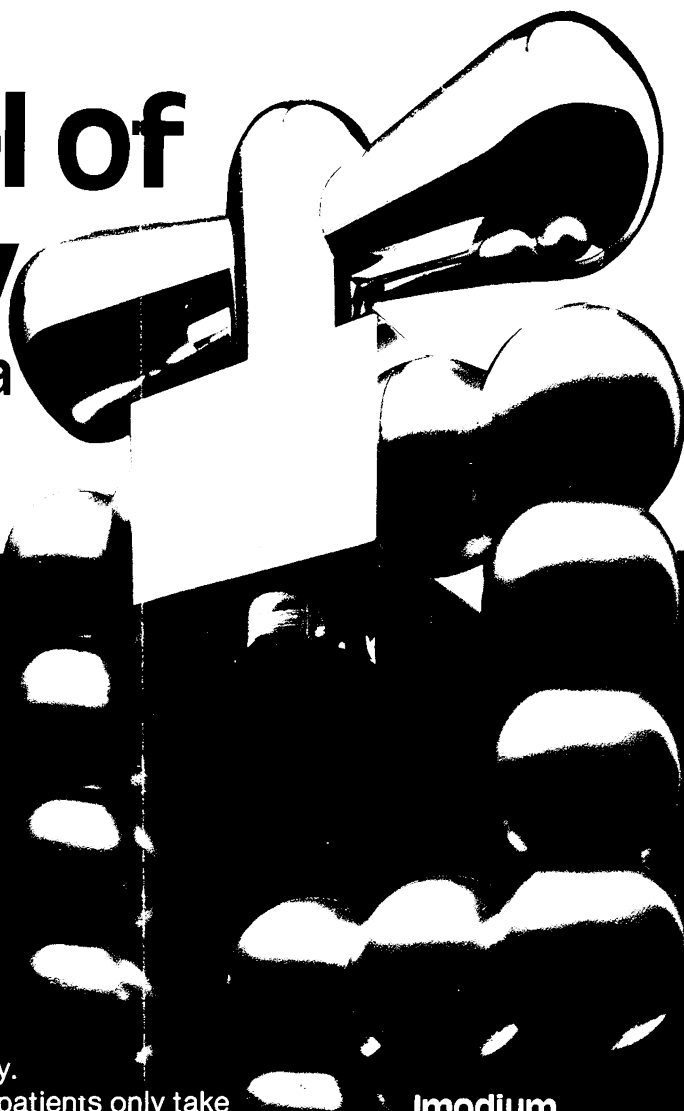


# Imodium

TRADEMARK

(loperamide hydrochloride)

symbol of  
accuracy  
in acute diarrhoea



Imodium's specific action controls diarrhoea, relieving pain and abdominal cramps rapidly and effectively.

A tailored dosage regime means that patients only take Imodium when they really need it, minimising the risk of constipation and encouraging economy of medication.

Patients will find Imodium capsules easy to take and the blister pack of just twelve capsules is convenient to carry throughout the working day.

**Imodium**

**Simply Stops Diarrhoea - fast**

**2 // stat and 1 //  
at each loose stool**

Further information is available from :



**JANSSEN PHARMACEUTICA**  
2340 Beerse, Belgium

or

**JANSSEN PHARMACEUTICAL LTD.**  
Marlow, Bucks. SL7 1ET.

**Presentation :**

Hard gelatin capsules containing 2 mg loperamide hydrochloride and syrup containing 1 mg loperamide hydrochloride per 5 ml.

**Indications :**

Imodium\* is indicated for the symptomatic control of acute diarrhoea of any aetiology.

**Contra-indications and warnings etc. :**

There are no specific contraindications to Imodium\*. Studies in animals have shown no abnormal teratogenic effects, however the use of loperamide during pregnancy is subject to the usual precautions. In trials, no side effects have been reported that can reliably be distinguished from the symptoms of the gastro-intestinal disorder being treated. As persistent diarrhoea can be an indicator of potentially more serious conditions, Imodium\* should not be used for prolonged periods until the underlying cause of the diarrhoea has been investigated.

**Dosage and Administration :**

**Acute Diarrhoea : Adults :** Two capsules initially, followed by one capsule after every loose stool. The usual dosage is 3 to 4 capsules a day; the maximum daily dose should not exceed 8 capsules. **Children :** 4 to 8 years : Syrup 5 ml four times daily until diarrhoea is controlled. In children under 8 years, further investigation may be necessary if diarrhoea has not responded to three days' treatment. 9 to 12 years : Syrup 10 ml (or 1 capsule) four times daily until diarrhoea is controlled.

**Basic NHS Cost :**

12 capsules (ex 250 pack) 104p. (correct at time of printing)

**Product Licence Numbers :**

Capsules 0242/0028 - Syrup 0242/0040

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# CANADIAN MEDICAL ASSOCIATION

## ANNUAL MEETING

August 23-28, 1981

Halifax, Nova Scotia

*Convention Hotel:* Hotel Nova Scotian

### *Pre-registration Fee:*

<i>CMA Member</i>	<i>Non- Member</i>	<i>Spouse/ Guest</i>
CDN\$115	CDN\$172	CDN\$80

## GENERAL COUNCIL MEETING

August 24-25, 1981

## SCIENTIFIC SESSIONS

August 26	Bioethics Critical Care
August 27	Geriatrics Gynaecology
August 28	The Physician and Family Life

For further information on the social program and pre- and post-convention tours, please write to the *Annual Meeting Coordinator, The Canadian Medical Association, P.O. Box 8650, Ottawa, Ontario K1G 0G8, Canada.*

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**Dosage** Septrin Forte Tablets. Adults and children over 12 years: 1 forte tablet twice daily. Maximum dosage for particularly severe infections 1½ forte tablets twice daily. In acute infections Septrin should be given for a minimum of 5 days or until the patient has been symptom-free for 2 days.

**Contra-indications** Septrin is contra-indicated in patients with marked liver parenchymal damage, blood dyscrasias or severe renal insufficiency. Septrin should not be given to patients hypersensitive to sulphonamides or co-trimoxazole; should not be given during pregnancy or to neonates.

**Precautions** In cases of renal impairment a reduced dosage is indicated and an adequate urinary output should be maintained. Regular blood counts are necessary whenever long-term therapy is used. Caution is advised in patients with folate deficiency. Care should be taken when giving Septrin to patients receiving oral anticoagulants of the coumarin group, pyrimethamine or sulphonylureas.

**Adverse Reactions** Occasionally, nausea, vomiting, glossitis and skin rashes may occur with normal doses and, very rarely, haematological reactions.

**Presentation** Septrin Forte Tablets each contain 160mg Trimethoprim B.P. and 800mg Sulphamethoxazole B.P.  
Basic NHS cost: £1.34 for 10. PL3/0121



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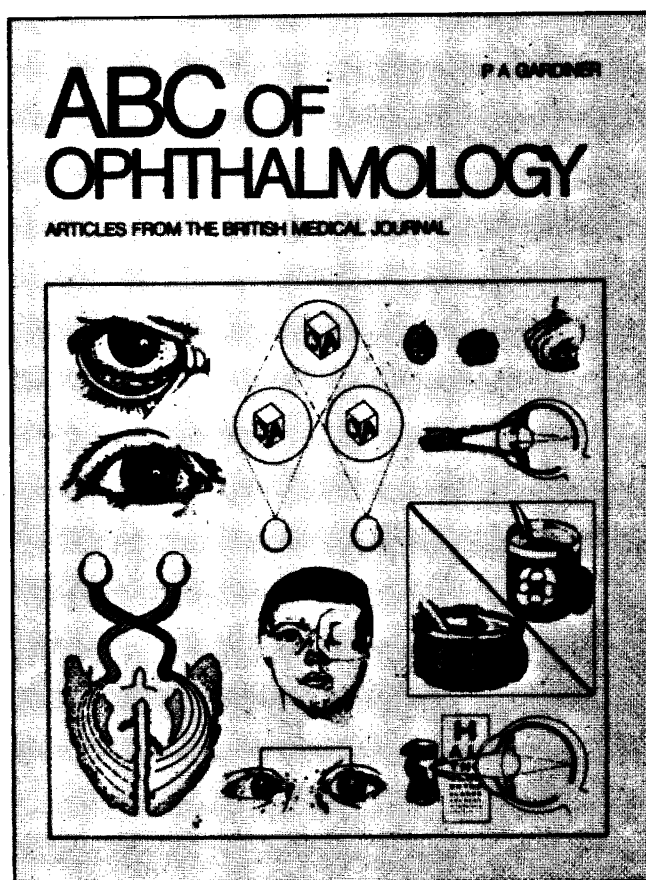
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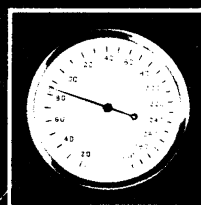
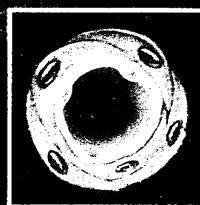


Artist's representation of the lumen of an arteriole,  
dilation of which results in reduced peripheral resistance  
and blood pressure.

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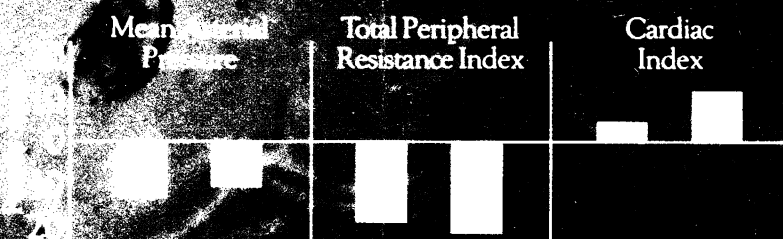
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(prazosin HCl)

 INTERNATIONAL INC.

1. Lund-Johansen, P.: Postgraduate Medicine Clinical Symposium Proceedings, November, 1975, pp. 45-52.

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by T. D. V. SWINSCOW

from the British Medical Journal

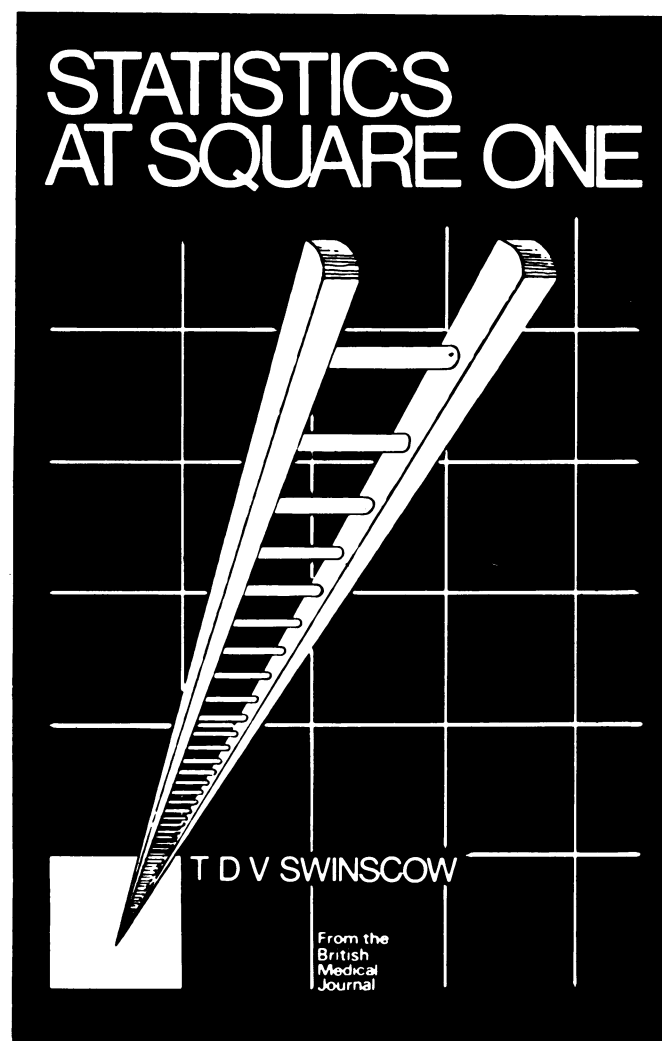
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### **Uses**

For the treatment of hypertension.

### **Dosage and administration**

#### **Adults**

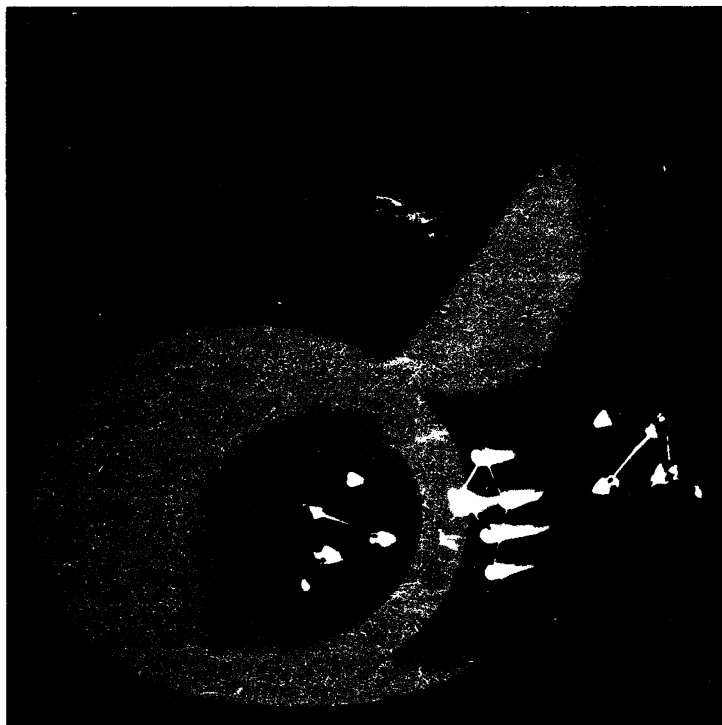
The dosage is one tablet daily to be taken in the morning.

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- Deep wound infection
- Septic arthritis
- Foreign bodies } grafts  
                              } prostheses
- Osteomyelitis
- Diabetic gangrene

#### Oral dosage:

Adults: 500mg (2 capsules) 3 times daily with food.  
Children: 20-40mg/kg body weight daily in 3 divided doses with food.  
The standard dose may be doubled for initial therapy in severe infections.

#### Adverse reactions and precautions:

Gastro-intestinal upset occurs in some patients taking oral Fucidin. This can be minimised by taking the capsules with food or using Fucidin Enteric Coated Tablets. In some patients taking Fucidin, a reversible jaundice has been reported, most frequently in subjects receiving intravenous therapy. In general, oral therapy should be instituted as soon as possible. If the jaundice persists, the drug should be withdrawn, following which the serum bilirubin will invariably return to normal. Fucidin is excreted mainly in the bile, and liver function tests should be carried out in patients with liver dysfunction, when used for prolonged periods and when

administered in conjunction with other drugs which may compete for the same excretory pathway.  
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Each capsule contains 250mg sodium fusidate B.P.

#### References:

1. Jensen, K., and Lassen, H.C.A., Ann. Intern. Med., **60**, 790, 1964.
2. Crosbie, R. B., Br. Med. J., **1**, 788, 1963.
3. Rowling, D. E., J. Bone Joint Surg., **52B**, 302, 1970.



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