

Nizoral

ketconazole

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 sympto- matic 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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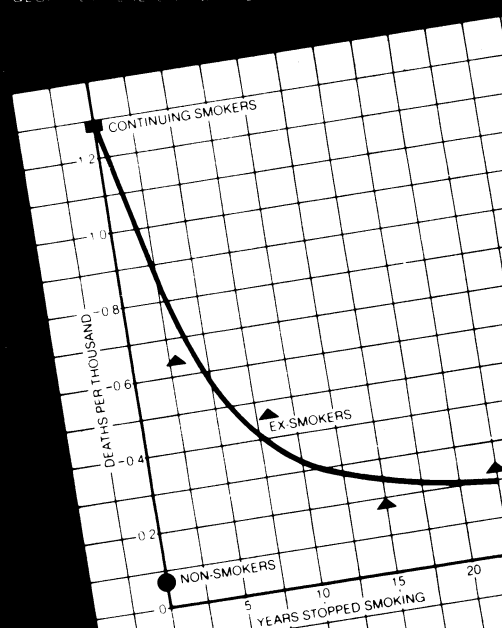
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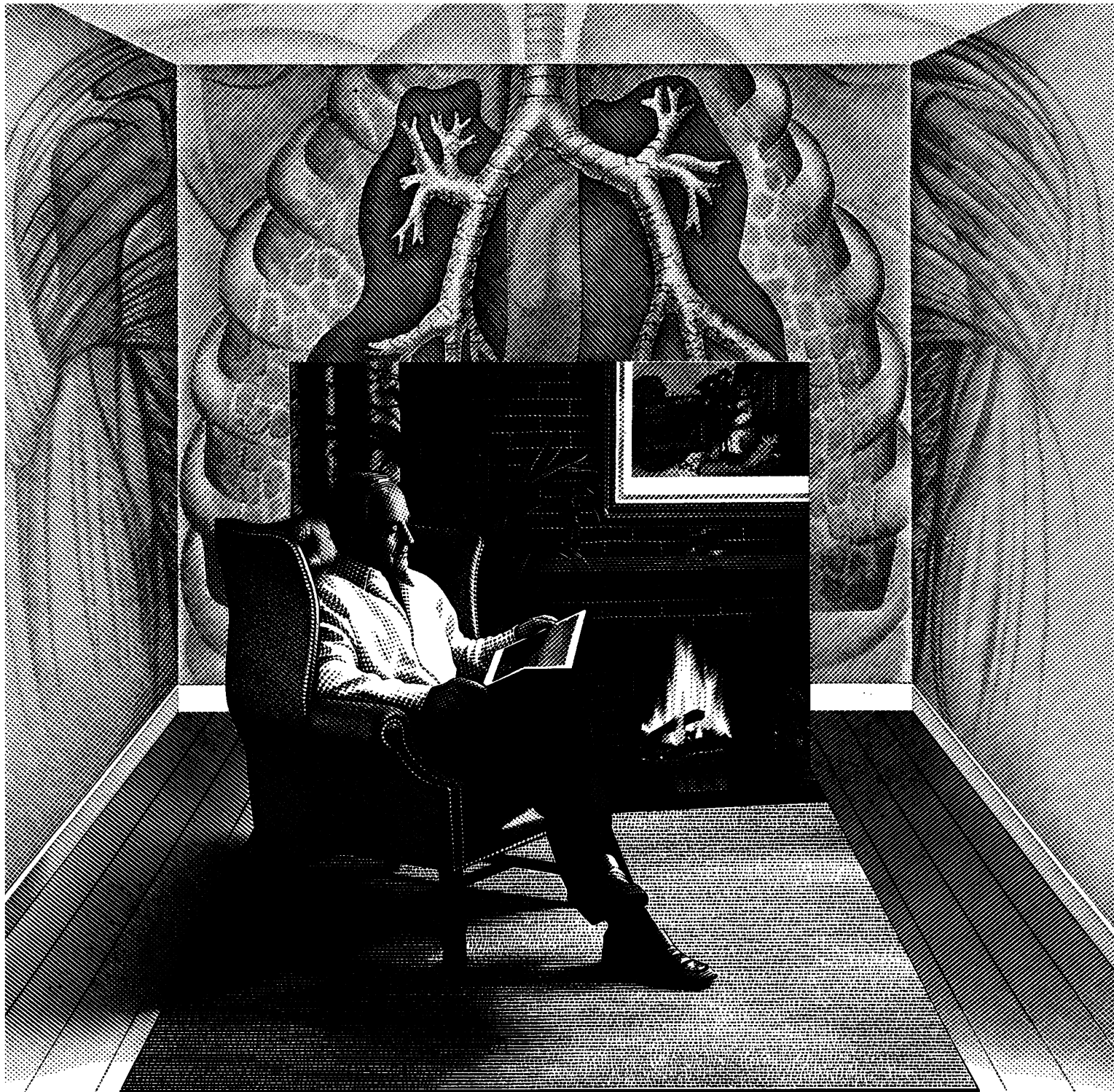
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EPIDEMIOLOGY FOR THE UNINITIATED

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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 160mg Trimethoprim BP and 800mg 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

TODAY'S TREATMENT/4

The drugs that we use today are increasingly potent, dangerous, and expensive, and every doctor should have some understanding of clinical pharmacology and drug-induced diseases. Both these subjects, which have been badly taught in medical schools, are covered comprehensively in this new book, which consists of articles taken from the *BMJ*. Also included are articles that provide a clear and up-to-the-minute introduction to anaesthetics.

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gentleness of

Burinex K

bumetanide and slow release potassium chloride

lies the power of

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for maintenance

Burinex tablets
combine strength with
gentleness for more refractory oedema
Burinex injection
fast powerful action for emergencies

Formulations Burinex Injection: 0.5 mg/ml in 2 ml, 4 ml and 10 ml ampoules. Burinex Tablets: 1 mg and 5 mg. Burinex K: 0.5 mg bumetanide, 7.7 mmol slow release potassium chloride. **Indications** Acute pulmonary oedema and oedema of cardiac, renal or hepatic origins. **Dosages** Burinex Injection: Initially 1-2 mg i.v., if necessary repeated at 20 minute intervals to achieve desired response. Where appropriate higher doses may be given by infusion over 30-60 minutes. Burinex Tablets: Most patients require 1 mg Burinex daily as morning or evening dose. In refractory cases dosage can be increased to achieve the desired response. For high dose treatment 5 mg Burinex should be given initially and increased by 5 mg steps at 12-24 hour intervals until desired response is achieved. Burinex K: Most patients require 2 tablets Burinex K daily. **Contra-indications, Precautions and Side Effects** Contra-indicated in hepatic coma, severe electrolyte depletion and severe progressive renal failure. Hypokalaemia and circulatory collapse may follow inappropriately excessive diuresis. Concurrent digitalis therapy in association with electrolyte disturbances may lead to digitalis toxicity. Concurrent antihypertensive or antidiabetic therapy may require adjustment. Caution should be exercised in the first trimester of pregnancy. Burinex K is contra-indicated in combination with potassium sparing agents. Burinex K should be stopped immediately if signs or symptoms of bowel ulceration appear. Side effects such as skin rashes, muscular cramps, rises in serum uric acid and thrombocytopenia may rarely occur. **Product Licence Numbers:** Burinex Injection: 0043/0060 Burinex Tablets: 0043/0021, 0043/0043 Burinex K: 0043/0027B **Basic N.H.S. Prices** Burinex Injection: 0.5 mg/ml - 5 x 4 ml £3.34 Burinex Tablets: 1 mg - 100 tabs £4.74 Burinex K: 100 tabs £3.24



*Burinex is a trade mark

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