

**Guideline 12: Selecting Treatments for Other Indications** Questions 28–36

The experts did not recommend the use of an antipsychotic agent for any of the conditions listed below. If a patient with **neuropathic pain** has failed to respond to or tolerate a nonsteroidal anti-inflammatory agent and/or a cyclo-oxygenase-2 inhibitor, the experts considered an anticonvulsant the first-line treatment option, with a tricyclic antidepressant a high second-line alternative. For **severe nausea and vomiting due to chemotherapy**, a 5-HT<sub>3</sub> antagonist (e.g., ondansetron or granisetron) was rated high second line. For **motion sickness**, the expert preferred an antihistamine such as Dramamine or meclizine and would also consider an anticholinergic agent such as scopolamine. For **irritability/hostility in the absence of a major psychiatric syndrome** (dementia, depression, mania, schizophrenia), psychotherapy was rated high second line, followed by treatment with an SSRI, with little support for any other medication treatments. For **insomnia/sleep disturbance in the absence of a major psychiatric syndrome or discrete medical cause** (e.g., sleep apnea, congestive heart failure with nocturnal dyspnea), high second-line options were a hypnotic agent, such as zolpidem or zaleplon, or a sedating antidepressant such as trazodone or mirtazapine.

	<b>Preferred</b>	<b>Also consider</b>
<b>Neuropathic pain*</b>	An anticonvulsant (e.g., carbamazepine, gabapentin)	A tricyclic antidepressant
<b>Severe nausea and vomiting due to chemotherapy</b>	(None)	A 5-HT <sub>3</sub> antagonist (e.g., ondansetron [Zofran], granisetron [Kytril])
<b>Motion sickness</b>	An antihistamine (e.g., Dramamine, meclizine [Antivert, Bonine])**	An anticholinergic agent (e.g., scopolamine, Transderm scopolamine patch)
<b>Irritability and hostility in the absence of a major psychiatric syndrome</b>	(None)	Psychotherapy An SSRI
<b>Insomnia/sleep disturbance in the absence of a major psychiatric syndrome or a discrete medical cause</b>	(None)	Other hypnotic agent (e.g., zolpidem, zaleplon, chloral hydrate) A sedating antidepressant (e.g., trazodone, mirtazapine)

\*Assume that the patient has failed to respond to or been unable to tolerate treatment with a nonsteroidal anti-inflammatory drug (NSAID) (e.g., ibuprofen) and/or a cyclo-oxygenase-2 (COX-2) inhibitor (e.g., celecoxib [Celebrex]).

\*\*Very high second line.