

 The Journal of  
Clinical Psychiatry

 Psychiatrist.com

# Media Kit

POSITION YOUR BRAND WHERE PSYCHIATRY'S LEADERS TURN FOR INSIGHTS

The background is a solid teal color. On the right side, there are abstract geometric shapes: a large, light teal semi-circle and a smaller, dark teal circle. In the top right corner, there is a medium-sized, light teal circle.

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# A Letter From *Mike Platania*, Senior Director

## Dear Partner,

Welcome to the Media Kit for *The Journal of Clinical Psychiatry* (JCP) and Psychiatrist.com—two of the most trusted and respected sources of psychiatric research and clinical insights.

Our mission has always centered on publishing peer-reviewed, indexed research that informs and improves clinical psychiatric practice. With an 85-year legacy of publishing the work of leaders shaping the field, Psychiatrist.com has become one of the most expansive, engaged, and credible platforms in psychiatry today. Evidence-based content remains a preferred resource for practicing clinicians making treatment decisions. The trust we've built with our audience over decades makes our platform uniquely valuable to healthcare marketers seeking both reach and relevance.

We designed our advertising and custom programs with the needs of pharmaceutical brands and media agencies in mind. We focus on delivering cost-effective campaigns with transparent metrics reporting, so partners can clearly measure impact with confidence.

We take pride in our flexibility, honesty, and white-glove service as a small, dedicated team. The strongest partnerships are built on collaboration, and we are always ready to tailor our offerings to meet your strategic objectives. Our capabilities and data collection extend well beyond what is outlined in this media kit. If your brand requires a more customized solution that extends past what you see here, we welcome the opportunity to collaborate and ensure we can exceed your brand's goals.

Thank you for considering a partnership and we look forward to working together.

Warm regards,



**Mike Platania**

Senior Director

Psychiatrist.com and *The Journal of Clinical Psychiatry*

 The Journal of  
Clinical Psychiatry

 Psychiatrist.com



The background is a solid teal color. On the right side, there is a large, light blue rounded rectangle. Inside this rectangle, there is a smaller, dark blue circle. Above this rectangle, there is a separate, light blue circle.

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## WHO WE ARE

# Advancing Clinical Excellence

*Physicians Postgraduate Press (PPP)* is a trusted medical publisher with over 85 years of experience delivering peer-reviewed psychiatry and CNS disorders content. Our brands—*The Journal of Clinical Psychiatry (JCP)*, *The Primary Care Companion for CNS Disorders (PCC)*, *Front of Mind News (FOMN)*, and *Psychiatrist.com*—offer advertisers access to mental health treating clinicians seeking practice-defining research with unmatched credibility.

## OUR MISSION

To provide lifelong learning for clinicians by offering evidence-based, peer-reviewed scientific information about the diagnosis and treatment of behavioral health and neuropsychiatric disorders.

## OMNICHANNEL ENGAGEMENT

- **Print:** Trusted, evidence-based research delivered to 33,500 psychiatrists' doorsteps
- **Digital:** High volume traffic with NPI-authentication for verified reach and measurable ROI
- **Social:** Reach extension and short-form content across Instagram and Facebook
- **Email:** 30,000+ opt-in subscribers with a 45% open rate



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WHAT SETS US APART

# *The Journal of Clinical Psychiatry*

Leading peer-reviewed publication providing clinicians with the latest research and insights in mental health care. As the official journal of the American Society of Clinical Psychopharmacology, JCP delivers cutting-edge clinical information to psychiatrists and medical professionals worldwide.



## Peer-Reviewed

Clinically relevant research indexed by the **National Library of Medicine (NLM)**



## 5.3 Impact Factor

**Highly cited** clinical psychiatry journal



33,500 Psychiatrists reached in printed edition



## 85 Years of Publishing Excellence

Shaping psychiatric care **across generations**



## Top 5% of scientific journals



## Omnichannel Education

Extends custom print initiatives into digital, social, and video formats with **Psychiatrist.com**



## Landmark Studies & KOL Consensus

Publishing phase 3 trials, breakthroughs, and thought leadership

## Official Journal of



**ASCP**

AMERICAN SOCIETY OF  
CLINICAL PSYCHOPHARMACOLOGY

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WHAT SETS US APART

# Psychiatrist.com

*The Digital Hub for  
Evidence-Based Psychiatry*

Psychiatrist.com is the premier digital hub for mental health professionals, a comprehensive resource that is home to *The Journal of Clinical Psychiatry* (JCP), *The Primary Care Companion for CNS Disorders* (PCC), and *Front of Mind News* (FOMN). This high-value platform is trusted by psychiatric clinicians seeking the latest peer-reviewed research, clinical insights, and continuing medical education, all in one place.

Our platform offers unmatched opportunities to connect with an engaged, verified clinical audience:

- **Unmatched Trust:** Powered by the legacy and scientific integrity of *The Journal of Clinical Psychiatry*.
- **Omnichannel Access:** Reach clinicians across print, digital, social, email, and video.
- **Verified HCP Access:** NPI-authenticated users ensure precise targeting and ROI transparency.
- **Actionable Analytics:** Every page view, click, and interaction is tracked and reportable.

## Unmatched Reach

www.Psychiatrist.com

5.25M

Page Views  
Per Year

3.25M

Total Users  
Per Year

1m 8s

Average  
Engagement  
Time Per User

### TRAFFIC ACQUISITION SOURCES

64%  
Organic Search

30,000+  
Engaged Opt-In  
Email Subscribers

19%  
Referral

60,000  
Social Media  
Followers Across  
All Channels

10%  
Direct



The background features a light blue gradient with several overlapping circles of varying shades of blue. The circles are positioned in the upper right and lower right areas of the frame.

# Our Audience

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# Monthly US Traffic

Psychiatrist.com



300,000

**Total US**  
Pageviews



70,000

**Total HCP**  
Pageviews



50,000

**Total NPI**  
Pageviews



30,000

**Unique NPI**  
Identified

## DEFINITIONS

**US Pageviews:** Count of total pageviews occurring in the US

**HCP Pageviews:** Count of pageviews identified as coming from an HCP but may or may not have an NPI associated.

**NPI Pageviews:** Count of pageviews by individuals with an NPI

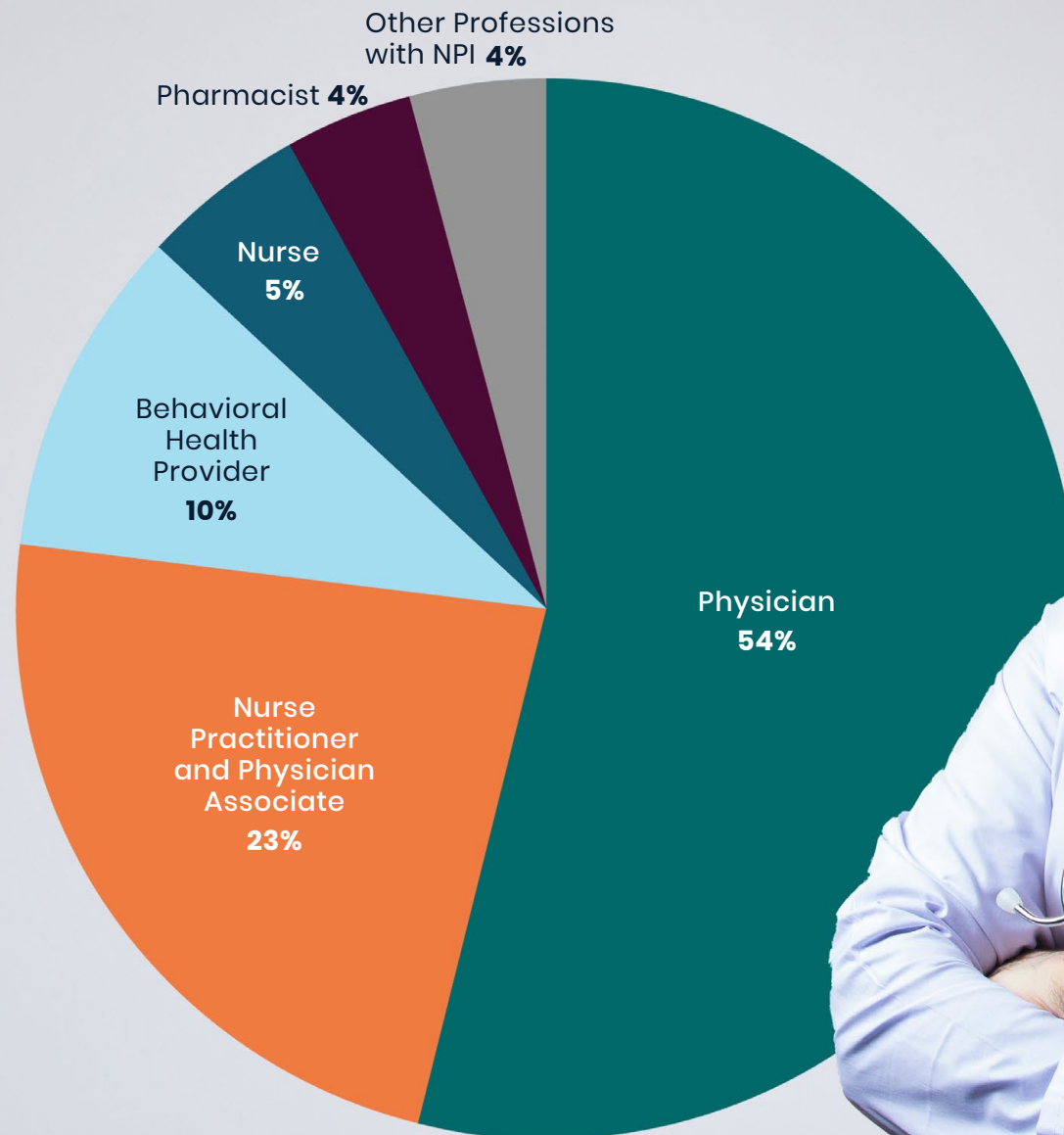
**Unique NPIs:** Count unique NPI numbers identified onsite

The HCP and NPI traffic figures provided are the minimum amount Psychiatrist.com can definitively authenticate. True HCP and NPI traffic on Psychiatrist.com are likely much greater.



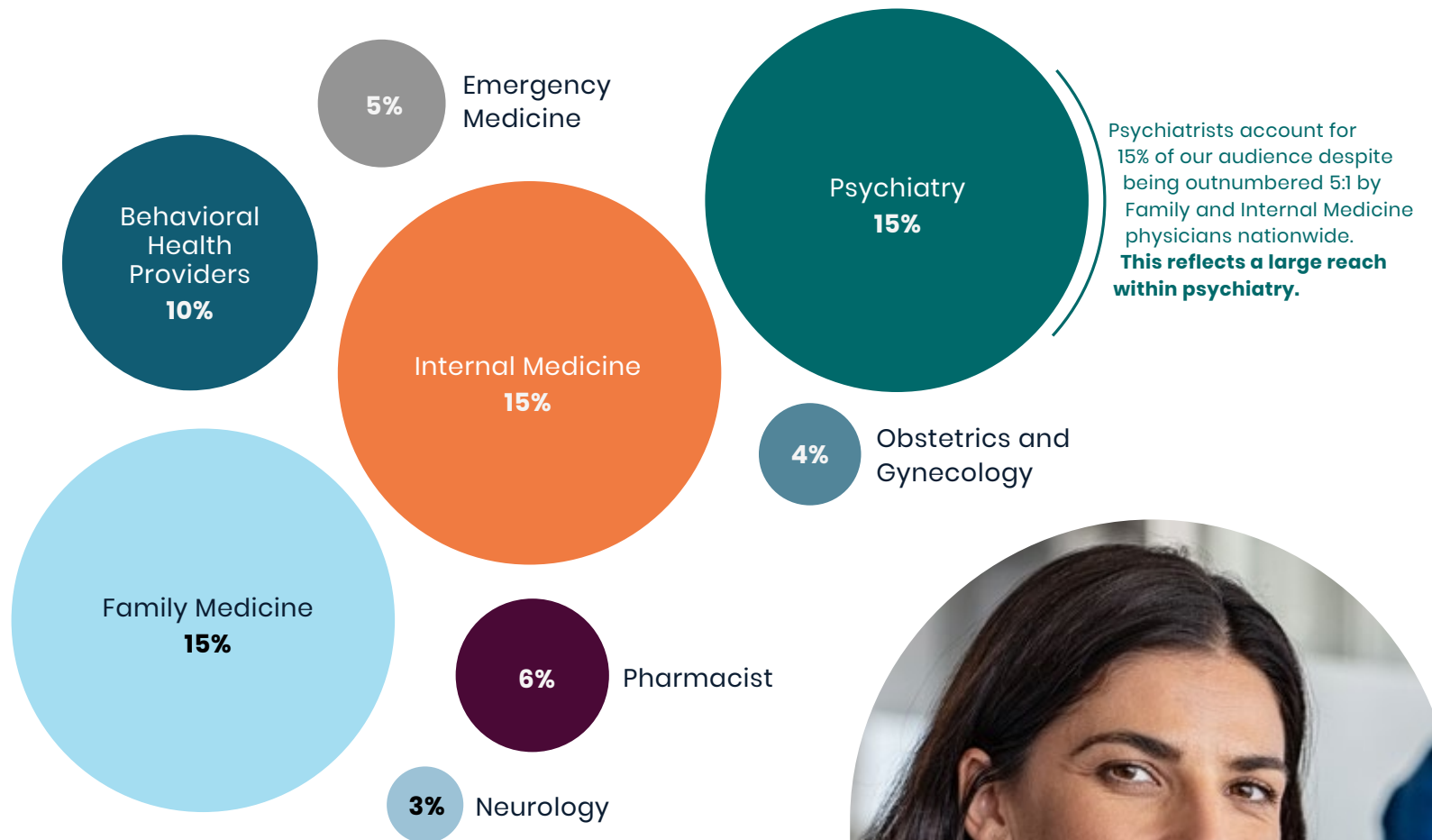


# Authenticated NPI Visitors Degree Type





# Authenticated Physician Visitors by Specialization



Other Specializations 27%

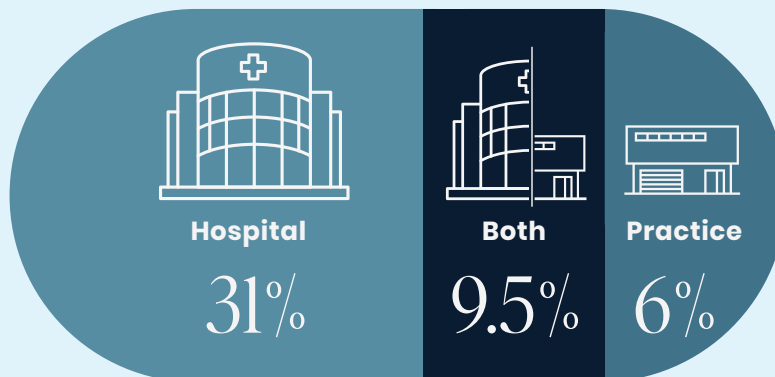
# Facility Association

*of authenticated NPI Visitors*



Associated with a Facility:

47%



Not Associated with a Facility:

53%

## DESCRIPTION:

Individuals who may be working in private, independent, or non-institutional practice settings that do not have an affiliation with a hospital, institution, clinic, or a facility could not be identified.

## PRACTICE SETTING EXAMPLES INCLUDE:

- Private and independent practice
- Consultant roles
- Academia and research
- Community & public health settings (i.e. NGOs and correctional systems)

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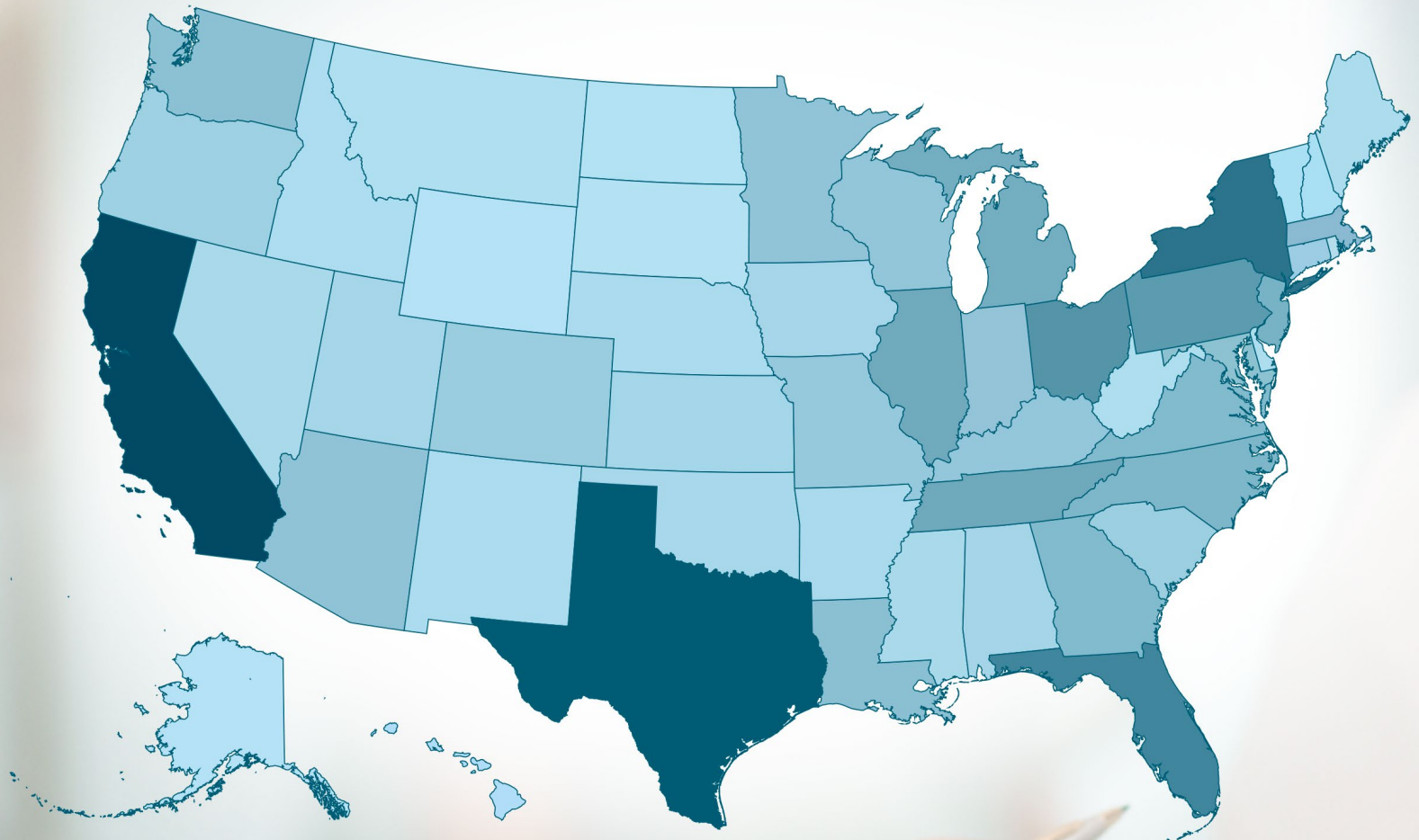
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# Authenticated NPI Visitors by State



Psychiatrist.com can geotarget  
its advertising campaigns.

The background is a solid blue color. On the right side, there is a vertical line that divides the space. To the right of this line, there are two overlapping circles. The top circle is a lighter shade of blue, and the bottom circle is a darker shade of blue. The text 'Advertising Opportunities' is written in a white, serif font, positioned on the left side of the vertical line.

# Advertising Opportunities

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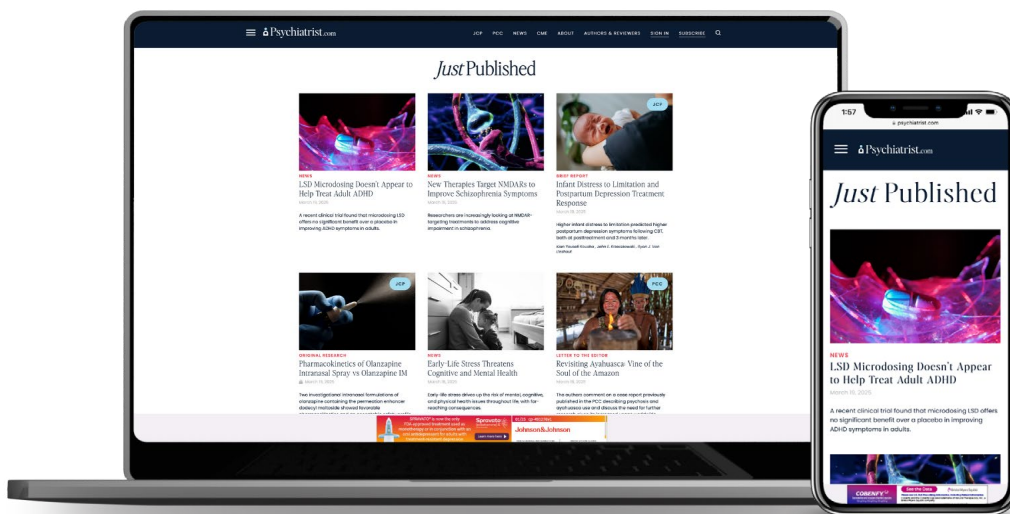
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PSYCHIATRIST.COM

# Run of Site (ROS)

Deliver maximum visibility across Psychiatrist.com's peer-reviewed, indexed psychiatry research and clinical resource centers, reaching a highly targeted audience of psychiatrists and mental health professionals as they engage with practice-defining medical literature.



## BANNER AD SPECS

### AD UNIT PLACEMENTS

Header - Above the Fold (ATF)  
Sidebar Top  
Sidebar Bottom  
Footer  
Anchor - Bottom tray w/exit

### AD SIZES AVAILABLE BY DEVICE

**Desktop:** 970x90 • 728x90 • 300x600 • 300x250  
**Mobile:** 300x250 • 320x50

### ACCEPTED CREATIVE FORMATS

**JPG, GIF, PNG** (under 200kb)  
**HTML5** (under 500kb)  
**3rd party tag** (e.g. CM360)

### OTHER DETAILS

- ✓ Brand measurement (e.g. IAS, DoubleVerify)
- ✓ 3rd party pixels (e.g. Crossix)
- ✓ Scrolling ISI/Multiple hotspots/Rich Media
- ✗ Expandable
- ✗ Video

## RATE CARD

### RATE CARD

\$85 CPM\*

### IMPLEMENTATION

10 business days

### DATA REPORTING

PLD and aggregate data reported monthly

### TARGETING

Contextual targeting to organic Psychiatrist.com traffic

### AVERAGE CTR

0.10%

### MINIMUM REQUIREMENTS

\$5,000 in spend

### MEASURED NPI ENGAGEMENTS\*

per 100k impressions:

- 25,000 NPI impressions
- 6,000 Unique NPI identified

*\*ROS banners can be billed exclusively on verified and reportable NPI impressions. For more information and pricing, please contact Mike Platania at [MPlatania@psychiatrist.com](mailto:MPlatania@psychiatrist.com).*



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PSYCHIATRIST.COM

# 100% SOV Category Takeover

Secure 100% share of voice (SOV) across all peer-reviewed content and clinical resources within a specific disease state category on Psychiatrist.com, reaching a focused audience of engaged mental health professionals at the point of interest.



Therapeutic area content sections include ADHD, addiction, Alzheimer's, anxiety, bipolar disorder, depression, eating disorders, insomnia, movement disorders, narcolepsy, neurology, PTSD, schizophrenia, sleep disorders, tardive dyskinesia, and many others. Special collections include adolescent mental health, early career psychiatry, geriatrics, women's mental health, and many others.

## BANNER AD SPECS

### AD UNIT PLACEMENTS

Header – Above the Fold (ATF)  
Sidebar Top  
Sidebar Bottom  
Footer  
Anchor – Bottom tray w/exit

### AD SIZES AVAILABLE BY DEVICE

**Desktop:** 970x90 • 728x90 • 300x600 • 300x250  
**Mobile:** 300x250 • 320x50

### ACCEPTED CREATIVE FORMATS

**JPG, GIF, PNG** (under 200kb)  
**HTML5** (under 500kb)  
**3<sup>rd</sup> party tag** (e.g. CM360)

### OTHER DETAILS

- ✓ Brand measurement (e.g. IAS, DoubleVerify)
- ✓ 3rd party pixels (e.g. Crossix)
- ✓ Scrolling ISI/Multiple hotspots/Rich Media
- ✗ Expandable
- ✗ Video

## RATE CARD

### RATE CARD

\$115 CPM\*

### IMPLEMENTATION

10 business days

### DATA REPORTING

PLD and aggregate data reported monthly

### TARGETING

Contextual targeting to organic Psychiatrist.com traffic

### AVERAGE CTR

0.10%

### MINIMUM REQUIREMENTS

3-month category sponsorship

### MEASURED NPI ENGAGEMENTS

per 100k impressions:

- 25,000 NPI impressions
- 6,000 Unique NPI identified

### FIRST RIGHT OF RENEWAL (FROR)

Advertisers hold first right of renewal (FROR) for their sponsored category until 60 days prior to the scheduled end of the campaign.

*\*100% SOV Category Takeover banners can be billed exclusively on verified and reportable NPI impressions. For more information and pricing, please contact Mike Platania at [MPlatania@psychiatrist.com](mailto:MPlatania@psychiatrist.com).*

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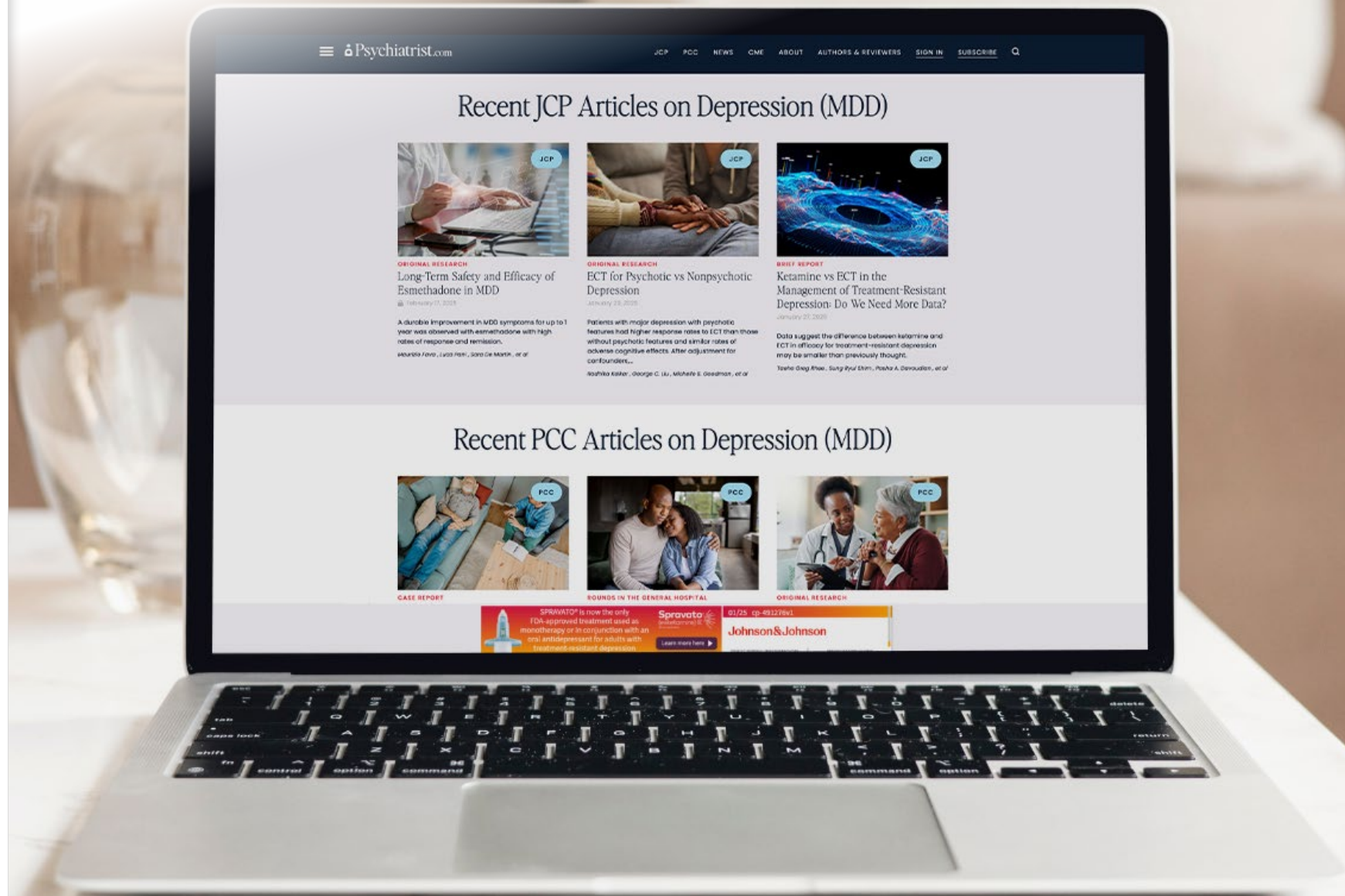
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# 100% SOV Category Takeover





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# Sponsored E-Newsletters

Reach highly engaged organic, opt-in subscribers with a banner advertisement in Psychiatrist.com's e-newsletters, delivering your message directly to mental health's top clinicians.

Psychiatrist.com has three e-newsletter properties; *The Journal of Clinical Psychiatry* (JCP) Weekly, *The Primary Care Companion for CNS Disorders* (PCC) Weekly, and *Front of Mind News* (FOMN). Each of these e-newsletters have a 100% organic opt-in subscriber list.

## PROGRAM DETAILS

- **Audience:** Organic opt-in subscribers
- **Flexible Investment:** Scalable options to fit your advertising needs.
- **Data Collection and Reporting:** Aggregate monthly sends, opens, clicks, and CTR are provided. PLD is not currently available for e-newsletter tactics.

## EMAIL AD SPECS

### AD UNIT PLACEMENTS

Email Banner

### AD SIZES AVAILABLE BY DEVICE

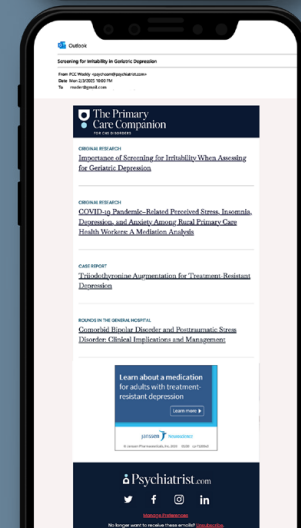
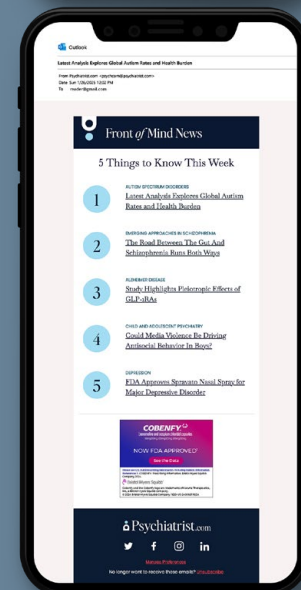
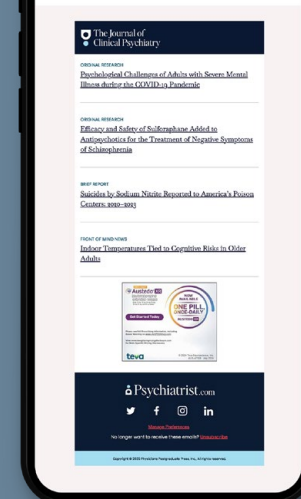
300x250

### ACCEPTED CREATIVE FORMATS

PNG or JPG (no more than 500kb)

### OTHER DETAILS

- ✓ Impression Tags Accepted
- ✓ Click Tags Accepted
- ✗ UTM Codes



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# SPONSORED eNL JCP Weekly E-Newsletter

The Journal of Clinical Psychiatry's (JCP) weekly e-newsletter delivers the latest peer-reviewed research, expert insights, and clinical updates published by JCP directly to psychiatrists and mental health professionals

- **Organic Opt-In Subscribers:** 16,000+
- **Average Open Rate:** 45%
- **Average Advertisement CTR in Open Emails:** 0.35%

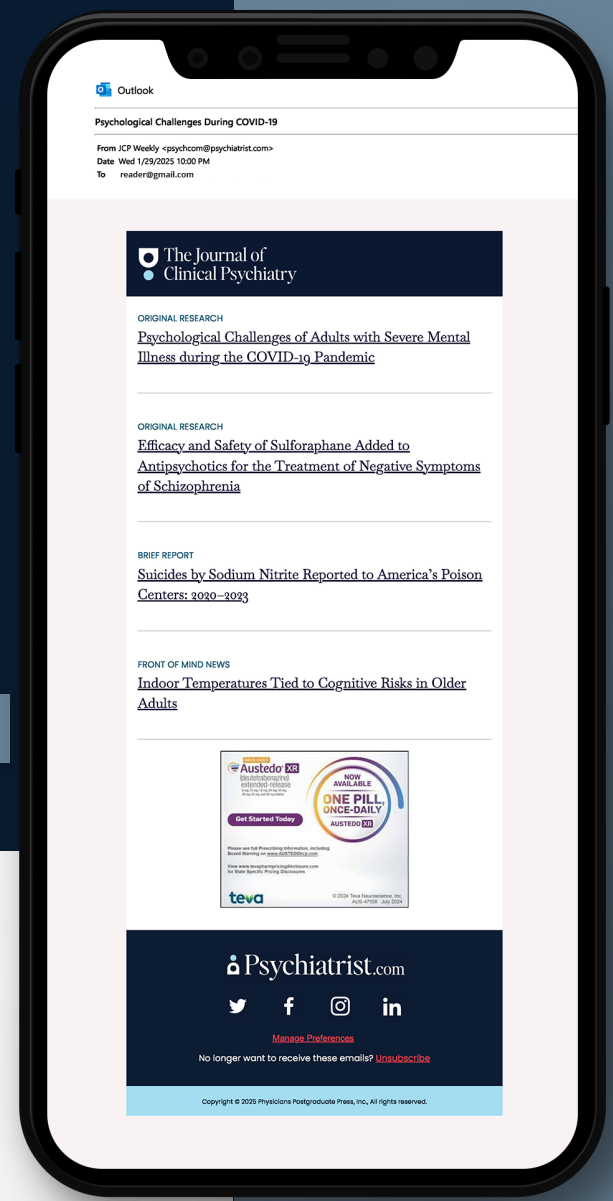
## PROGRAM DETAILS

- **Advertising Opportunity:** Static 300x250 banner delivered to 16,000+ organic opt-in subscribers
- **Flexible Investment:** Scalable options to fit your budget
- **Weekly Distribution:** Sent every **Wednesday**
- **Performance Tracking:** Aggregate monthly open and click data

SUN	MON	TUE	WED	THU	FRI	SAT
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## RATE CARD

VOLUME	DISCOUNT	COST PER eNL	TOTAL
1 sponsored JCP eNL	–	\$2,250	\$2,250
6 sponsored JCP eNL	10%	\$2,025	\$12,150
16 sponsored JCP eNL	17%	\$1,868	\$29,880
26 sponsored JCP eNL	25%	\$1,688	\$43,875



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SPONSORED eNL

# PCC Weekly E-Newsletter

*The Primary Care Companion for CNS Disorders* (PCC) e-newsletter delivers the latest peer-reviewed research, expert insights, and clinical updates published by PCC to primary care practitioners and other health care professionals addressing psychiatric and neurologic disorders in primary practice.

- **Organic Opt-In Subscribers:** 14,000+
- **Average Open Rate:** 40%
- **Average Advertisement CTR in Open Emails:** 0.35%

## PROGRAM DETAILS

- **Advertising Opportunity:** Static 300x250 banner delivered to 14,000+ organic opt-in subscribers
- **Flexible Investment:** Scalable options to fit your budget
- **Weekly Distribution:** Sent every **Monday**
- **Performance Tracking:** Aggregate monthly open and click data

SUN

MON

TUE

WED

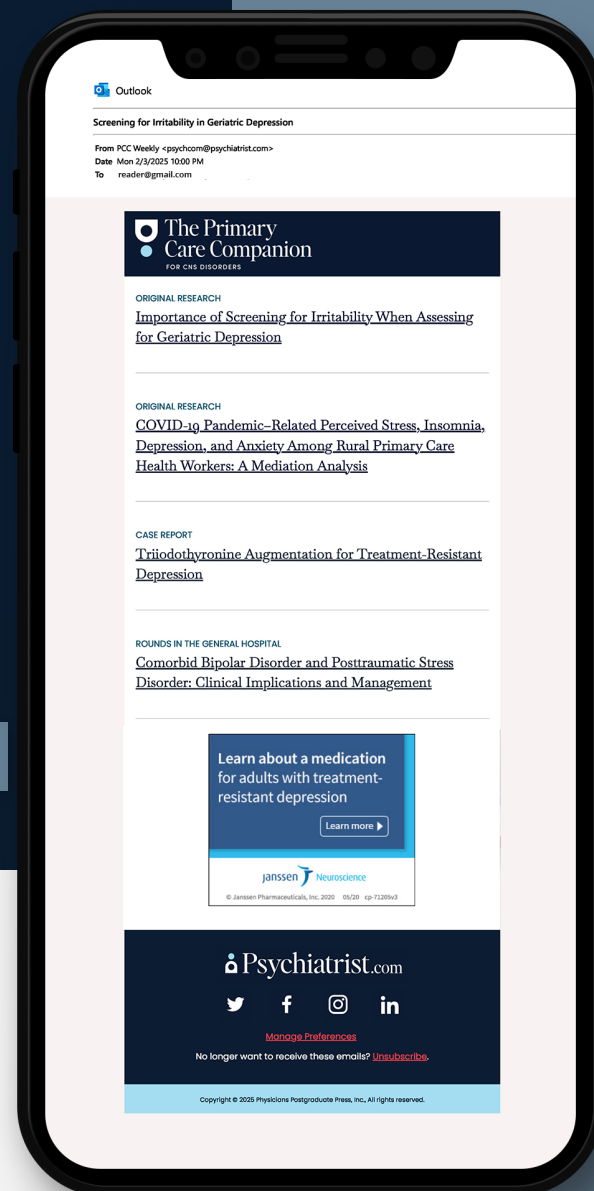
THU

FRI

SAT

## RATE CARD

VOLUME	DISCOUNT	COST PER eNL	TOTAL
1 sponsored PCC eNL	–	\$2,000	\$2,000
6 sponsored PCC eNL	10%	\$1,800	\$10,800
16 sponsored PCC eNL	17%	\$1,666	\$26,656
26 sponsored PCC eNL	25%	\$1,500	\$39,000



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SPONSORED eNL

# FOMN Weekly E-Newsletter

*Front of Mind News* (FOMN) e-newsletter is a twice-weekly digest designed to keep mental health professionals informed on the latest trends, news, research and clinical insights. It curates timely articles, expert perspectives, and practical resources to help psychiatrists stay updated on current events and news in psychiatry.

- **Organic Opt-In Subscribers:** 13,000+
- **Average Open Rate:** 40%
- **Average Advertisement CTR in Open Emails:** 0.35%

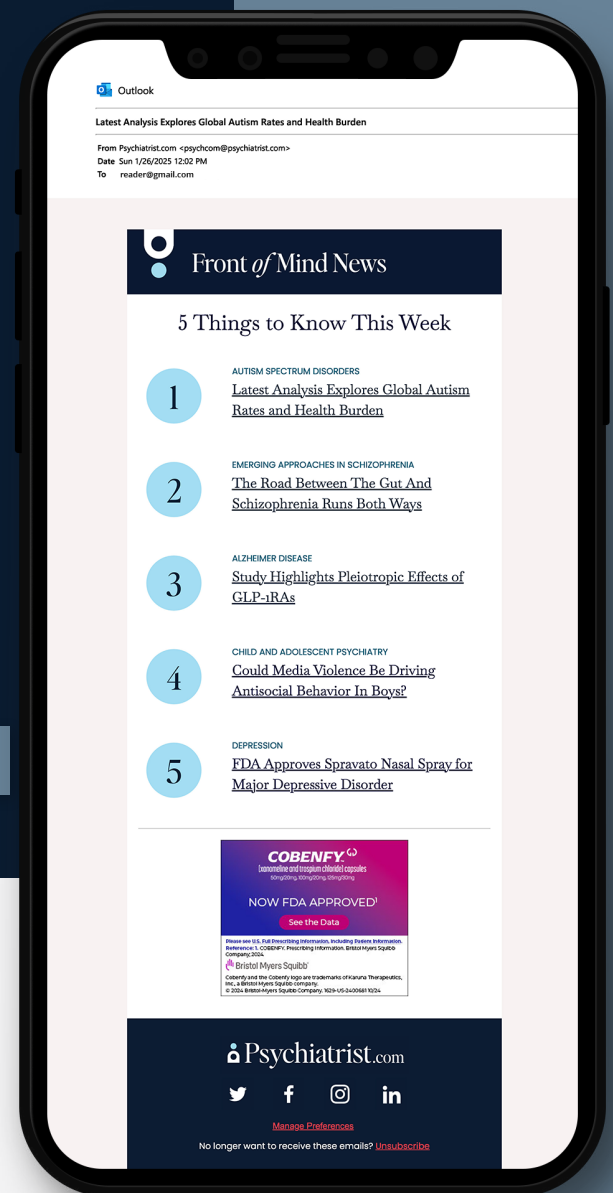
## PROGRAM DETAILS

- **Advertising Opportunity:** Static 300x250 banner delivered to 13,000+ organic opt-in subscribers
- **Flexible Investment:** Scalable options to fit your budget
- **Twice-Weekly Distribution:** Sent every **Friday** and **Sunday**
- **Performance Tracking:** Aggregate monthly open and click data

SUN	MON	TUE	WED	THU	FRI	SAT
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## RATE CARD

VOLUME	DISCOUNT	COST PER eNL	TOTAL
1 sponsored FOMN eNL	-	\$1,750	\$1,750
6 sponsored FOMN eNL	10%	\$1,575	\$9,450
16 sponsored FOMN eNL	17%	\$1,452	\$23,240
26 sponsored FOMN eNL	25%	\$1,312	\$34,125



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## PRINT ADVERTISING

# The Journal of Clinical Psychiatry

### WHY PLACE YOUR AD IN JCP?

With an 85-year legacy, *The Journal of Clinical Psychiatry* (JCP) is one of the most respected publications in the field. Its peer-reviewed, evidence-based content has built unmatched credibility and trust with a highly engaged audience of prescribing psychiatrists. Distributed quarterly to 33,500 clinicians, JCP offers broad reach and long-lasting visibility through its extended shelf life in clinical settings. All print ads include complimentary banners on Psychiatrist.com to emphasize cross-channel engagement and maximize the impact of your investment.

### WHAT TOPICS DOES JCP COVER?

Psychiatric research and clinical trial results across bipolar disorder, depression, schizophrenia, tardive dyskinesia, PTSD, anxiety, sleep, addiction, and many other topics relevant to practicing psychiatrists.

Content is reinforced through unique custom offerings sponsored by marketing and medical affairs departments, including educational consensus panel reports, clinical trial advertorials, clinician commentary to contextualize complex research data and special supplements.



## Contacts

### • Publisher

John S. Shelton, PhD  
[JShelton@psychiatrist.com](mailto:JShelton@psychiatrist.com)

### • Advertising & Custom Programs

Michael Platania  
[MPlatania@psychiatrist.com](mailto:MPlatania@psychiatrist.com)

### • Reprints

Reprints may only be purchased from the publisher.

Contact Maureen Bunner-Hunsucker at [MHunsucker@psychiatrist.com](mailto:MHunsucker@psychiatrist.com) or visit [www.psychiatrist.com/reprints-and-permissions](http://www.psychiatrist.com/reprints-and-permissions).



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## PRINT ADVERTISING

# *The Journal of Clinical Psychiatry*

## ADVERTISEMENT PLACEMENT WITH JCP

- Run of Book (ROB) ads can be placed adjacent to relevant editorial content upon request.
- Premium positions are available and detailed below.
- Cover Tips and Outserts are available and detailed on the following pages.

## CIRCULATION

Recipients include 100% US-based psychiatrists in direct patient care (office, clinical practice, hospital, and community settings), residents, and paid subscribers.

## SPLIT RUN TARGETING

List matches and split runs can be executed to target your desired audience.

## ADDED VALUE WITH ALL PRINT ADVERTISING

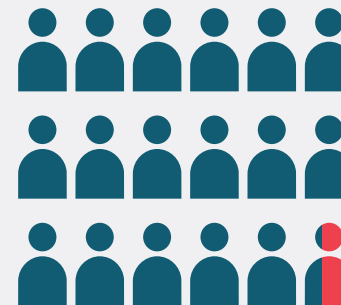
All print advertising in *The Journal of Clinical Psychiatry* earn complementary run of site banners on Psychiatrist.com with physician-level data reporting.



## US DOMESTIC DISTRIBUTION

# 33,500

Recipients in the US



● Psychiatrists **96.3%** (32,276 recipients)

● Geriatric Psychiatrists **3.7%** (1,224 recipients)

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Conference Coverage

Advertorial

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 The Journal of  
Clinical Psychiatry

Psychiatrist  
.com

## PRINT ADVERTISING

# *The Journal of Clinical Psychiatry*

### PLACEMENT DETAILS

- **Editorial:** Advertising ratio minimum is 55%:45%.
- **Advertising Placement:** Interspersed with editorial material unless premium placement is secured or adjacent editorial alignment is requested.
- **Advertising Copy:** Acceptance is subject to approval by the publisher.

### SCHEDULING

- Cancellation must be made by the first of the month before publication.
- Unless requested to be held or shipped back, material will be disposed after 1 year.

### FREQUENCY

- Calculated by the number of ad pages run in one contract year. Full page or fractional units count as one page.
- Advertising purchased by a parent company and subsidiaries can be combined to increase the earned rate.





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# The Journal of Clinical Psychiatry

## Dates for Media Planners

2025 Issue	Commitment	Material Due	Mail Date
March	2/21/2025	3/6/2025	3/27/2025
June	5/22/2025	6/5/2025	6/26/2025
September	8/21/2025	9/4/2025	9/25/2025
December	11/13/2025	11/27/2025	12/18/2025

## Run-of-Book Black and White Rates (A-Sized)

Frequency	1x	4x	8x	16x	24x	32x
1 page	\$5,097	\$4,963	\$4,816	\$4,768	\$4,697	\$4,595
1/2 page	\$3,066	\$2,989	\$2,915	\$2,842	\$2,771	\$2,701

## Preferred Position Rates

Position	Rate*
Cover 2	50%
Cover 3	30%
Cover 4	40%

\*Premium applied to the earned black and white rate for one page.

**COLOR RATE**  
**\$1,600 per page** applied to the earned black and white rate

**PAPER STOCK**

- Internal pages 45lb (45#)
- Cover stock 80lb (80#)

**ADDED VALUE**  
 Each \$1 of print advertising earns 4 ROS banners on Psychiatrist.com

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# Outserts



Outsert

**\$28,000**

Cost for standard outsert

For nonstandard outserts, contact Mike Platania [mplatania@psychiatrist.com](mailto:mplatania@psychiatrist.com)

## SPECS

- Outserts must be within JCP's journal dimension of 11.125 x 8.125
- Standard outsert is less than 3.3oz. Outserts larger than 3.3oz are acceptable but may be subject to increased cost.
- Outserts run behind journal in the polybag.

## MULTI-PLACEMENT PRICING

Discounted rates are applied when multiple outserts or additional print advertising placements are booked.

## ADDED VALUE

Each outsert earns 140,000 ROS banners on Psychiatrist.com

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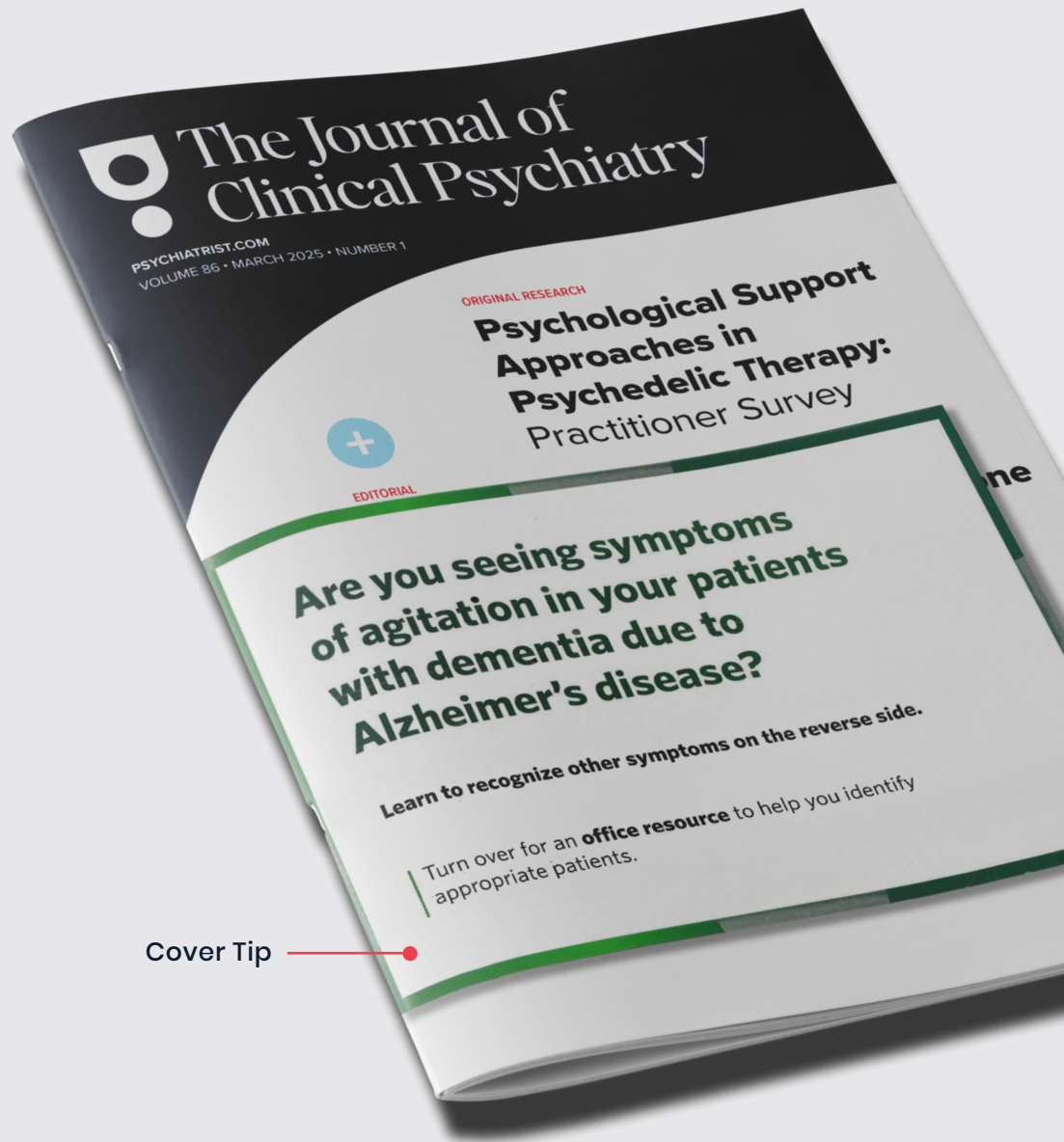
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# Cover Tips



Cover Tip

## \$25,000

Cost for single-leaf, 1-sided cover tip with (or without) prescribing information packet

For other creative applications to cover tips (eg, multiple pages, wafer seals, gatefolds) or other print opportunities (eg, belly bands), please contact Mike Platania [MPplatania@psychiatrist.com](mailto:MPplatania@psychiatrist.com).

A supplied example may be required to run the Cover Tip.

### SPECS

- **Acceptable size range:**  
within 5" (tall) x 8" (wide)
- **Preferred stock weight:**  
60b text or greater
- **Preferred stock thickness:**  
10pt or less

### MULTI-PLACEMENT PRICING

Discounted rates are available when multiple cover tips or additional print advertising placements are booked.

### ADDED VALUE

Each cover tip earns 125,000 ROS banners on Psychiatrist.com

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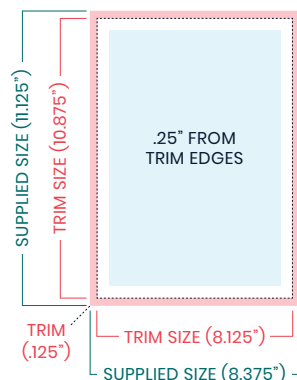
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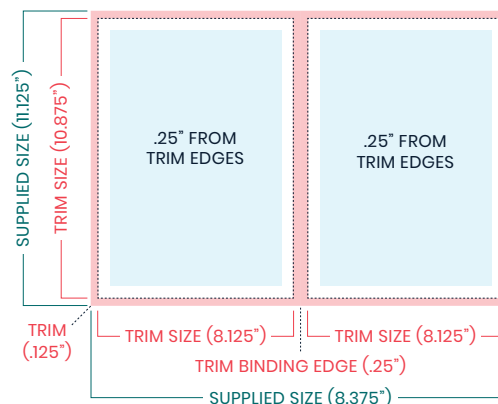
## ADVERTISING SPECIFICATIONS

# *The Journal of Clinical Psychiatry*

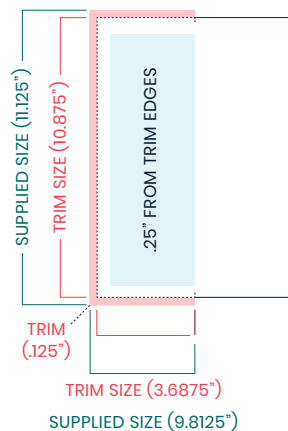
### FULL PAGE



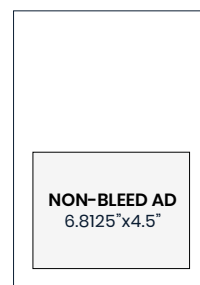
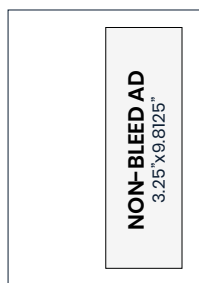
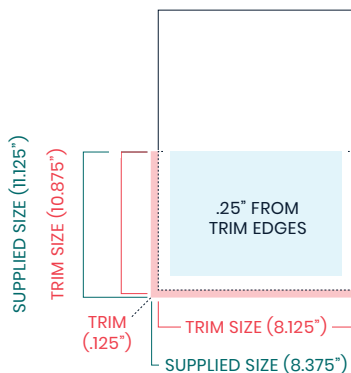
### SPREAD



### HALF-PAGE VERTICAL



### HALF-PAGE HORIZONTAL



## ELECTRONIC FILE INFORMATION

1. Email or file transfer site. If provided via email, files should be zipped for file integrity.
2. All ads should be submitted as PDFs, fonts, and graphics embedded.
3. Lineart (Bitmap) images at 1200 dpi
4. Grayscale images at 300 dpi
5. Color Images at 600 dpi
6. All fonts and graphics must be embedded
7. Final full-size ads must meet journal trim size and include a .125" bleed image on all four sides, at a minimum.
8. All lines and lineart images should have a minimum of .25 pt thickness at the final size to reproduce effectively on press.
9. No content is to be within .25" of trim size.
10. All Transparencies should be flattened.
11. All color images and files are to be supplied in CMYK and color space with a Total Area Coverage (TAC) not to exceed 300% for the darkest area of an image.

## Printer Contact & Shipping

### Outserts, Covertips, & Press Matches

#### Sheridan NH

Attn: Lisa Davis  
69 Lyme Road  
Hanover, NH 03755

Phone: 603.643.2220

Questions: [ads@psychiatrist.com](mailto:ads@psychiatrist.com)

# High Impact Custom Programs



## CLINICIAN-LED CASES WITH 100% SOV

# PsychCase360

PsychCase360 brings healthcare professional viewers into the decision-making process of a leading KOL as they assess and manage complex patient cases. Clinicians viewers gain insight into real-world diagnostic and treatment considerations, supported by the latest clinical data and evidence. Content is strategically crafted to support strategic objectives. Advertisers are offered 100% SOV around highly credible, case-based education.

### PROGRAM DETAILS

- Psychiatrist.com develops editorially independent content, MLR is not required.
- Content is evidence-based, fair-balanced, and uses unbranded product names to maintain scientific credibility.
- Approximately 15-20 educational slides are presented.
- Filmed virtually with professional editing to seamlessly incorporate educational data.
- Video is ~20 minutes in length with transcription below to maximize SEO.

### RATE CARD

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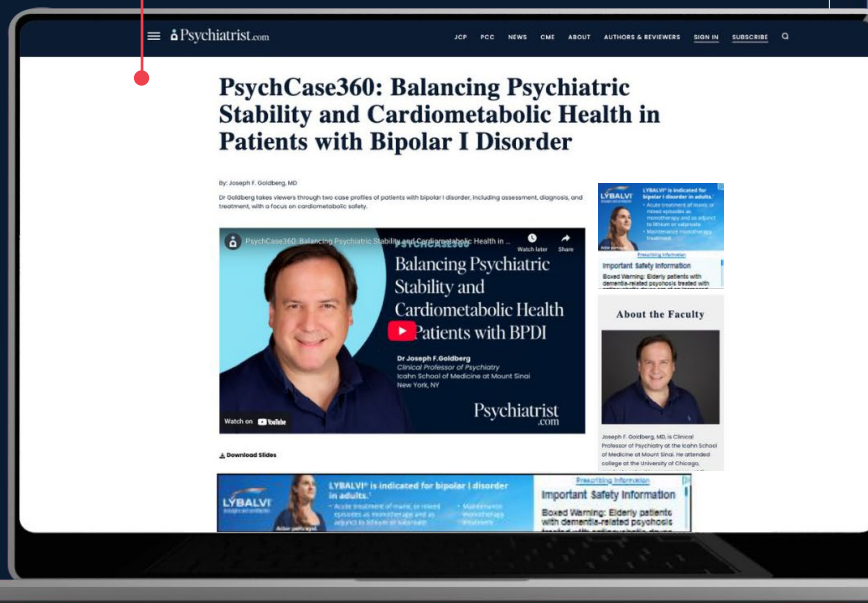
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## CLINICIAN-LED CASES WITH 100% SOV

# PsychCase360

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Page

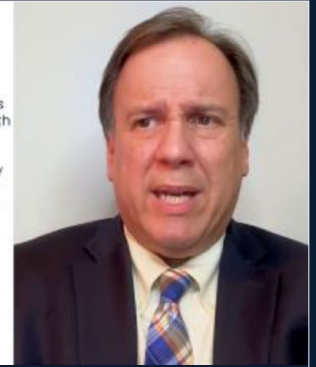
Slides



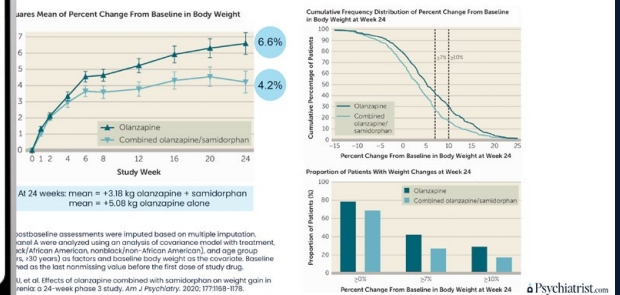
Linked trailer: [PsychCase360](#)

### James: Key Features

- Severe, recurrent psychotic mania that has not responded well to multiple prior appropriate treatments warrants use of antimanic agents with high efficacy
- Risk-benefit analysis of high-potency antimanic options (eg, olanzapine, clozapine, ECT) and need for relapse prevention after response
- How to prevent or manage antipsychotic-associated weight gain if the severity of James' condition favored an agent with high metabolic liability?



### Minimizing the Potential for Weight Gain: Olanzapine/Samidorphan: 24-Week Data



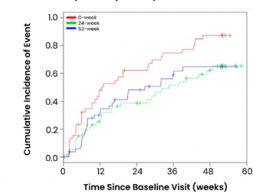
### Stopping Adjunctive Olanzapine Sooner Than 6 Months After Remission Increases Mania Relapse Risk

N=159 bipolar I manic patients treated with lithium or divalproex plus olanzapine or risperidone

After 24 weeks  
Relapse hazard ratio:

- Overall=0.53 (95% CI=0.33-0.86)
- RIS=1.85 (95% CI=1.00-3.41)
- OLZ=0.48 (95% CI=0.17-1.32)

#### Time to Relapse of Any Mood Episode



Yatham LN, et al. Optimal duration of risperidone or olanzapine adjunctive therapy to mood stabilizer following remission of a manic episode: a CANMAT randomized double-blind trial. *Mol Psychiatry*. 2018;23:1050-1056.



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MULTIDISCIPLINARY INSIGHT WITH 100% SOV

# Clinical Psychiatry Exchange

Clinical Psychiatry Exchange brings together a multidisciplinary panel of KOLs (often two MDs and 1 NP/PA) to discuss critical gaps in psychiatric practice and the use of various treatments. The exchange explores how emerging clinical data can be effectively translated into real-world patient care across disciplines, ensuring that both specialists and frontline clinicians are equipped with actionable insights to improve outcomes. Content is crafted to address strategic educational needs. Advertisers are offered 100% SOV around highly credible, peer-led education.

## PROGRAM DETAILS

- Psychiatrist.com develops editorially independent content, MLR is not required.
- Content is evidence-based, fair-balanced, and uses unbranded product names to maintain scientific credibility.
- Approximately 15-20 educational slides are presented.
- Filmed virtually with professional editing to seamlessly incorporate educational data.
- Content is published episodically over 45-60 days to maintain engagement

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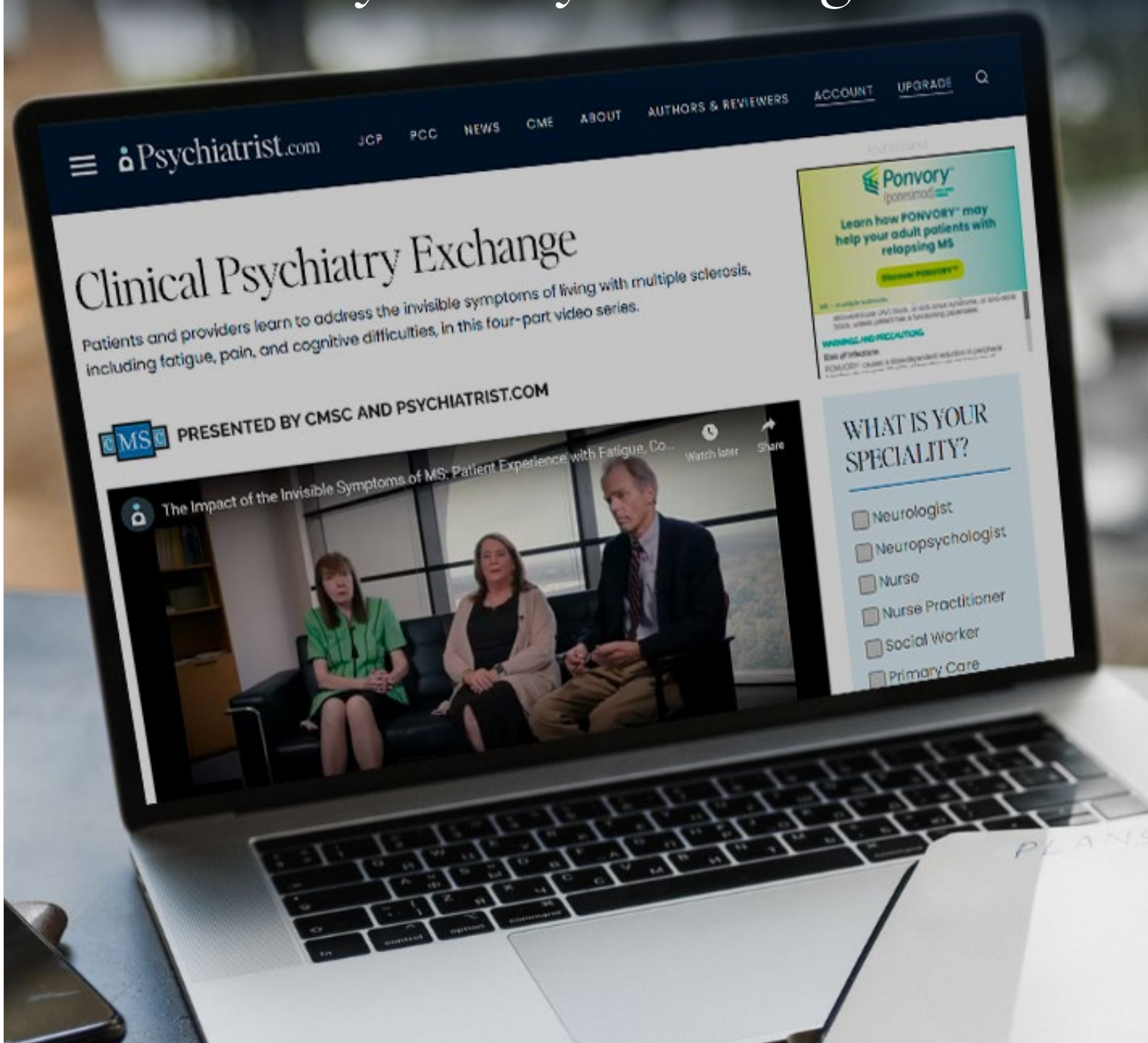
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MULTIDISCIPLINARY INSIGHT WITH 100% SOV

# Clinical Psychiatry Exchange



## CUSTOM EDITORIAL & KOL CONTENT WITH 100% SOV

# Editorial Focus

Editorial Focus provides advertisers with an exclusive opportunity to align their brand with a continuous stream of highly relevant, native news, KOL videos, and clinical research on Psychiatrist.com. This initiative is designed to create a highly controlled, brand-aligned editorial environment where news articles and educational KOL video presentations are strategically crafted to support clinicians' educational needs while reinforcing strategic objectives. To enhance credibility and engagement, a curated collection of peer-reviewed, evidence-based research aligned with the theme is tagged into the Editorial Focus. Advertisers are offered 100% SOV across all content, along with a dedicated series of *Front of Mind News* (FOMN) e-newsletters, ensuring sustained visibility among a highly engaged psychiatry audience.

### PROGRAM DETAILS

The Editorial Focus content scope depends on campaign duration. Deliverables scale according to 3-month to 12-month commitments.

- 9 to 27 highly relevant editorial articles published during campaign.
- 4 to 12 KOL video presentations from multiple KOLs (two videos per KOL)
- 9 to 36 sponsored FOMN e-newsletters
  - 1 FOMN e-NL: ~10,000 sends, 4,000 opens, 10 ad clicks
- 6 to 12 highly relevant clinical research articles tagged in environment
  - New, relevant research is automatically included upon publishing.
- 100% SOV around all content tailored native content.

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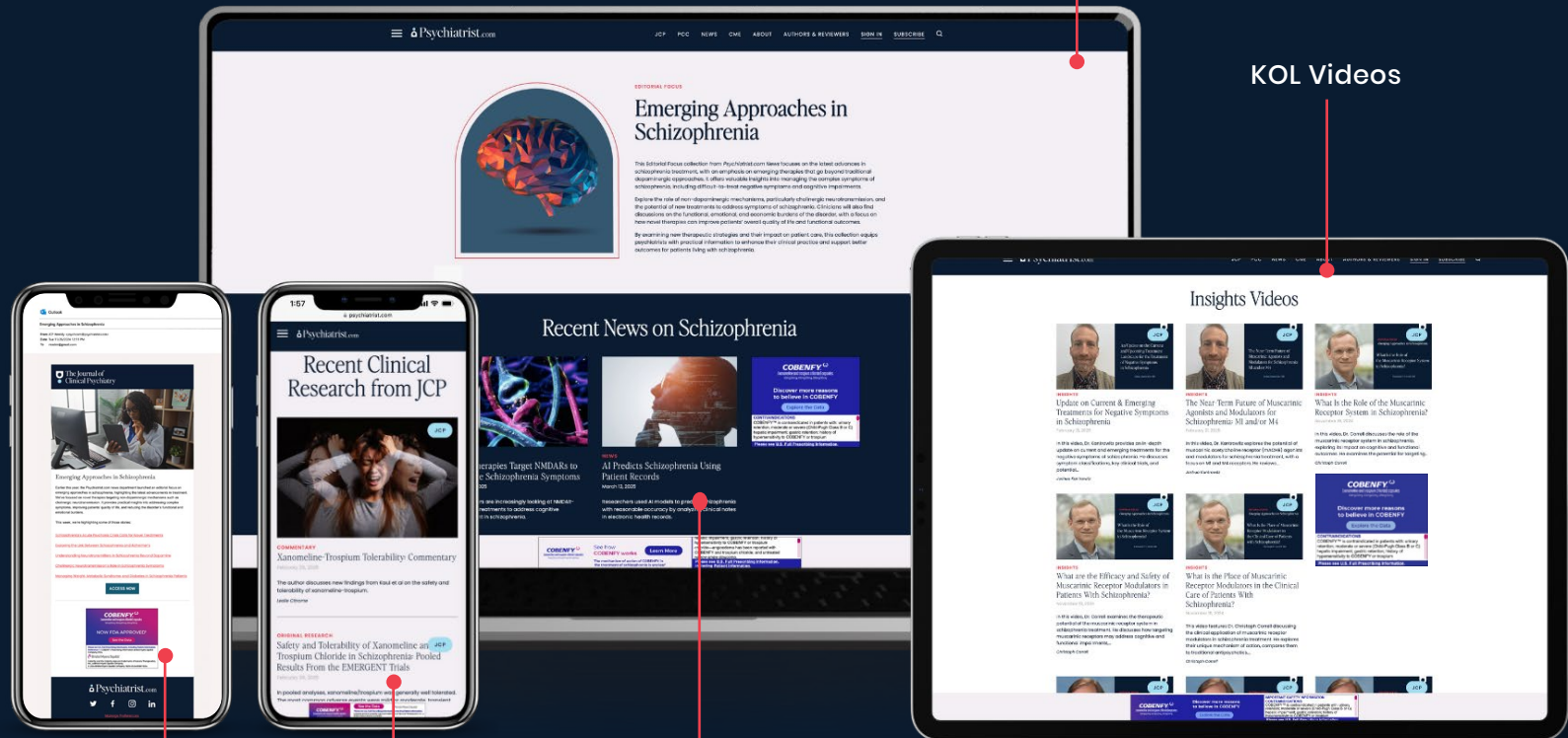
CUSTOM EDITORIAL & KOL CONTENT WITH 100% SOV

# Editorial Focus

100% SOV across all tailored content

Dedicated  
Landing Page

KOL Videos



E-Newsletter

News: Editorial Articles

Recent Clinical  
Research from JCP

LATE-BREAKING SCIENCE, FULLY AMPLIFIED WITH 100% SOV

# Conference Coverage

This package provides brands with turnkey high-impact visibility and strategic alignment with clinical thought leadership through custom coverage of major psychiatry conferences (e.g., APA, ACNP, Psych Congress). Psychiatrist.com's editorial team attends the event to produce tailored, highly relevant content. Advertisers benefit from targeted exposure to relevant specialties and custom HCP lists, with options for geotargeted or national activation.

## PROGRAM DETAILS

- **Branded Conference Coverage Microsite Hub on Psychiatrist.com**
  - 100% SOV microsite featuring ten (10) editorial articles covering high-impact sessions, scientific posters, and important updates
  - 5 posts to *The Journal of Clinical Psychiatry's* Facebook, Instagram, and LinkedIn accounts driving additional traffic to the 100% SOV environment
  - Strategic reach extension marketing campaign to bring relevant specializations and target list HCPs into the sponsored content microsite
- **Sponsored E-Newsletter Coverage**
  - Six (6) sponsored *Front of Mind News* Conference Coverage e-newsletters to 10,000 organic opt-in subscribers with a 40% open rate

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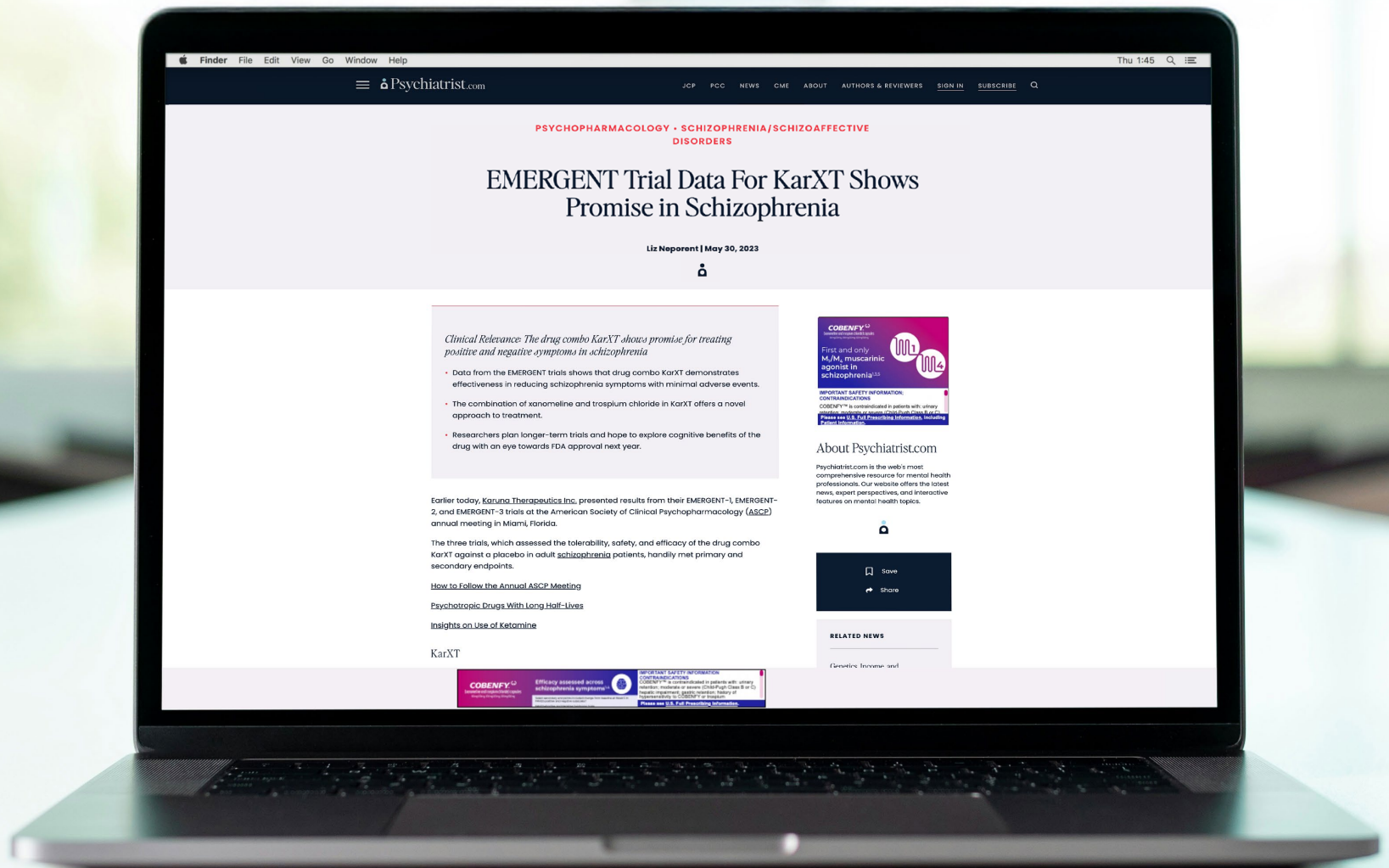
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LATE-BREAKING SCIENCE, FULLY AMPLIFIED WITH 100% SOV

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## CLINICAL CREDIBILITY WITH A BRANDED NARRATIVE

# Advertorial

A fully branded 10-page clinical data review published in *The Journal of Clinical Psychiatry* (JCP) and featured online at Psychiatrist.com with targeted HCP marketing to drive traffic. This exclusive opportunity allows brands to communicate their strategic clinical advantages, with educational branded media aligned with a peer reviewed and indexed psychiatric journal.

### PROGRAM DETAILS

- 8 color pages present your brand's key advantages, data, and clinical narrative
- 2 black and white safety information pages
- Full content development and project management by the JCP team—from MLR submission to final publication
- Print circulation to 33,500 psychiatrists in JCP
- Posted on Psychiatrist.com for 1 year with targeted reach extension and metrics reporting for 6 months



## RATE CARD

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## CLINICAL CREDIBILITY WITH A BRANDED NARRATIVE

# Advertorial

**Auvelity®**  
(dextromethorphan HBr and bupropion HCl)  
extended-release tablets 45mg/105mg

## A Rapid-Acting Antidepressant With Multimodal Activity

**INDICATION**  
Auvelity is indicated for the treatment of major depressive disorder (MDD) in adults.

### IMPORTANT SAFETY INFORMATION

#### WARNING: SUICIDAL THOUGHTS AND BEHAVIORS

- Antidepressants increased the risk of suicidal thoughts and behaviors in pediatric and young adult patients in short-term studies.
- Closely monitor all antidepressant-treated patients for clinical worsening, and emergence of suicidal thoughts and behaviors.
- Auvelity is not approved for use in pediatric patients.
- Please see Important Safety Information in this article and Brief Summary of Prescribing Information, including Based Warning for suicidal thoughts and behaviors, on pages xi-xii.

### Early MDD Response May Improve Short and Long-Term Outcomes

Delayed treatment of major depressive disorder (MDD) and longer major depressive episode duration have been associated with poorer short- and long-term outcomes.<sup>1,2</sup> People who experience shorter depressive episodes have better symptomatic outcomes, better functional outcomes, and lower relapse risk. Achieving a clinical response early in the disease trajectory with fewer treatment steps is associated with lower rates of relapse.<sup>3</sup> A meta-analysis showed people with early improvement, defined as a  $\geq 20\%$ ,  $\geq 25\%$ , or  $\geq 30\%$  symptom reduction on scales such as Hamilton Depression Rating Scale (HDRS17) and Montgomery-Åsberg Depression Rating Scale (MADRS), in the first 2 weeks, were 3 times more likely to achieve clinical response and 6 times more likely to achieve remission.

### Auvelity Important Safety Information

#### CONTRAINDICATIONS

**Seizure:** Do not use Auvelity in patients with a seizure disorder.

**Current or prior diagnosis of bulimia or anorexia nervosa:** A higher incidence of seizure was observed in such patients treated with bupropion.

**Undergoing abrupt discontinuation of alcohol, benzodiazepines, barbiturates, and antiepileptic drugs:** Due to risk of seizure.

**Monoamine Oxidase Inhibitors (MAOIs):** Do not use Auvelity concomitantly with, or within 14 days of stopping, an MAOI due to the risk of serious and possibly fatal drug interactions, including hypertensive crisis and serotonin syndrome. Conversely, at least 14 days must be allowed after stopping Auvelity before starting an MAOI antidepressant. Do not use Auvelity with reversible MAOIs such as linezolid or intravenous methylene blue.

(continued)

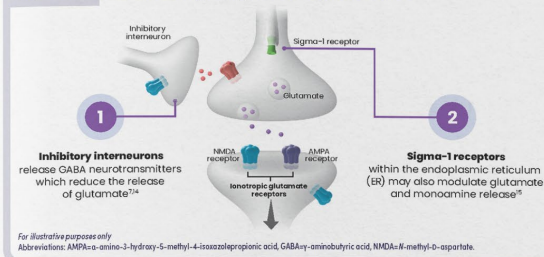
Please see Important Safety Information in this article and Brief Summary of Prescribing Information, including Based Warning for suicidal thoughts and behaviors, on pages xi-xii. Information from Industry | Psychiatrist.com

than those without early improvement.<sup>4</sup> In a longitudinal, multicenter, observational study, people who responded to treatment within 6 weeks of initiating antidepressant treatment had approximately 4 times greater chance of achieving a positive outcome at 12 months, suggesting early clinical response (50% decrease from baseline in the 17-item Hamilton Depression Rating Scale [HDRS17] score by Week 6) is associated with improved quality of life and achieving long-term (12 months) remission.<sup>4</sup>

### The Role of Glutamate in MDD

Glutamate dysfunction may play a key role in MDD. The pathophysiology of MDD is associated with disruptions of multiple neurotransmitters and receptors, including glutamatergic neurotransmission.<sup>5</sup> Glutamate is the most abundant neurotransmitter in the CNS,<sup>6,7</sup> being released by 40% of neurons in the brain (by contrast, fewer

**Figure 1. Glutamate Signaling via Ionotropic Receptors**



than 1% of neurons release each of the monoamines—dopamine, norepinephrine, and serotonin—which have also been implicated in the pathophysiology of MDD).<sup>8,9</sup> Glutamate signals through metabotropic and ionotropic receptors, with N-methyl-D-aspartate (NMDA) and α-amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid (AMPA) being ionotropic receptors that are suspected targets in antidepressant effects.<sup>10,11</sup>

In vivo studies have found abnormal glutamate levels are common among patients with MDD.<sup>12,13</sup> Modulating glutamate pathways in the brain is an emerging approach to treating MDD. The NMDA receptor in particular has emerged as a potential mediator of MDD pathophysiology.<sup>14,15</sup>

The sigma-1 receptor is thought to be a key modulator of neurobiological processes. Activation of the sigma-1 receptor, within the endoplasmic reticulum, may modulate glutamatergic and monoaminergic signaling, which may be dysregulated in MDD (Figure 1).<sup>16</sup>

### Auvelity Important Safety Information

**Hypersensitivity:** Do not use in patients with known hypersensitivity to dextromethorphan, bupropion, or any component of Auvelity. Anaphylactoid/anaphylactic reactions and Stevens-Johnson syndrome have been reported with bupropion. Arthralgia, myalgia, fever with rash, and other serum sickness-like symptoms suggestive of delayed hypersensitivity have also been reported with bupropion.

### WARNINGS AND PRECAUTIONS

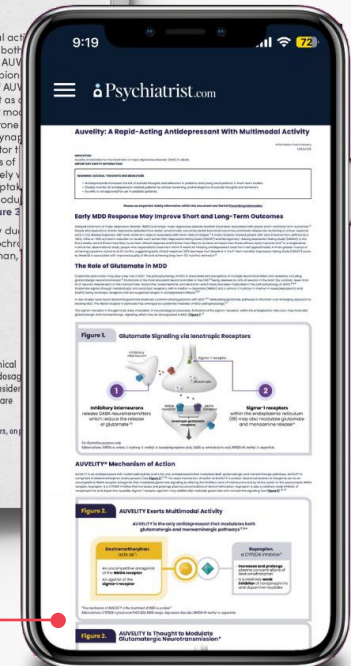
**Suicidal Thoughts and Behaviors in Pediatrics and Young Adults:** Monitor all antidepressant-treated patients for any indication for clinical worsening and emergence of suicidal thoughts and behaviors, especially during the initial few months of drug therapy, and at times of dosage changes. Counsel family members or caregivers of patients to monitor for changes in behavior and to alert the healthcare provider. Consider changing the therapeutic regimen, including possibly discontinuing Auvelity, in patients whose depression is persistently worse, or who are experiencing emergent suicidal thoughts or behaviors.

Please see Important Safety Information in this article and Brief Summary of Prescribing Information, including Based Warning for suicidal thoughts and behaviors, on pages xi-xii. Information from Industry | Psychiatrist.com

### AUVELITY® Mechanism of Action

AUVELITY is an antidepressant with multimodal activity and is the only antidepressant that modulates both glutamatergic and monoaminergic pathways. AUVELITY is comprised of dextromethorphan and bupropion (Figure 2).<sup>17,18</sup> The exact mechanism of action of AUVELITY is unclear. Dextromethorphan is thought to act as a noncompetitive NMDA receptor antagonist that modulates glutamate signaling by altering the inhibitory tone interneurons and by direct action on the postsynaptic NMDA receptor. Bupropion is a CYP2D6 inhibitor that increases and prolongs plasma concentrations of dextromethorphan. Bupropion is also a relatively weak inhibitor of norepinephrine and dopamine reuptake. Sigma-1 receptor agonism may additionally modulate glutamate and monoamine signaling (see Figure 3). Dextromethorphan has low oral bioavailability due to its rapid and extensive metabolism by the cytochrome P450 (CYP) 2D6 liver enzyme. Dextromethorphan,

JCP



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**Michael Platania**  
Senior Director  
[MPlatania@psychiatrist.com](mailto:MPlatania@psychiatrist.com)  
973.525.3530

**General**  
[ads@psychiatrist.com](mailto:ads@psychiatrist.com)