

# Nizoral

ketconazole

TRADE MARK

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 (anticholinergic drugs, antacids, H<sub>2</sub> 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

# STATISTICS AT SQUARE ONE

by T. D. V. SWINSCOW

from the British Medical Journal

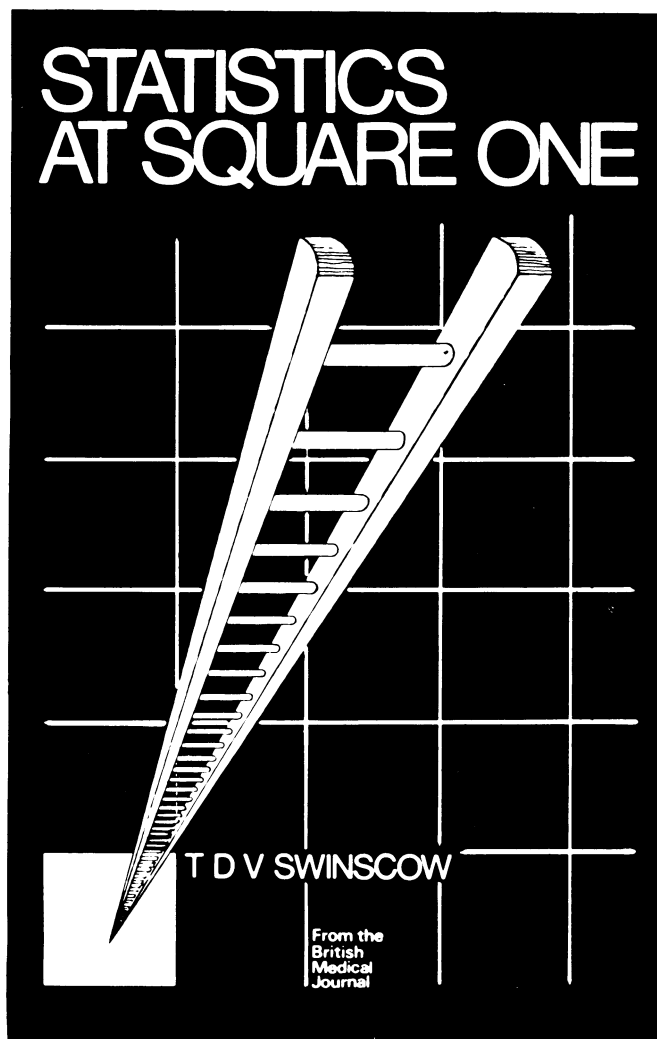
The statistical testing of data is indispensable in many types of medical investigation and a help on countless occasions in clinical practice. This book provides step-by-step instruction. Subjects covered include standard deviation,  $\chi^2$  tests, t tests, non-parametric tests and correlation. Methods specially adapted to pocket calculators.

*"The ability to put symbols in sequence may well be one of the greatest advances in man's development. . . . This excellent and attractive volume will give you an idea into which category an article or projected article fits. The ink you save may be your own. It is superb value."*

O'Donnell, Barry, *British Medical Journal*, 1977, 1, 451.

*"... this gem of a practical booklet squeezes the essence of biostatistics into 75 well-written, well-organized pages. Newcomers to the field will like the way obscure concepts are clarified; experts will find the book valuable as a teaching aid."*

de Jong, Rudolph H., *J.A.M.A.*, 1977, 237, 1874




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**Seventh edition**

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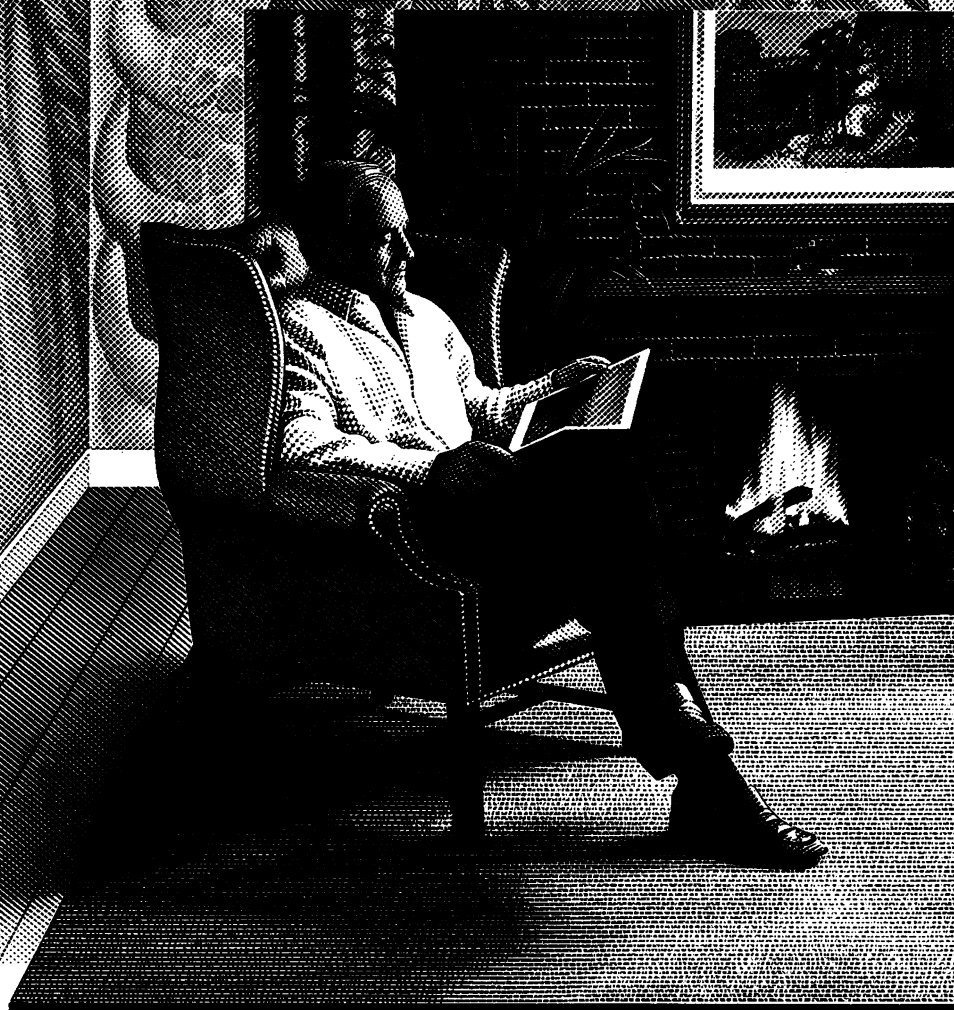
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## Septtrin Assurance

### 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. The 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).

## **RECENT ADVANCES IN RENAL MEDICINE**

**13-25 March 1983 in Newcastle upon Tyne and London**

This course is designed to cover all aspects of nephrology. The Directors of Studies will be PROFESSOR D N S KERR, Professor of Medicine, University of Newcastle upon Tyne and DR R WILKINSON, Senior Lecturer in Medicine, University of Newcastle upon Tyne. The course is intended primarily for young physicians with one or two years' experience in renal medicine.

Fee £595 (Residential), £345 (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 Directors of Studies will be DR T H FLEWETT and DR ELIZABETH BOXALL 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).

## **MEDICAL IMMUNOLOGY: RECENT ADVANCES**

**13-25 March 1983 in London**

This course is expected to interest senior immunologists, microbiologists, pathologists, epidemiologists and clinical specialists with established experience in the diagnosis, management and control of immunologically-based disease in paediatric and adult clinical practice. It will aim to consider the clinical impact of recent advances in molecular and cellular immunology upon the understanding of immunological disease processes, on immunodiagnosis, treatment, and immunoprophylaxis. The Director of Studies will be PROFESSOR D C DUMONDE of the Department of Immunology, St. Thomas's Hospital Medical School, University of London. The course is intended for senior immunologists, microbiologists, pathologists, epidemiologists and clinical specialists with established experience in the diagnosis, management and control of immunologically-based disease in paediatric and adult clinical practice.

Fee £695 (Residential), £405 (Non-residential).

## **EXPANDING HORIZONS OF DIAGNOSTIC ULTRASOUND**

**14-26 November 1982 in Bristol**

This course is designed to explore the physical foundations 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. The course is open to consultant radiologists, senior registrars, physicists, obstetricians, specialists in cardio-vascular disease and in internal medicine, and senior paramedical people.

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

## **THE CLINICAL MEDICINE OF OLD AGE**

**13-25 March 1983 in Cambridge**

This course aims first to describe the advances in our knowledge of the scientific basis of clinical medicine in old age and secondly to discuss the resources needed for the provision of an effective geriatric service. The Directors of Studies will be PROFESSOR A N EXTON SMITH, University College London School of Medicine, and DR W DAVISON, Consultant in Geriatric Medicine, Chesterton Hospital, Cambridge. The course is intended for senior physicians and psychiatrists with an interest in the problems of ageing.

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

## **THE LYMPHOCYTE**

**23 January-4 February 1983 in London**

This course aims to familiarise participants with the latest advances in Britain in the immunology of the lymphocyte and to update their knowledge of current concepts of the role of the lymphocyte in adaptive immunological processes. The Directors of Studies will be PROFESSOR I M ROITT and DR P M LYDYARD of the Middlesex Hospital Medical School, London. The course is aimed at postgraduates who are laboratory investigators or clinicians with 2-3 years' experience in immunology or allied fields.

Fee £645 (Residential), £375 (Non-residential).

## **HUMAN GENETICS: PRESENT AND FUTURE**

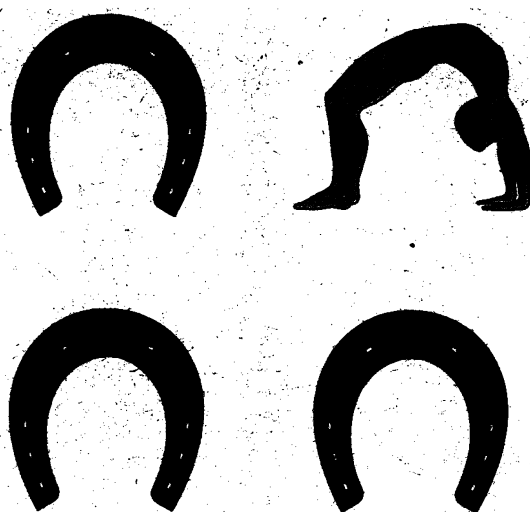
**20-31 March 1983 in Oxford**

This course aims to acquaint medical doctors, graduates in biological sciences and PhD students with recent progress in genetics, with particular emphasis on human and medical aspects. The Directors of Studies will be PROFESSOR P E POLANI and DR M ADINOLFI of the Paediatric Research Unit, Guy's Hospital Medical School, University of London. The course is intended for medical doctors, graduates in biological sciences and PhD students with a good basic knowledge of genetics.

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

**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 DAVIS STREET, LONDON W1Y 2AA.**

# Joint favourite



## **Voltarol<sup>®</sup>** diclofenac sodium **for arthritis**

**Presentation** Tablets of 25 and 50mg diclofenac sodium; suppositories of 100mg diclofenac sodium. **Indications** Rheumatoid arthritis, osteoarthritis, low back pain, ankylosing spondylitis. **Dosage** Tablets: 75-150mg daily in two or three divided doses. Suppositories: one daily, usually administered at night. In more severe cases, combined therapy with tablets is recommended (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 NSAIs. **Precautions** Do not prescribe during pregnancy unless there are compelling reasons. 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 is not yet clear. Use suppositories only with caution in patients with painful or irritable ano-rectal conditions. **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 serum transaminases and (very rarely) peptic ulcer and haematemesis or melaena. Local reactions to suppositories include itching, burning and increased frequency of bowel movement. **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. Full prescribing information is available from Geigy Pharmaceuticals, Horsham, West Sussex.

**Geigy**