

What's Happening - SILVER PRIDE

DR VANDENBURG WILL SEE YOU NOW

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Private specialist in general medicine with an interest in Sexual Health Pharmaceutical and Medico-Legal Expert

BELOW THE BELT: There seems to be a lot of interest in drugs and their side effects, especially Viagra.

I happen to know a lot about Viagra. I have registered two medicines for Erectile Dysfunction, done research on Premature Ejaculation, and indeed, reviewed 30,000 ECG's, which are electrical recordings from the heart; to ascertain the true risk of Viagra to patients with cardiac disease. We did so much work on sexual health medicines, that my company had a special department that we called the "Below the Belt" division.

We also registered antibiotics for Gonorrhea and Chlamydia as well as NSU (Non Specific Urethritis) and many other "down below" infections.

Your questions answered:

Dear Malcolm,

My wife and I are thinking of having a baby. She has been on the antidepressant Seroxat for five years and I

> have heard that it is dangerous to take this medicine during

pregnancy. Could you put her and my mind at ease and tell us if it is dangerous to take Seroxat during pregnancy? B.D

Dear B.D,

I'm afraid I cannot re-assure you. No treatment for anything is safe. There is a

risk-benefit ratio to everything. This is a contentious area. There is no doubt that some

anti-depressants present a health risk to your baby, however, stopping them may also have a risk. Seroxat is not acceptable to my mind in pregnancy. You and your wife need an in-depth discussion with your Health Care One of the other things that the Below the Belt Department worked on was the class of anti-depressants known as SSRI's, (Selective Serotonin Re-uptake Inhibitors) such as Prozac and Seroxat (whose real names are Fluoxetine and Paroxetine); there are many others. The reason why they fell within this category were, because they prevent orgasms in many people, delay orgasms in almost all men and women and are used by specialists as a cure for premature ejaculation.

I also meet these medicines a lot in my Forensic Medical Practice and in my court work as they alter behaviour, cause aggression, and may

Professional, be that GP or Obstetrician (that is the doctor in charge of your wife and her pregnancy). Midwives may know the answer, however, because the substances have been in the news regarding their safety or otherwise during pregnancy. Doctors believe that the overall risk of birth defects and other problems for you and your unborn baby are rare and the risk low. However, some anti-depressants have been associated with health problems in babies.

In general, the risk-benefit ratio of Citalopram (trade name: Celexa/Cipramil), Fluoxetine (trade name: Prozac) and Sertraline (trade name: Zoloft/Lustral) are thought to be acceptable. There was some thought that they may cause problems with rare lung diseases in babies if taken in the first four to five months of pregnancy, as well as some very rare heart defects, although this has neither been confirmed nor disproved. This is the case for other rare birth defects.

Unluckily, the drug your wife is on, Paroxetine (Seroxat) is to my mind, not precipitate suicidal behaviour or/and have been linked to homicides.

They have to be used with special caution in those aged under 25, as there is even a net increase in suicides in this group given SSRI's, whereas above the 25 age-group, there is a net decrease although it may precipitate suicidal thoughts in a lot of older patients. I have done research on many of these compounds.

Malcolm sees private patients: Sussex Medical Chambers Tel: 01273 424515

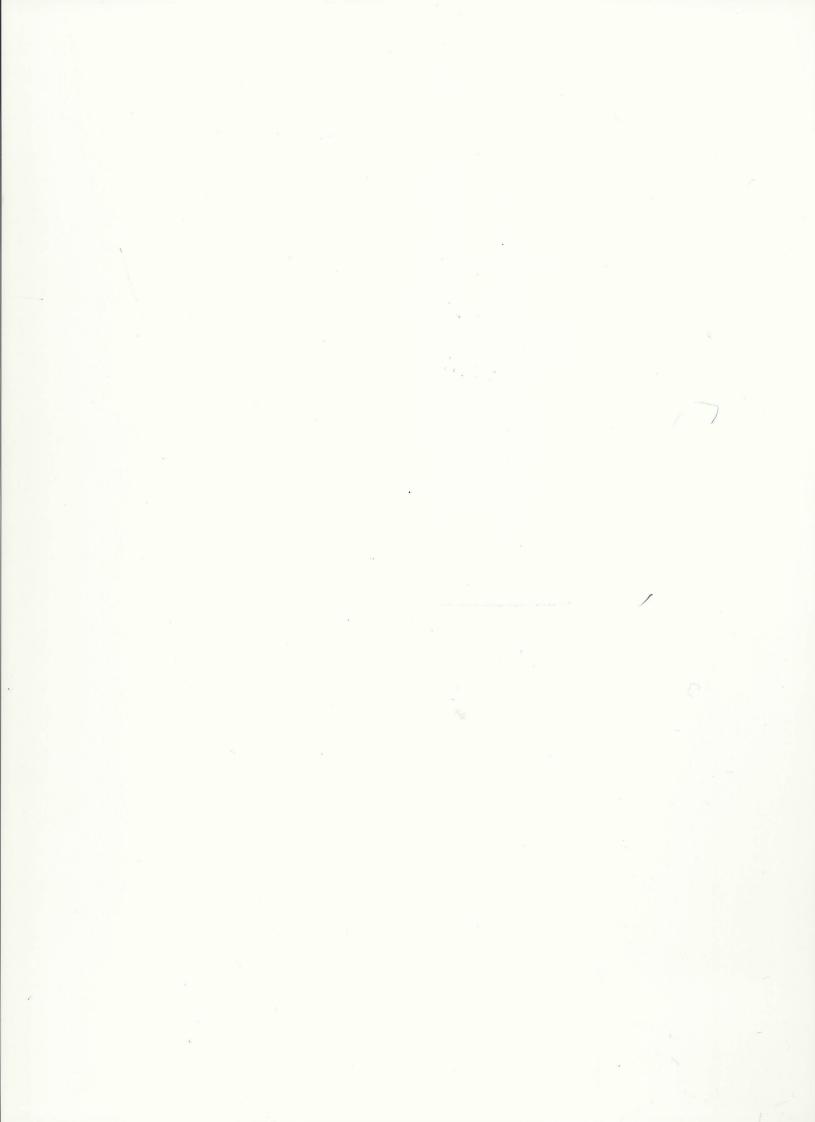
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to be used during pregnancy. There is a much larger risk of proven association with foetal heart diseases.

Additionally, if any anti-depressant is taken throughout pregnancy, especially including and up to the three months before birth, the baby may get a discontinuation or withdrawal reaction and some people used to think it was advisable to slowly reduce the dose before birth. This is now not recommended as it puts the mother at risk of a recurrence of her depression without decreasing the risk to the baby.

I would recommend you coming off the Seroxat before getting pregnant, and if your doctor thinks your mental health issues are bad enough to need an antidepressant, consider the other ones I have mentioned balancing the risk to yourself of precipitating recurrence of mood disturbances, depression and anxiety disorders and the potential low risk of very rare birth defects in your baby. The answer is not as simple or 100 per cent reassuring like you would have wanted.

Keep your questions coming in: editor@what'shappeningmag.co.uk or write to What's Happening Magazine, 5 Southlands Way, Shoreham by Sea, West Sussex BN43 6AS



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