

# Nizoral<sup>TM</sup>

ketoconazole

**The first  
oral anti-fungal  
effective against  
all pathogenic  
fungi**

**dosage:**

vaginal candidosis:	all other superficial and systemic fungal infections:
<b>2 tablets once daily (with food) for 5 days</b>	<b>1 tablet daily (with food) until complete sympto- matic and mycological cure is obtained</b>

**PRESCRIBING INFORMATION**

**Presentation:** white, flat, half scored uncoated tablets marked "Janssen" on one side and k/200 on the reverse. Each tablet contains 200 mg ketoconazole. **Uses:** Nizoral is an orally active antimycotic for the treatment in adults, of vaginal candidosis, superficial and systemic mycoses including dermatophyte and yeast infections of the skin, hair and nails, yeast infections of the mouth and G.I. tract. Also maintenance treatment of systemic mycoses and chronic mucocutaneous candidosis and prophylaxis in "at risk" patients. In children, systemic mycoses and severe local infections where previous topical treatment has failed. **Side-effects, precautions, contra-indications:** contra-indicated in pregnancy. For maximal 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, headache and pruritus may occasionally be observed. Alterations in liver function tests have occurred in patients on ketoconazole, these changes may be transient. Cases of hepatitis have been reported with an incidence of about 1 per 10,000 patients. Some of these may represent an idiosyncratic adverse reaction to the drug. This should be borne in mind in patients on long-term therapy. If a patient develops jaundice or any symptoms suggestive of hepatitis, treatment with ketoconazole should be stopped.

Not all indications are as yet  
approved in all countries.

Janssen Pharmaceutica  
B-2340 Beerse, Belgium



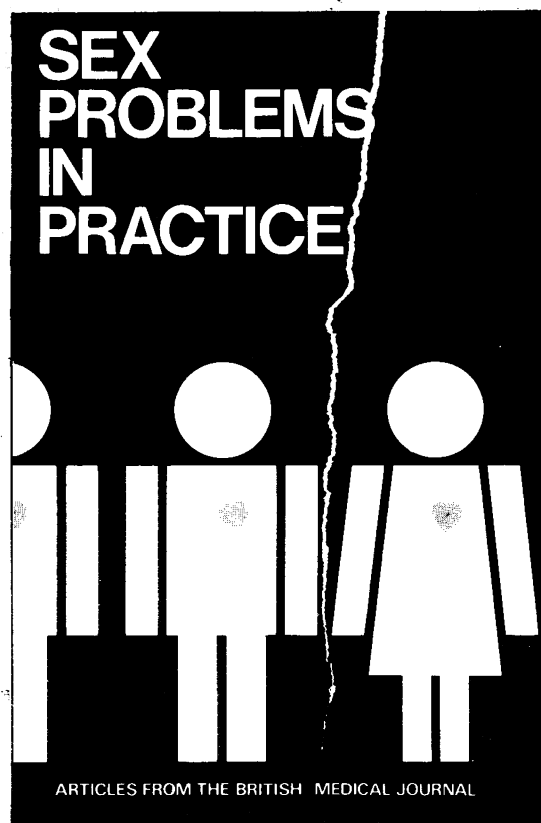
# SEX PROBLEMS IN PRACTICE

Patients increasingly are bringing their sex problems to doctors, many of whom have had no training in managing such problems. This book provides straightforward advice on what general practitioners and other front-line health workers can and cannot do. Most problems can be managed with simple advice and counselling, but some need referral.

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Actifed.  
Taken around  
the world.

**Presentation.** Actifed is available as tablets and syrup. Each tablet contains 2.5mg triprolidine hydrochloride and 60mg pseudoephedrine hydrochloride. Each 5ml of syrup contains 1.25mg triprolidine hydrochloride and 30mg pseudoephedrine hydrochloride.


**Indications** Symptomatic relief of upper respiratory congestion in the common cold, hay fever, vasomotor and allergic rhinitis, acute sinusitis, otitis barotrauma.

**Dosage** Three times a day: Adults and children over 12 years: 1 tablet or 10ml. 6-12 years: 7.5ml. 1-6 years: 5ml. 3-12 months: 2.5ml. **Contra-indications** Actifed is contra-indicated in persons hypersensitive to

pseudoephedrine or triprolidine and in those under treatment with MAO inhibitors and within 2 weeks of stopping such treatment. **Precautions** Although at recommended dosage pseudoephedrine has virtually no pressor effects in normotensive subjects, Actifed should be used with caution in patients with cardiovascular disorders. As with other antihistamine containing preparations, drowsiness may occur. In some patients the action of antihistamines may be potentiated by alcohol. 25 tablets. PL3/5003. 150ml. PL3/5004.

**Actifed<sup>TM</sup>**  
Pseudoephedrine Hydrochloride BP  
Triprolidine Hydrochloride BP

The decongestant  
chosen by NASA

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

# British Council Medical Courses

## 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).

## 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).

## INDUSTRIAL CANCER AND ITS EPIDEMIOLOGY

**17-23 April 1983 in Southampton**

This course aims to give the participants a perspective on cancer due to exposure in the workplace in relation to malignant disease as a whole, and an understanding of the principles and uses of the main epidemiological techniques employed in the identification of industrial cancer. The Director of Studies will be **Professor E D Acheson**, Director of the Medical Research Council Environmental Epidemiology Unit at Southampton General Hospital and Professor of Clinical Epidemiology in the University of Southampton.

It is envisaged that the course will be of most benefit to industrial medical officers, staff of regulatory agencies, industrial hygienists and research workers – principally but not exclusively from outside the United Kingdom.

Fee £375 (Residential), £220 (Non-residential).

## MALIGNANT DISEASE IN CHILDHOOD

**8-20 May 1983 in London/Manchester**

This course in paediatric oncology will emphasise recent advances including theoretical, experimental and epidemiological aspects and information on diagnosis and treatment and the organisation of clinical services. The Directors of Studies will be **Professor R M Hardisty**, Professor of Haematology at the Institute of Child Health and **Dr J Pritchard**, Consultant Oncologist at the Hospital for Sick Children, Great Ormond Street.

The course is intended for experienced paediatric oncologists and general paediatricians with special interest and experience in malignant disease.

Fee £695 (Residential).

## CHILD DEVELOPMENT: NORMAL AND ABNORMAL

**12-24 June 1983 in London**

This course will provide information about the methods currently available in Britain for studying and evaluating child development and in doing so will review the characteristics of child development. The Director of Studies will be **Professor Kenneth S Holt**, Head of the Department of Developmental Paediatrics, Institute of Child Health, University of London.

The course is intended for paediatricians studying or teaching child development or concerned with the evaluation and management of the development of disabled children.

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

## NUTRITION AND GROWTH

**26 June-8 July 1983 in Cambridge/London**

This course is designed to cover a wide range of theoretical and practical aspects of nutrition in relation to growth with particular emphasis on the early years of life and recent advances in this field will be presented. The Directors of Studies will be **Professor J T Harries**, Department of Paediatric Gastroenterology, Institute of Child Health, University of London and **Dr W P T James**, Assistant Director, Medical Research Council Dunn Nutrition Unit, Cambridge.

The course is designed for doctors and nutritionists with 5-10 years' experience who have a special interest in nutrition in early life.

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

## NEONATAL SURGERY

**6-19 July 1983 in Liverpool/London**

This course is designed to provide an up-to-date review of current practice in neonatal surgery. The aetiology, pathology, diagnosis and treatment of individual conditions demanding urgent surgery in the first few days of life will be considered in detail, and special attention will be directed to the problems of management of children with multiple anomalies and of the increasing numbers of children of very low birth weight who survive as a result of aggressive neonatal intensive care. The Director of Studies will be **Professor James Lister** of the Department of Paediatric Surgery, University of Liverpool.

The course is intended for experienced surgeons at or near consultant level with a major interest in paediatric surgery.

Fee £715 (Residential), £415 (Non-residential).

## PAEDIATRIC CARDIOLOGY

**10-22 July 1983 in Cambridge**

This course on the management of congenital heart disease will cover pre- and post-operative care, atrioventricular septal defects, univentricular hearts, truncus arteriosus, total anomalous pulmonary venous drainage, atrial isomerism, interrupted aortic arch, pulmonary atresia with and without ventricular septal defect, tetralogy of Fallot, complete and corrected transposition, double outlet right ventricle and arrhythmias. The Director of Studies will be **Professor Fergus Macartney**, Vandervell Professor of Paediatric Cardiology, Institute of Child Health, University of London.

The course is intended for doctors with several years' experience in the field of paediatric cardiology or paediatric cardiac surgery.

Fee £690 (Residential), £405 (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 DAVIES STREET, LONDON W1Y 2AA.**



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