

A CARLAT PSYCHIATRY
REFERENCE TABLE

Generic Stumbles From the Past	
Anticonvulsants	Anticonvulsants have a narrower therapeutic window in epilepsy than bipolar disorder. Hence, there are reports of increased seizures after switching to generic lamotrigine, carbamazepine, and valproic acid, but this has not clearly translated to problems in bipolar disorder.
Bupropion and Venlafaxine	Some specific extended-release versions of these antidepressants—venlafaxine XR and Budeprion XL (Teva's branded generic bupropion XL)—had a tendency to dump the entire dose shortly after taking it, resulting in side effects in the morning and withdrawal problems in the afternoon. Both were made by Teva. The problematic budeprion XL has since been withdrawn from the market.
Citalopram	There is one report from 2007 of worsened panic disorder in 20 patients who switched from branded Celexa to generic citalopram. The patients were not aware of the switch, and they improved with return to the brand (Van Ameringen M et al, <i>J Psychopharmacol</i> 2007;21(5):472–476).
Clozapine	There were reports of increased relapses when patients switched from branded to generic clozapine in 2001, particularly with the Zenith generic (later bought by Teva). A more recent analysis concluded this problem is rare and best managed by measuring the serum levels.
Concerta	Two generics were withdrawn in 2016 for releasing the medication too slowly (made by Mallinckrodt and UCB/Kremers; Actavis was unaffected).
Levothyroxine	You may hear it said that levothyroxine is not bioequivalent to the branded form, Synthroid. This was true in 1980 when a paper was published in <i>JAMA</i> exposing the discrepancy. Four years later the same authors reported that the manufacturing problem had been corrected, and in 1997 a study of four levothyroxine products found no difference among them (Dong BJ et al, <i>JAMA</i> 1997;277(15):1205–1213). Still, the rumor persists.

From the Expert Q&A:
“What’s Wrong With Generics?”
with Katherine Eban

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