

NizoralTM

ketoconazole

The first
oral anti-fungal
effective against
all pathogenic
fungi

dosage:

| Vaginal Candidosis: | All other superficial and systemic fungal infections: |
|--|--|
| 1 tablet b.i.d. (with food) for 5 days | 1 tablet daily (with food) until complete symptomatic and mycological cure is obtained |

PRESCRIBING INFORMATION

Presentation: White, flat, half scored uncoated tablets marked 'JANSSEN' on the reverse. Each contains ketoconazole 200 mg. **Uses:** Nizoral is an orally active antimycotic for the treatment, in adults, of superficial and systemic mycoses including dermatophyte and yeast infection of the skin and hair, yeast infection of the mouth and G.I. tract, recurrent or chronic vaginal candidosis not responding to topical treatment. Also maintenance treatment in systemic mycosis and chronic mucocutaneous candidosis and prophylaxis in 'at risk' patients. In children, systemic mycosis and severe local infection where previous topical treatment has failed. **Side-effects, Precautions, Contra-indications:** Contra-indicated in pregnancy. For optimum absorption, Nizoral should be taken with meals. The use of agents which reduce gastric acidity (anti-cholinergic drugs, antacids, H₂ blockers) should be avoided and, if indicated, such drugs should be taken not less than two hours after Nizoral. Nausea, skin rash, occasionally observed.

Not all indications are as yet
approved in all countries.

Janssen Pharmaceutica 
Beerse, Belgium

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the second issue in English of the

**Journal of
TRADITIONAL
CHINESE
MEDICINE**

December 1981 Volume 1, Number 2

A selection of papers published in this and the first (September 1981) issue follows:

RECENT ADVANCES IN DIAGNOSIS AND TREATMENT OF ACUTE APPENDICITIS COMPLICATED WITH PERITONITIS BY COMBINED TRADITIONAL CHINESE AND WESTERN MEDICINE • CLINICAL STUDIES OF PSORIASIS TREATED WITH ANTIPSORIATIC PRESCRIPTIONS • SPLEEN POINT IN FACE ACUPUNCTURE USED IN FIBROGASTROSCOPY • A REPORT ON THE NON-MUTAGENICITY OF QINGHAOSU BY THE AMES' TEST • TREATMENT OF GRAND MAL SEIZURES WITH "QUINGYANGSHEN" (ROOT OF CYNACHUM OTOPHYLLUM) AND OBSERVATIONS ON EXPERIMENTAL ANIMALS • VOLVULUS OF THE STOMACH SUCCESSFULLY TREATED WITH ACUPUNCTURE Report of 9 cases • TREATMENT OF TRICHOMONAL ENTERITIS BY CHINESE MEDICINAL HERBS Report of 16 cases • EFFECT OF TRADITIONAL MASSAGE ON CLOSURE INSUFFICIENCY OF GLOTTIS IN SINGERS An analysis of 16 cases.

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Septtrin Assurance

Prescribing Information

Indications Sensitive bacterial infections of the lower respiratory, urinary and genital tracts, sinusitis, otitis media, skin infections, septicaemia, typhoid and paratyphoid fevers, and other infections caused by sensitive organisms.

Dosage Septtrin 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 Septtrin should be given for a minimum of five days or until the patient has been symptom-free for two days.

Contra-indications Septtrin is contra-indicated in

patients with marked liver parenchymal damage, blood dyscrasias or severe renal insufficiency. Septtrin should not be given to patients hypersensitive to sulphonamides, trimethoprim or co-trimoxazole; should not be given during pregnancy or to neonates.

Precautions In 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 Septtrin 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 Septtrin Forte Tablets each contain 160 mg Trimethoprim BP and 800 mg Sulphamethoxazole BP. PL3/0121.

Septtrin* Forte 1b.d. co-trimoxazole

Further information is available on request.
Wellcome Medical Division
The Wellcome Foundation Ltd., Crewe, Cheshire



*Trade Mark

British Council Medical Courses

MODERN OBSTETRICS AND GYNAECOLOGY

12-24 September 1982 in London

This course aims to bring together working obstetricians and gynaecologists with their colleagues in the relevant research fields. The Directors of Studies will be **Professor S L Jeffcoate** and **Sir John Dewhurst** of the Institute of Obstetrics and Gynaecology at Queen Charlotte's Maternity Hospital, London. This course is open to specialist obstetricians and gynaecologists in hospital practice with at least five years' experience in the speciality.

Fee £632 (Residential), £392 (Non-residential).

THE AGEING OF POPULATIONS: CLINICAL CARE OF THE ELDERLY

12-24 September 1982 in Edinburgh

The purpose of this course is to present a view of current achievements in the care of the elderly, particularly as regards population changes and demography, basic science, clinical care and the provision of services. The Directors of Studies will be **Professor J Williamson** and **Dr R G Smith** of the University of Edinburgh Medical School. This course is open to senior medically qualified persons with an interest in the problems of ageing.

Fee £460 (Residential), £350 (Non-residential).

NEW APPROACHES TO DERMATOLOGICAL THERAPY

12-24 September 1982 in London

The course is designed to bring participants up to date on recent developments in the field of dermatological therapeutics with the special emphasis on the relationships of laboratory science to clinical practice. The Directors of Studies will be **Professor M W Greaves** and **Dr A Griffiths** of the Institute of Dermatology, London. This course is open to consultants and senior registrars with several years' experience and a major interest in dermatology.

Fee £595 (Residential), £345 (Non-residential).

THE CHILD AND INFECTION: RECOGNITION, MANAGEMENT AND PREVENTION

19 September-1 October 1982 in London

The purpose of this course is to provide an up to date review of practical problems concerning infections in infancy and childhood with regard to their prevention, diagnosis and treatment. Epidemiology, surveillance and the changing patterns of childhood infections in the community will be included. The Directors of Studies will be **Dr W C Marshall** and **Dr W A M Cutting**. The work sessions will take place mainly at the Institute of Child Health, University of London and the Hospital for Sick Children, Great Ormond Street, London, but some will be at the London School of Hygiene and Tropical Medicine. This course is open to senior practising paediatricians and others involved in child health and preventive medicine.

Fee £525 (Residential), £325 (Non-residential)

CLINICAL AND DIAGNOSTIC VIROLOGY

7-19 November 1982 in Birmingham

This course will place emphasis on the contribution of laboratory techniques to solving diagnostic problems, the treatment of virus infection and the production and use of virus vaccines and new antiviral compounds. The Director of Studies will be **Dr T H Flewett** and **Dr Elisabeth Bozall** of the Regional Virus Laboratory, East Birmingham Hospital. The course is intended for diagnostic and public health virologists with more than five years experience as well as senior clinicians with a special interest in infectious disease.

Fee: £595 (residential), £345 (Non-residential)

BLOOD TRANSFUSION

14-26 November 1982 in Edinburgh

The aim of this course is to review the practice of blood transfusion in the 1980s and beyond against a background of the voluntary blood donor, a national blood transfusion service, the evolution of community self-sufficiency in blood, blood products and laboratory reagents and the clinical use of blood products. The Director of Studies will be **Dr J D Cash**, National Medical Director, Scottish National Blood Transfusion Service, Edinburgh. This course is open to medically qualified doctors and graduate scientists with blood transfusion experience.

Fee £525 (Residential), £305 (Non-residential).

EXPANDING HORIZONS OF DIAGNOSTIC ULTRASOUND

14-26 November 1982 in Bristol

This course is designed to explore the physical foundation of ultrasonic imaging and measurement in the context of clinical diagnosis. The potential and limitations of ultrasonics techniques, will be illustrated in relation to recent advances in ultrasonic investigations of the abdomen, small parts and the vascular system. The course is organised under the general direction of **Dr P N T Wells**, Department of Medical Physics, Bristol and Weston Health Authority and the Co-Directors of Studies are **Dr H B Meire**, Division of Radiology, Clinical Research Centre, Harrow, and **Dr J P Woodcock**, also of the Department of Medical Physics in Bristol. This course is open to consultant radiologists, senior registrars, physicists, obstetricians, specialists in cardiovascular disease and in internal medicine, and senior paramedical people.

Fee £635 (Residential), £370 (Non-residential).

FURTHER COURSES PLANNED

GASTROINTESTINAL ENDOSCOPY

6-11 February 1983 in London

The Director of Studies will be **Dr P Salmon**.

Fee: To be announced.

THE CLINICAL MEDICINE OF OLD AGE

13-25 March 1983 in Cambridge

The Directors of Studies will be **Professor A N Exton-Smith** and **Dr W Davison**.

Fee: To be announced.

RECENT ADVANCES IN RENAL MEDICINE

13-25 March 1983 in London and Newcastle upon Tyne

The Directors of Studies will be **Professor D N S Kerr** and **Dr R Wilkinson**.

Fee: To be announced.

FURTHER INFORMATION AND APPLICATION FORMS CAN BE OBTAINED FROM YOUR LOCAL OVERSEAS REPRESENTATIVE OF THE BRITISH COUNCIL, OR FROM COURSES DEPARTMENT, THE BRITISH COUNCIL, 65 DAVIES STREET, LONDON W1Y 2AA.



Voltarol[®]

diclofenac sodium

**because they live at least
30 years with arthritis**



Prescribing notes

Presentation Yellow, biconvex enteric coated tablets of 25mg diclofenac sodium, imprinted 'Geigy' on one side. Light brown, biconvex enteric coated tablets of 50mg diclofenac sodium, imprinted 'Geigy' on one side. Yellowish-white suppositories of 100mg diclofenac sodium. **Mode of action** Voltarol is a non-steroidal agent with marked analgesic/anti-inflammatory properties. **Indications** Rheumatoid arthritis, osteoarthritis. **Dosage** Tablets: a total of 75-150mg daily, given in two or three divided doses. Rectal: one suppository daily which may be combined with the tablets. The daily dose should not exceed 150mg. **Contra-indications** Peptic ulceration. Patients in whom attacks of asthma, urticaria or acute rhinitis are precipitated by aspirin or other non-steroidal anti-inflammatory agents. **Precautions** Voltarol should not be prescribed during pregnancy, unless there are compelling reasons for doing so. Patients with a history of peptic ulcer, haematemesis or melaena, or with severe hepatic or renal insufficiency, should be kept under close surveillance. Voltarol has been reported to depress salicylate levels, and vice versa; the clinical relevance of this phenomenon is not yet clear. **Warnings and side-effects** Transient epigastric pain, nausea and diarrhoea, headache and slight dizziness have been reported as occasionally have skin rash, peripheral oedema and abnormalities of the serum transaminases. **NHS price** Tablets 25mg: pack of 100 - £9.00; 50mg: pack of 100 - £17.50; Suppositories: pack of 10 - £2.98. **Product licence numbers** Tablets 25mg PL0001/0036, 50mg PL0001/0082, Suppositories 100mg PL0001/0083. **Product licence holder** Geigy Pharmaceuticals, Horsham, West Sussex. Full prescribing information is available from Geigy Pharmaceuticals, Horsham, West Sussex.

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