

## SINGAPORE

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## INTRODUCTION

Prior to the advent of psychotropic drugs, the main medications used in Woodbridge Hospital were paraldehyde, barbiturates and morphia. About 1954, reserpine was simultaneously introduced with chlorpromazine. After a short period, reserpine was discontinued because of its slow action and its tendency to cause depression. Chlorpromazine was first used in Woodbridge Hospital in the preparation "Injection Largactil" in May 1954. The following month, Largactil tablets were introduced. Since then, chlorpromazine has become one of the standard psychotropic drugs in the hospital. A large number of other psychotropic drugs had been tried out from time to time but with a few exceptions, their use had not been sustained.

*Table 1*  
*Tranquillizers and Anti-depressants*

Drug	Date first used in Woodbridge Hospital
Inj. chlorpromazine	May 1954
Tab. chlorpromazine	June 1954
Tab. isocarboxazid	June 1960
Tab. prochlorperazine	July 1960
Tab. promazine	August 1960
Tab. thioridazine	November 1960
Tab. chlordiazepoxide	May 1961
Tab. trifluoperazine	April 1963
Tab. imipramine	April 1964
Tab. amitriptyline	November 1965
Tab. diazepam	December 1965
Tab. pericyazine	May 1966
Tab. haloperidol	May 1966
Cap. nortriptyline	August 1967

The use of psychotropic drugs in Singapore will be discussed under the following headings:

- (i) Major tranquillizers
- (ii) Minor tranquillizers
- (iii) Anti-Depressants.

*Table II*

## Major Tranquillizers

Drug	Consumption within Woodbridge Hospital per month
Tab. chlorpromazine	226,000 tablets
Inj. chlorpromazine	100 amps.
Tab. trifluoperazine	50,000 tablets
Tab. promazine	12,000 "
Tab. thioridazine	4,000 "
Tab. haloperidol	2,500 "
Tab. pericyazine	2,000 "

As can be seen from the above table, chlorpromazine is the most frequently used drug of this group, followed by trifluoperazine. Chlorpromazine is used mainly for psychotic patients who are excited, hyperactive, destructive and aggressive, and generally for patients suffering from Schizophrenia. The initial dosage is 100 mg. 3 times a day. The dosage is adjusted according to the response. The maximum dose ever used was 2,000 mg. a day. Chlorpromazine is not generally used for patients above the age of 60 for which promazine is used. Thioridazine is used for cases who develop hypersensitivity side effects of chlorpromazine (skin rashes, jaundice). Trifluoperazine is used mainly on withdrawn schizophrenics and for the suppression of delusions and auditory hallucinations. The standard dosage is 5 mg 3 times a day. Pericyazine is used mainly for young patients who exhibit "behaviour disorders" and Haloperidol is used when the patients show features of mania. At the moment, long-acting parental tranquillizers (fluophenazine) are being tried out and it is likely that they will be introduced as a standard drug in the near future.

In the Government out-patient psychiatric clinics, the pattern of usage of major tranquillizers is the same as that in Woodbridge Hospital. Among psychiatrists in private practice, the three drugs most commonly used are chlorpromazine, trifluoperazine, and thioridazine

Most of the better known major tranquillisers have been tried at Woodbridge Hospital at one time or another. The following are some of the major tranquillizers that have been tried out at Woodbridge Hospital, but whose use had not been sustained. Stemetil, (prochlorperazine); Trilafon, (perphenazine); Majeptil, (thiopropazine); Veractil, (methotrilineprazine), Pacatal, (pecazine). Nontensil (acepromazine), Anatsensol, (fluphenazine).

At present the following drugs are being used on a trial basis: Triperidol (trifluoperidol), Orap (primozide), Leponex (clozapine), and Modecate, (fluphenazine decanoate), Navane (thiothixene).

#### *Minor tranquillisers*

Minor tranquillisers are not used in large quantities for the treatment of in-patients of Woodbridge Hospital except that diazepam 10 mg. o.n. is frequently prescribed for patients requiring a hypnotic. This accounts for the large quantity of diazepam consumption per month as shown in Table III below:

*Table III*

Drug	Consumption per month (1972)
Diazepam	22,000 (5-10 mg) tablets
Chlordiazepoxide	4,000 (5-10 mg) tablets

In the psychiatric out-patient clinics, the minor tranquillisers are used much more frequently and the main drugs are chlordiazepoxide and diazepam. Among the less commonly used minor tranquillisers are Serax (oxazepam), Ativan (lorazepam), Nobrium. Among the private psychiatrists, diazepam is the most frequently prescribed drug.

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Since the last report in 1970, psychiatric facilities in the country have been increased by the establishing of more psychiatric units in general hospitals. Table 1 shows the number of patients

*Table IV*

#### *Antidepressants*

Drug	Consumption per month (1972)
amitriptyline	9,000 tablets
imipramine	1,500 "
isocarboxazide	200 "
nortriptyline	100 "

The above table reflects the usage on antidepressants in Woodbridge Hospital. The first antidepressant drug introduced was Marplan (isocarboxazide) in 1960. It was superseded by imipramine in 1964 because of the possibility of serious side effects of MAOI. At present, amitriptyline is the most common antidepressant drug used in the hospital and the standard dosage is 25 mg. 3 times a day. In the private sector, the MAOI is rarely used. The 4 most common drugs used are amitriptyline, imipramine, trimipramine and nortriptyline.

#### *Psychotropic Medication in General Practice*

Although most of the better known psychotropic drugs are available in Singapore, the General Practitioners tend to rely on the more established, drugs. In a survey by TSOI and CHIA (1972), two-thirds of the doctors used Stelazine, Largactil, Stemetil, Melleril and Sparine for the treatment of Schizophrenia. 61% used tricyclic drugs and only 5% used MAOI (Marplan) for treating Depression. Most doctors used Librium and Valium for the treatment of Neurosis.

#### BIBLIOGRAPHY

TSOI & CHIA; *Singapore Medical Journal* 13:188, 1972.

admitted to psychiatric in-patient facilities and the number of consultations given at out-patient psychiatric clinics during the years 1954 - 71. It will be observed that there has been an increase