

# Therapeutic inadequacy in spite of bioequivalency on replacing Fluctine<sup>®</sup> with Fluocim<sup>®</sup>

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At the beginning of October 1996, a 61-year-old woman with sleeping problems, loss of appetite, lack of drive and interest, difficulties with concentration and anxiety was prescribed 20 mg of Fluctine<sup>®</sup> daily. After 14 days the symptoms had subsided and she began to take up hobbies she had neglected for years. In 1998 physician and patient decided to change to 20 mg of the generic Fluocim<sup>®</sup> (daily dose costing CHF 2.75 rather than CHF 3.70). Eighteen days later the physician was surprised to find that the patient showed symptoms similar to those of October 1996. Convinced

that the regression could not be due to the generic, the physician suggested keeping it on for another 14 days. Two weeks later the patient's condition was unchanged. Fluocim<sup>®</sup> was withdrawn and Fluctine<sup>®</sup> reinstated. After 14 days she was again symptom-free and has remained so for 14 months. A similar observation was reported by Hovaquimian [1].

The authors conclude on the need to check the patient's blood levels the next time such a case arises.

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## References

- 1 Hovaquimian T. *Méd Hyg* 1998;2229:2085-7.

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