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Commentary

Editorial: Neuroscience-based Nomenclature (NbN) replaces the current label of psychotropic medications in *European Psychiatry*

The current nomenclature of psychotropic medications is more 'indication-based' rather than 'neuroscience-based', with important misunderstandings when the same molecule can be prescribed for depression, psychosis or bipolar disorder. It is even more difficult for patients to understand when an anticonvulsant is prescribed as a mood stabilizer. Disconnection between the names given to compounds and the conditions for which they are prescribed is indeed confusing, both for prescribers and for patients.

A group of 10 experts, with the support of scientific organizations involved in psychopharmacology and neuropharmacology (ECNP, ACNP, ASCNP, CINP, IUPHAR) developed a new pharmacologically-driven nomenclature (Neuroscience-based Nomenclature, or NbN), relying on 10 mechanisms of action and 11 core pharmacological domains. The aims were to better describe and correctly label the different psychotropic treatments [1].

In order to propose a friendly and simple instrument, 4 additional dimensions were included:

- · approved indications;
- efficacy and side effects;
- practical notes;
- · neurobiology.

Up to now, 108 compounds have been relabelled with this new system. As for several recent applications, the clinician can visit a web site devoted to the topic (http://nbnomenclature.org/) or even download a free app, both for android and Apple smartphones.

Progresses are rarely resolving all issues; limits are therefore expected. New mechanisms of action will for example probably pop-up (targeting specific microRNA? Epigenetic landmarks? Anti-inflammatory drugs?) with the need to enlarge the proposed mechanisms of action, and pediatric psychopharmacology will have to be addressed. Nevertheless, this first step is a major one. With a yearly revision, let us hope that progresses will be caught even faster than before.

Using this new nomenclature of psychotropic drugs will mean relying on objective pharmacological mechanisms instead of approved indications. This choice will increase the time stability

of how we call a specific treatment, and, especially important for a journal, will help to use a common scientific language. *European Psychiatry* therefore decided to participate in this movement, encouraging now all authors to use systematically this nomenclature, each time a psychotropic drug is being quoted in a manuscript. As changes are always effortful, for authors as for readers, it will be possible to use the previous nomenclature, providing that the NbN is also added.

Disclosure of interest

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Reference

[1] Zohar J, Nutt DJ, Kupfer DJ, Moller HJ, Yamawaki S, Spedding M, et al. A proposal for an updated neuropsychopharmacological nomenclature. Eur Neuropsychopharmacol 2014;24:1005–14.

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