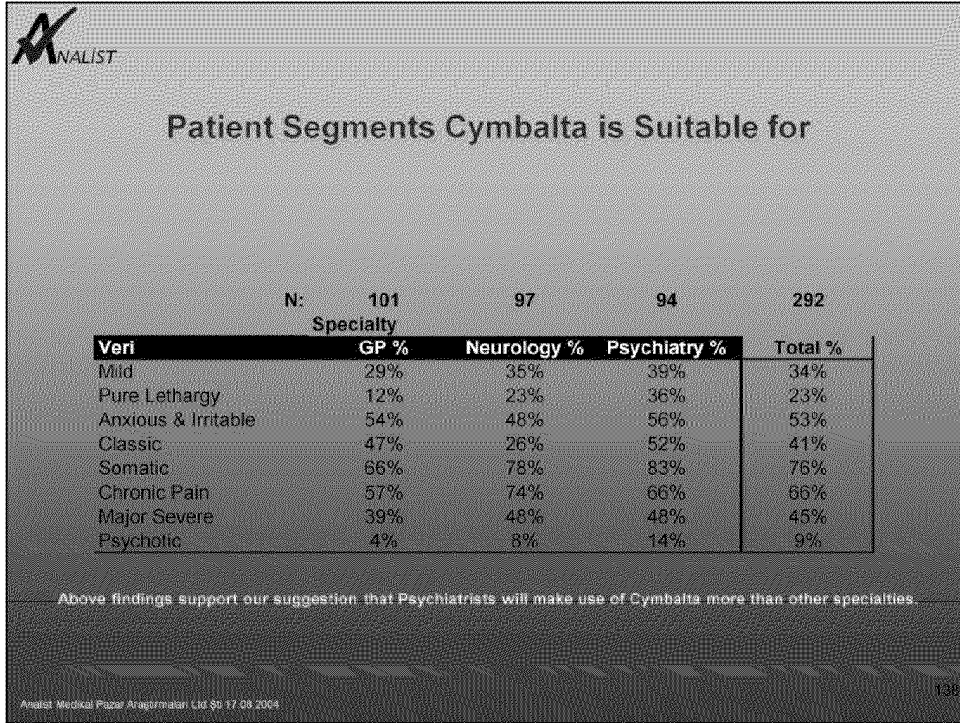
Number	N: 101 97 94 292			Total %
	Specialty			
Different Characteristics of Product X	GP %	Neurology %	Psychiatry %	
Nothing different	34%	23%	20%	26%
Dual reuptake inhibition	16%	18%	31%	21%
Efficacy to Painful Diabetic Neuropathy	18%	23%	17%	19%
Efficacy from week 1	16%	16%	14%	15%
Improvement in pain symptoms	16%	15%	14%	15%
60 mg dosage	4%	7%	7%	6%
Low side effect profile	5%	7%	4%	5%
Safety	2%	7%	7%	5%
High efficacy rate	0%	5%	5%	3%
its efficacy in fibromyalgia	2%	7%	1%	3%
Good tolerability	0%	5%	3%	3%
Safety in overdose	1%	3%	4%	3%
Not addictive	1%	4%	0%	2%
Easy dosing	3%	0%	1%	1%
Efficacy to psychosomatic complaints	1%	1%	2%	1%
Efficacy in major depression	1%	1%	1%	1%
Improvement in physical symptoms	2%	0%	1%	1%
In majority of the patients remission was achieved	0%	1%	2%	1%
Inhibition of noradrenalin	1%	0%	1%	1%
Total	122%	146%	143%	137%

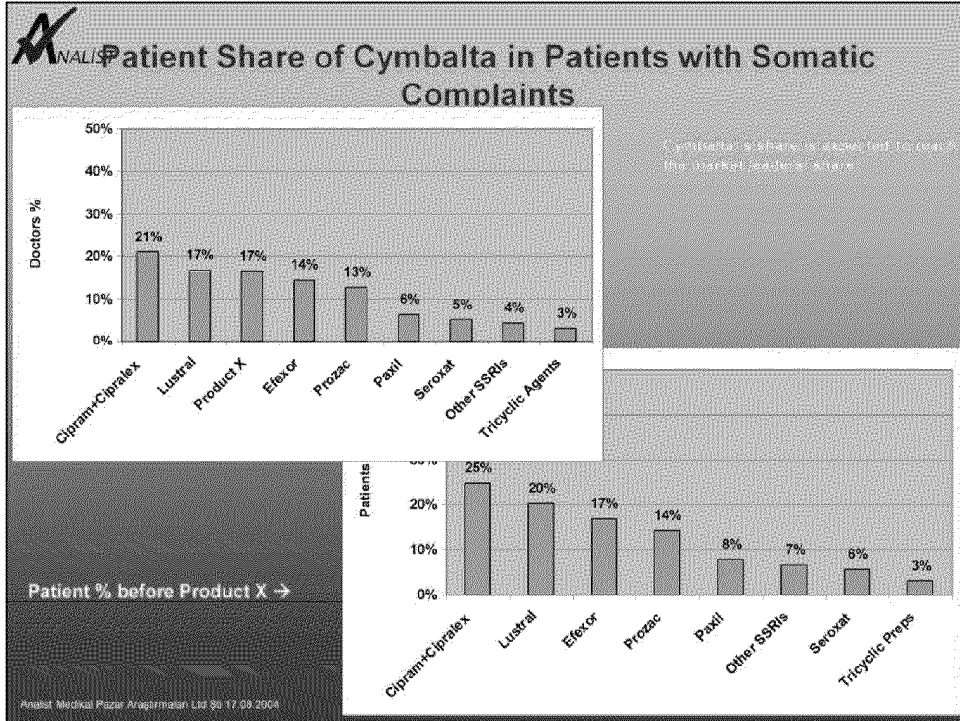
According to the aforementioned explanation at the aggregate level two of the Cymbalta features were found to be moderately interesting. However, GPs play a big role in decreasing the percentages.

Among Psychiatrists "Dual reuptake inhibition" was found to be much more interesting.

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AWALIS Patient Share of Cymbalta in Patients with Somatic Complaints

N: 292

Veri	Specialty			Total
	GP	Neurology	Psychiatry	
Cipram+Cipralext	24%	22%	19%	21%
Lustral	20%	18%	15%	17%
Product X	20%	18%	14%	17%
Efexor	10%	14%	17%	14%
Prozac	11%	8%	16%	13%
Paxil	5%	6%	7%	6%
Seroxat	5%	5%	5%	5%
Other SSRIs	3%	5%	4%	4%
Tricyclic Agents	2%	8%	3%	3%


Among Psychiatrists, Cymbalta's share will be among the most prescribed, although not significantly and may be a little bit below the market leaders.

Patient %	N=	Patient %			Total
		GP	Neurology	Psychiatry	
Cipram+Cipralext	101	30%	25%	21%	25%
Lustral	97	23%	22%	18%	20%
Efexor	94	13%	17%	20%	17%
Prozac	292	13%	10%	17%	14%
Paxil		7%	9%	9%	6%
Other SSRIs		6%	9%	8%	7%
Seroxat		6%	5%	8%	6%
Tricyclic Preps		2%	4%	3%	3%

Patient % before Product X →

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Why Cymbalta is Preferred ?

	N:	89	86	85	260
	Specialty				
Suitable Patient Characteristics	GP %	Neurology %	Psychiatry %	Total %	
Improvement in pain symptoms	30%	36%	33%	33%	
Dual reuptake inhibition	21%	29%	21%	24%	
High efficacy rate	18%	13%	19%	17%	
Efficacy to Painful Diabetic Neuropathy	19%	19%	9%	16%	
Efficacy from week 1	4%	10%	18%	11%	
Low side effect profile	15%	5%	6%	8%	
Good tolerability	4%	8%	9%	7%	
Efficacy in anxiety	1%	12%	6%	6%	
Improvement in psychosomatic complaints	4%	6%	6%	5%	
To see how effective it is	7%	1%	4%	4%	
Efficacy in major depression	1%	5%	6%	4%	
Once a day dosing	4%	3%	4%	4%	
Safety	2%	3%	6%	4%	
60 mg dosage	2%	2%	6%	3%	
It is safe in overdose	0%	3%	5%	3%	
Easy dosing	2%	1%	0%	1%	
Wide indication	0%	1%	1%	1%	
Not addictive	1%	0%	1%	1%	
Total	140%	160%	160%	153%	

Analist Medical Pazar Arařtirmaları Ltd Şti 17.09.2009

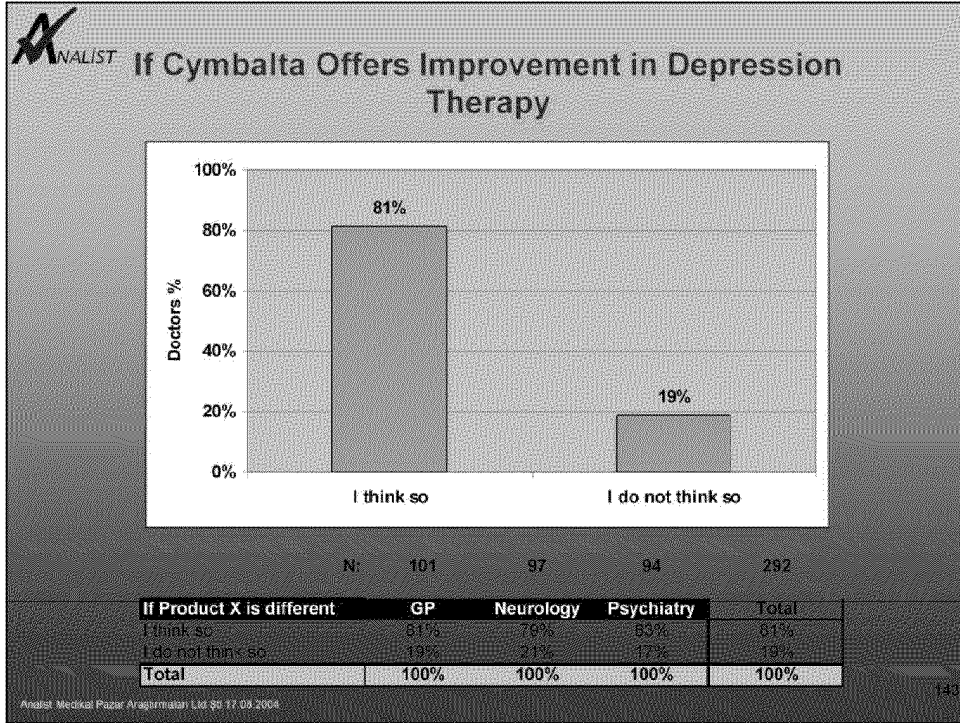



Why Cymbalta is not Preferred ?

Number	N:			
	101	97	94	292
	Specialty			
Not Suitable Patient Characteristics	GP %	Neurology %	Psychiatry %	Total %
No special reason	34%	32%	32%	33%
I have to try first	31%	20%	22%	24%
No idea about side effects	16%	13%	19%	14%
Not enough number of studies	7%	9%	7%	8%
I prefer the antidepressant I have been using	5%	8%	4%	6%
It cannot be used in all patient profiles	7%	5%	4%	5%
I have long experience with current antidepressants	3%	8%	4%	5%
It is not too different than other antidepressants	5%	2%	3%	3%
In patients who has mild depression I would not use	2%	3%	3%	3%
High side effect profile	0%	4%	2%	2%
For elderly there are more appropriate antidepressants	1%	0%	3%	1%
I would not use in patients with cardiovascular problems	0%	1%	2%	1%
60 mg is too much	1%	1%	0%	1%
No FDA approval for ma or depression yet	1%	0%	1%	1%
Total	107%	108%	110%	108%

It looks that Cymbalta does not have any specific negative points at this point in time.

Avalist Medical Pazar Anagirmaları Ltd Şti 17.08.2014 142






Impressive Characteristics of Durapac First Mentions

Number	N: 101 97 94 292			Total
	Specialty			
Impressive Characteristics of Product Y - Rank 1	GP	Neurology	Psychiatry	
Once a week	60%	80%	87%	64%
Ease of use	4%	4%	1%	3%
High efficacy	2%	3%	2%	2%
Efficacy until week 25th	0%	3%	3%	2%
It is an ordinary antidepressant	3%	2%	0%	2%
It is an SSRI	0%	1%	3%	1%
Doses can be seen on the pack	2%	1%	1%	1%
Safety	1%	1%	1%	1%
Can be switched back to once a day dosing	2%	1%	0%	1%
3-month adjustment pack	2%	0%	0%	1%
Total	100%	100%	100%	100%


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Impressive Characteristics of Durapac All Mentions

Number	Specialty			Total %
	N: 101	97	94	
Impressive Characteristics of Product Y	GP %	Neurology %	Psychiatry %	
Once a week	92%	90%	93%	91%
Ease of use	10%	16%	14%	13%
Good tolerability	2%	14%	17%	11%
High efficacy	9%	9%	12%	10%
Can be switched back to once a day dosing	12%	8%	7%	9%
Doses can be seen on the pack	7%	7%	9%	8%
Safety	6%	8%	4%	6%
Efficacy until week 25th	3%	6%	6%	5%
It is an SSRI	4%	3%	9%	5%
3-month adjustment pack	5%	3%	6%	5%
Patient compliance	7%	4%	1%	4%
Same efficacy as in once a day	3%	4%	4%	4%
Low side effect profile	2%	6%	1%	3%
It is an ordinary antidepressant	3%	2%	0%	2%
It will allow patient to use it for 1 year	1%	1%	1%	1%
Better efficacy than placebo	0%	0%	2%	1%
FDA approval	2%	0%	0%	1%
Total	169%	184%	186%	179%

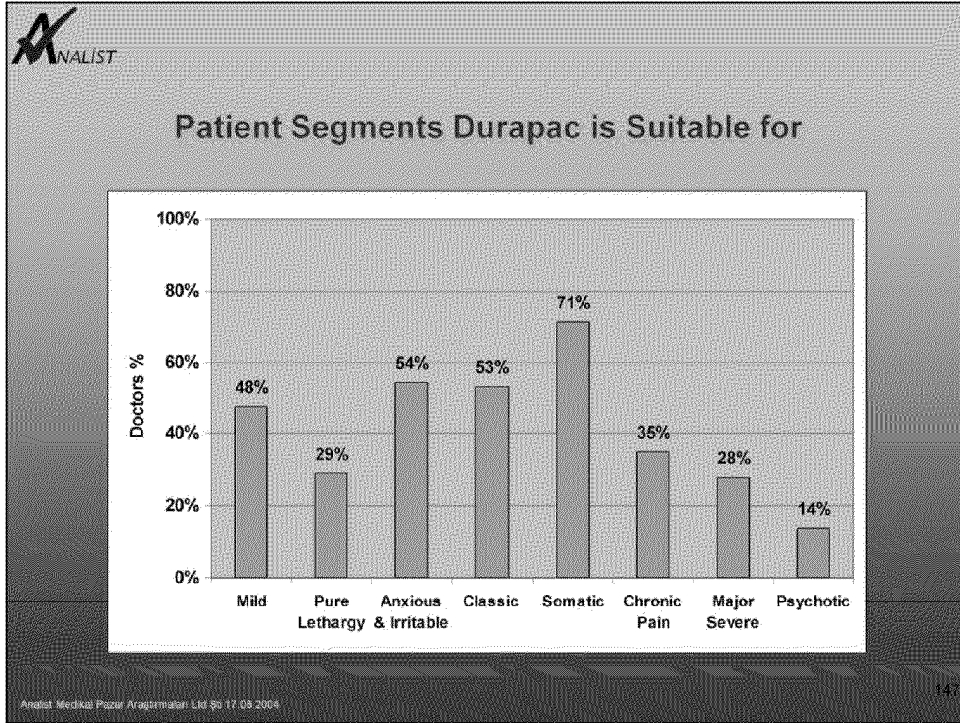
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Outstanding Features of Durapac

Number	Specialty			Total %
	GP %	Neurology %	Psychiatry %	
Once a week antidepressant	73%	88%	84%	82%
Its features other than once a week are the same	13%	5%	5%	8%
Ease of use	7%	7%	5%	7%
Switch back to once a day is possible	5%	2%	4%	4%
Adjustment pack	5%	0%	5%	3%
Same efficacy as in once a day	2%	0%	3%	2%
It can be used for a long time	2%	1%	1%	1%
Reminders	1%	2%	1%	1%
It does not prolong half life	1%	1%	1%	1%
Better efficacy to placebo	0%	1%	1%	1%
Good tolerability	0%	1%	1%	1%
Low side effect profile	0%	0%	2%	1%
Total	109%	109%	118%	112%

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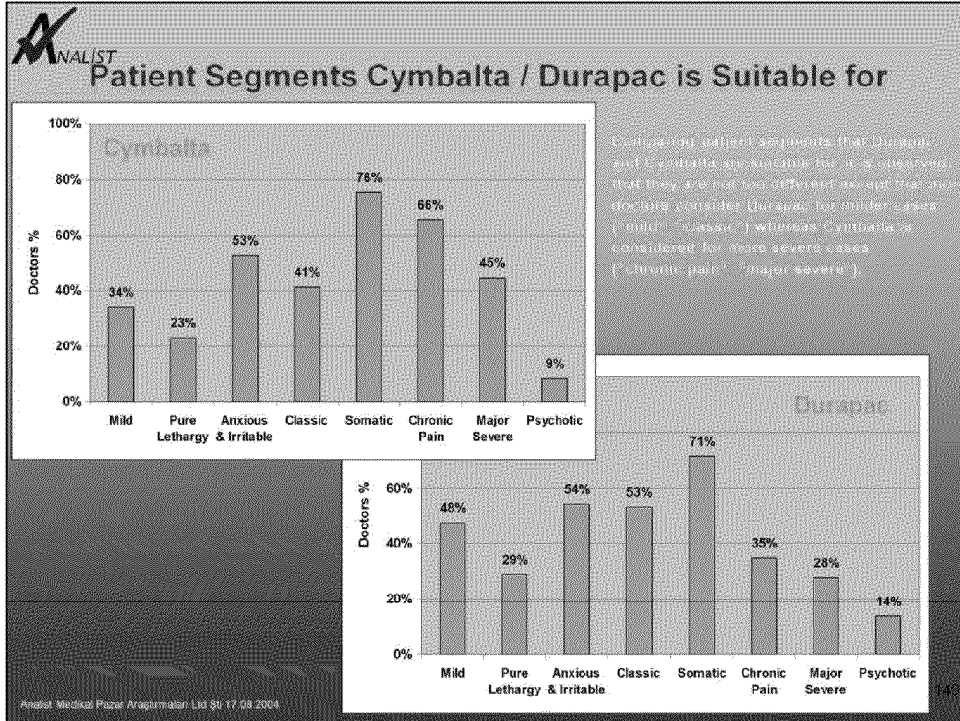


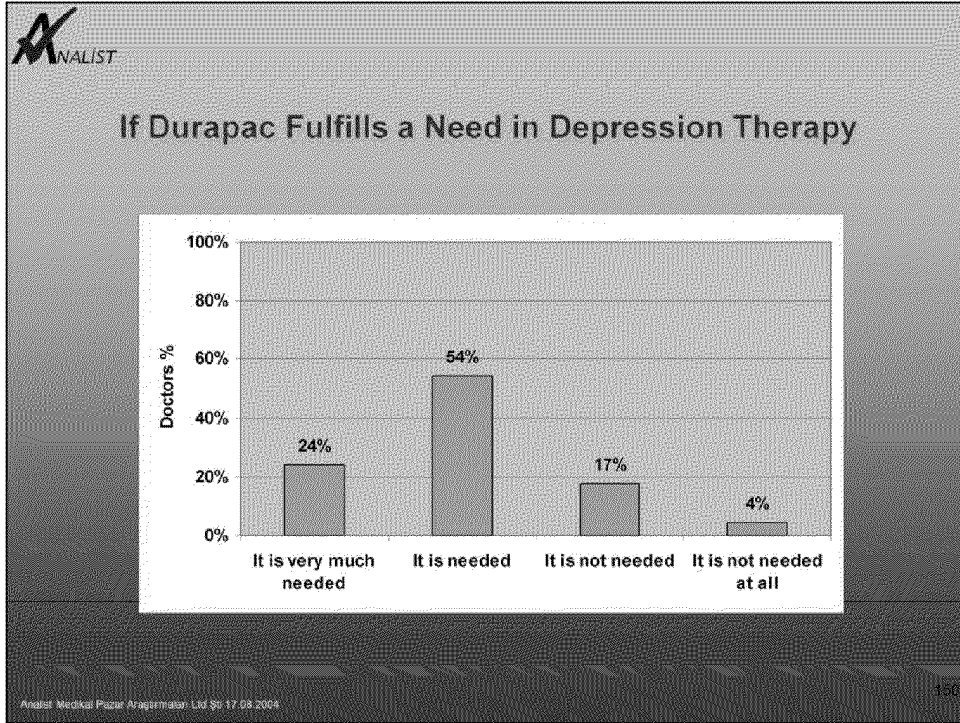



Patient Segments Durapac is Suitable for

	N: 101	97	94	292
	Specialty			
Veri	GP %	Neurology %	Psychiatry %	Total %
Mild	41%	41%	62%	48%
Pure Lethargy	26%	22%	40%	29%
Anxious & Irritable	62%	52%	48%	54%
Classic	59%	41%	59%	53%
Somatic	65%	78%	70%	71%
Chronic Pain	32%	40%	33%	35%
Major Severe	26%	28%	30%	28%
Psychotic	14%	15%	12%	14%

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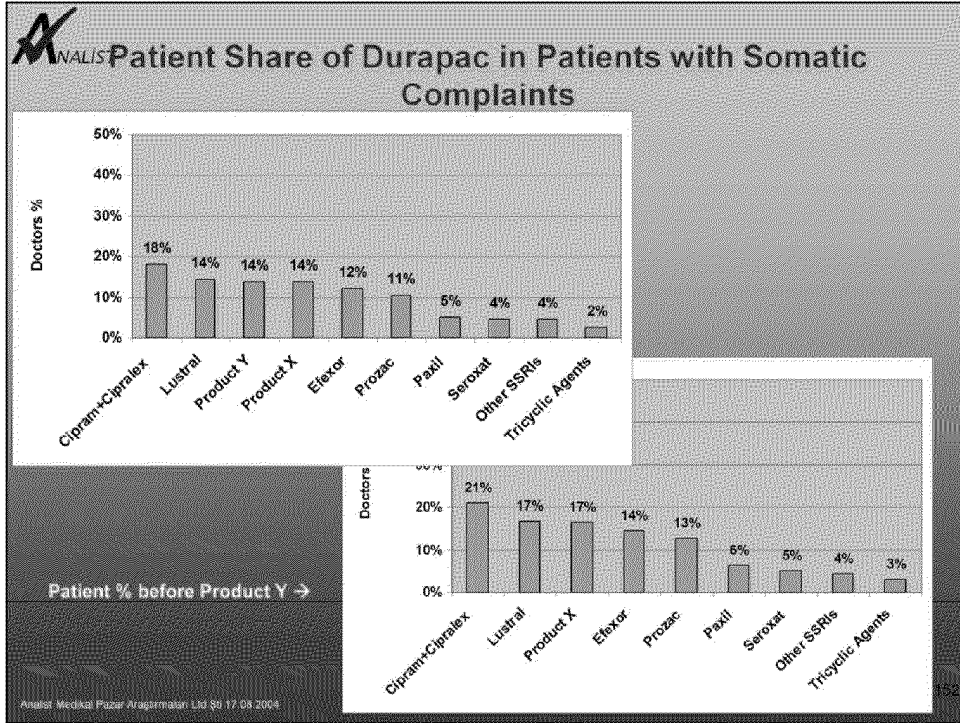




If Durapac Fulfills a Need in Depression Therapy

N:	101	97	94	292
Specialty				
If Product Y is Necessary	GP	Neurology	Psychiatry	Total
It is very much needed	19%	28%	26%	24%
It is needed	60%	46%	55%	54%
It is not needed	16%	23%	14%	17%
It is not needed at all	5%	3%	5%	4%
Total	100%	100%	100%	100%

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WALIS Patient Share of Durapac in Patients with Somatic Complaints

Veri	Specialty			Total
	GP	Neurology	Psychiatry	
Cipram+Cipralext	21%	19%	16%	18%
Lustral	16%	14%	14%	14%
Product Y	15%	16%	12%	14%
Product X	17%	14%	12%	14%
Efexor	9%	12%	15%	12%
Prozac	9%	6%	14%	11%
Paxil	4%	6%	5%	5%
Seroxat	3%	5%	5%	4%
Other SSRIs	3%	5%	4%	4%
Tricyclic Agents	1%	4%	2%	2%


N: 101 97 94 292

Veri	Specialty			Total
	GP	Neurology	Psychiatry	
Cipram+Cipralext	24%	22%	19%	21%
Lustral	20%	16%	15%	17%
Product X	20%	18%	14%	17%
Efexor	10%	14%	17%	14%
Prozac	11%	8%	16%	13%
Paxil	5%	6%	7%	6%
Seroxat	5%	5%	5%	5%
Other SSRIs	3%	5%	4%	4%
Tricyclic Agents	2%	6%	3%	3%

N: 292

Patient % before Product Y →

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Why Durapac is Preferred ?

Suitable Patient Characteristics	N:	79	83	84	246
	Specialty	GP %	Neurology %	Psychiatry %	Total %
Once a week		61%	67%	61%	63%
Ease of use		32%	23%	27%	27%
Efficacy until week 25th		9%	11%	10%	10%
It will allow patient to use it for a long time		8%	5%	13%	9%
Same efficacy as in once a day		4%	0%	5%	3%
Good tolerability		3%	2%	2%	2%
Low side effect profile		5%	1%	0%	2%
I have to try first		3%	0%	2%	2%
I will use it in patients who wants once a week treatment		0%	2%	2%	2%
Can be used in different patients		1%	0%	2%	1%
Switch to once a day can allow many patients to use it		1%	0%	2%	1%
Adjustment pack		1%	1%	0%	1%
It is an SSRi		1%	0%	1%	1%
Total		130%	113%	130%	124%

Once a week is the first and foremost attractive feature of Durapac.


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Why Durapac is not Preferred ?


Number	Specialty			Total %
	N: 101	97	94	
Not Suitable Patient Characteristics	GP %	Neurology %	Psychiatry %	
No special reason	41%	31%	32%	35%
I have to try it first by myself	17%	23%	12%	16%
I am happy with other antidepressants	13%	4%	14%	10%
I will use drugs that I have experience	15%	6%	9%	10%
I have to know about side effects	4%	12%	10%	10%
I may not get efficacy from an once a week antidepressant	5%	2%	4%	4%
It will not suit to every patient	1%	8%	1%	3%
Psychiatric patient may not want to use once a week antidepressant	1%	5%	4%	3%
In patients who are not compliant	1%	2%	5%	3%
Low number of clinical studies	1%	2%	2%	2%
In patients who are compliant to once a day	1%	1%	2%	1%
In patients who do not see efficacy with once a week	1%	2%	1%	1%
If the patient has somatization disorder patient may not want to use once a week antidepressant	2%	0%	0%	1%
Price can be expensive	1%	1%	0%	1%
Total	103%	105%	103%	104%

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 **Comments and Recommendations - 1**

- Patient segments that Cymbalta is being considered by the majority of the doctors (somatic, anxious & irritable, chronic pain) are segments with the highest patient potential (57% of depressive patients). Cymbalta is being considered for other segments, too.
- The results show that when promoting Cymbalta to doctors four factors ("Avoid dependence / withdrawal issues", "Avoid anxiety, agitation or restlessness", "Relief of physical symptoms / somatic complaints", "Improvement in mood / affective symptoms" must be addressed in order for a productive communication.
- However when promoting Cymbalta to different specialties, different points have to be stressed more in relation to customer needs:
 - When promoting to Psychiatrists, talking first about Cymbalta's efficacy to mood symptoms then its efficacy to physical symptoms will be more appropriate. Also to gain confidence to the drug, it has to be mentioned that Cymbalta does not cause anxiety, agitation or restlessness.
 - When promoting Cymbalta to Neurologists, "Relief of somatic symptoms" has to be mentioned at the first place. Its efficacy in chronic pain, headache has to be specifically mentioned.
 - When promoting to GPs, less side effect profile and "it does not cause dependence" have to be stressed together with relief of physical symptoms.

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Comments and Recommendations - 2

- Cymbalta's market share is expected to reach the market leader's share (Lustral). In other words, it is very probable that Cymbalta's acceptance will be high.
- When Cymbalta is launched Cymbalta may cannibalize Prozac sales in some patient segments (especially in Chronic Pain). Therefore Cymbalta has to be positioned carefully for these patient segments to gain maximum sales with these two brands.
- The positioning of brands cannot be distinguished. In many of the factors no associations were found. This is a good outcome for Cymbalta. With a good positioning strategy Cymbalta can have a distinctive positioning of its own and can benefit from this distinctive positioning/image.

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