

August 3, 1970

Dr. Jack Freund, Vice President  
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Dear Jack,

I have read the reports on sulpiride (Dogmatil) with interest. The data consists of translations from French of 17 clinical studies and one animal assay, published 1968-1969. The principal clinical reports of Borenstein et al. (*Ann. Med. Psychol.*, 1: 90-99, 1968; and 2: 560-74, 1968) are frequently cited but are lacking in this collection.

In the continental manner, case records are cited in general terms and it is difficult to assess the data. Four groups of patients have been treated: schizophrenia, depressive psychosis, depressive neurosis and neurovegetative disorders.

I found the reports of Collard (1969), Mathey et al. (1969) and Naviau (1969) best for clinical material, and that of Borenstein et al. (1969) for an animal EEG study. From these data, it is probable that:

1. sulpiride, 800-1600 mg/day, is an active antipsychotic agent, with alerting and stimulating features;
2. it may have less potential for parkinsonism or seizures than other active antipsychotic compounds;
3. it has antidepressant activity, particularly in agitated, elderly patients (Renault, 1969); and,
4. it has some anti-vertigo activity and may have other anxiolytic features in neurovegetative states.

These citations are difficult to interpret, since the reader is asked to have faith in the observers (it is assumed that they are known, or that their clinic will carry the weight of authority behind the observations), and controlled data are not presented.

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I have known P. Borenstein since 1958. He is an able electro-encephalographer and clinician. He is dour, carries a heavy burden of studies, publishes often and has well trained European assistants. In Liege, in March 1969, I heard him discuss a new, all-purpose psychoactive compound, with well defined EEG activity. I don't recall the name of the drug, for he told me that the compound was not available for American studies; but I believe it must have been sulphiride. His enthusiasm did not get a good reception, since many in the audience were preoccupied by other new compounds, chiefly pimozide and fluspiriline, two Janssen compounds in early clinical trial. (The conference was in Liege with Janssen support, and many of the participants were his investigators.)

Collard's report is also a good one. I know the director of his choice, Professor Bobon, as well as his son. They are enthusiastic and probably able psychopharmacologists, and perhaps these observations should be treated seriously.

If you seek another psychoactive compound, the data of these studies are sufficiently supportive of a broad spectrum antipsychotic (and antidepressant?) to warrant further study. It also has interesting anti-vertigo properties to support its antipsychotic potency.

I would suggest Borenstein's initial reports be read and his present views be obtained. Also, the present views of Collard and Bobon and Naviau. It may be useful to visit these centers, to discuss the clinical material in detail, and to assess comparisons with other active compounds in the same clinics. In the case of Borenstein, it would be interesting to review his EEG material.

I am attending the CINP in Prague in mid-August. As this is a biennial opportunity to discuss new compounds, I have checked the list of titles and sulphiride appears only once. J. M. Sutter, et al., of Marseille are reading: "Controlled study of the psychotropic effects of a new drug: Sulpiride."

Thank you for the opportunity to review this material. It reminded me that I should take better notes at European clinical meetings, and will try to do so. (I am returning the translation separately.)

My best regards.

Sincerely yours,

Max Fink, M.D.  
Professor of Psychiatry

MF:kt

cc: Dr. Tabor