

**To:** CN=Jared G Kerr/OU=AM/O=LLY@Lilly  
**Date:** 03/19/2002 03:52:19 PM  
**From:** CN=Patrizia Cavazzoni/OU=AM/O=LLY  
**Subject:** Re: ZYP:diabetic coma and neuroleptic malignant syndrome(case No.200201953)

Jared

Why is this being coded as a case of DKA and NMS, rather than DKA/glucose dysregulation as a result of NMS (eg see German case?)

Patrizia

**Jared G Kerr**

03/19/2002 03:45 PM To: Patrizia Cavazzoni/AM/LLY@Lilly, Margaret O Sowell/AM/LLY@Lilly  
cc:  
Subject: ZYP:diabetic coma and neuroleptic malignant syndrome(case No.200201953)

FYI

Japan diabetic coma case

- Jared

----- Forwarded by Jared G Kerr/AM/LLY on 03/19/2002 03:45 PM -----

**Noriko Akagi**

03/14/2002 05:11 PM To: US\_Zyprexa\_Japan Safety List  
cc: Mark Lakshmanan/AP/LLY@Lilly, Ichiro Obi/AP/LLY@Lilly, Yasuko Kojima/AP/LLY@Lilly, Namie Hara/AP/LLY@Lilly, Goro Sogabe/AP/LLY@Lilly, Hiromasa Tara/AP/LLY@Lilly, Akira Kokan/AP/LLY@Lilly, Sachiko Konaka/AP/LLY@Lilly  
Subject: ZYP:diabetic coma and neuroleptic malignant syndrome(case No.200201953)

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Dear all,

I would like to inform you that the forth case with diabetic coma was reported (below). Fortunately the patient did not passed out.

As you may know, we release an e-mail about serious diabetes in association with anti-psychiatric agents including ZYP for MR education. But the expression of the each statements were too mild to impact on MR, although PV had insisted to write the statement more clearly so that MRs could notice the information in the e-mail is significantly important.

We have to prevent further reports, because the MHLW do not care about incidence, but accumulated number of reports. It is reasonable the more ZYP sells, the more case of AEs reported, it means the incidence does not increase. But, the MHLW does not think about it!!

I would be grateful if you could give me any ideas about education for MRs, and eventually for psychiatrists. For example, the relationship between weight gain and diabetes/aggravation of diabetes, hopefully, during my stay in Indy.

Thank you.

Noriko

----- □□□: Noriko Akagi/AP/LLY □□□: 02/03/15 06:37 -----

**Yasuko Kojima**

02/03/14 22:20

cc:

□□: Noriko Akagi/AP/LLY@Lilly, Anne Bille/AP/LLY@Lilly  
Keiichi Enomoto/AP/LLY@Lilly, Namie Hara/AP/LLY@Lilly, Yumi Kinoshita/AP/LLY@Lilly, Akira  
Kokan/AP/LLY@Lilly, Mikihiro Kosuge/AP/LLY@Lilly, Fumiko Miyaji/AP/LLY@Lilly, Rie Nagashiro/AP/LLY@Lilly,  
Rika Nojima/AP/LLY@Lilly, Ichiro Obi/AP/LLY@Lilly, Yukari Ohno/AP/LLY@Lilly, Goro Sogabe/AP/LLY@Lilly,  
Sachiko Konaka/AP/LLY@Lilly, Hiromasa Tara/AP/LLY@Lilly, Yasutomo Senoo/AP/LLY@Lilly, Kenji  
Nobuhara/AP/LLY@Lilly

□□: ZYP:diabetic coma and neuroleptic malignant  
syndrome(case No.200201953)

Bille-san,

I received aforementioned case via redacted received a phone call from Sakai MR and Odori SV today.

A 39-year-old male patient was transferred redacted

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The patient's blood sugar was 780mg/dl on last Saturday and it increased to 1300mg/dl on this Monday. He developed diabetic coma and concurrently NMS.

Upon medical treatments, he was got out of acute critical conditions. But he is still in the conditions of life-threatening.

He has no DM history nor family history of DM. But he has been likely to develop obesity, dry mouth and excessive drinking for a month.

His medications were prescribed and sent to him [redacted] where he had been hospitalized before.

1. medications (unknown date)

- Zyprexa 50mg/day
- Prothiaden 25mg/day
- Levotomin 25mg/day
- Limas 400mg/day
- Rohypnol 2mg/day
- Halcion 0.4mg/day

2. other information

[redacted]

· Odori SV in Kyoto branch office requests CRP or PV staff to visit the hospital with detailed materials related to these events.

· contact person : Sakai MR(090-3274-5578) or Odori SV(090-9697-5715)



200201953 ; 三菱京都病院 (糖尿病性昏睡、NMS).doc

Regards,  
Yasuko Kojima/PV