

Nizoral

TRADEMARK

ketoconazole

oral therapy for all common fungal infections

Vaginal candidosis:	In all dermatological and in systemic fungal infections:
2 tablets once daily (with food) for 5 days	1 tablet daily (with food) until complete symptomatic and mycological cure is obtained

Not all indications are as yet approved in all countries.

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.



Janssen Pharmaceutica
B-2340 Beerse, Belgium

STATISTICS AT SQUARE ONE

by T. D. V. SWINSCOW

from the British Medical Journal

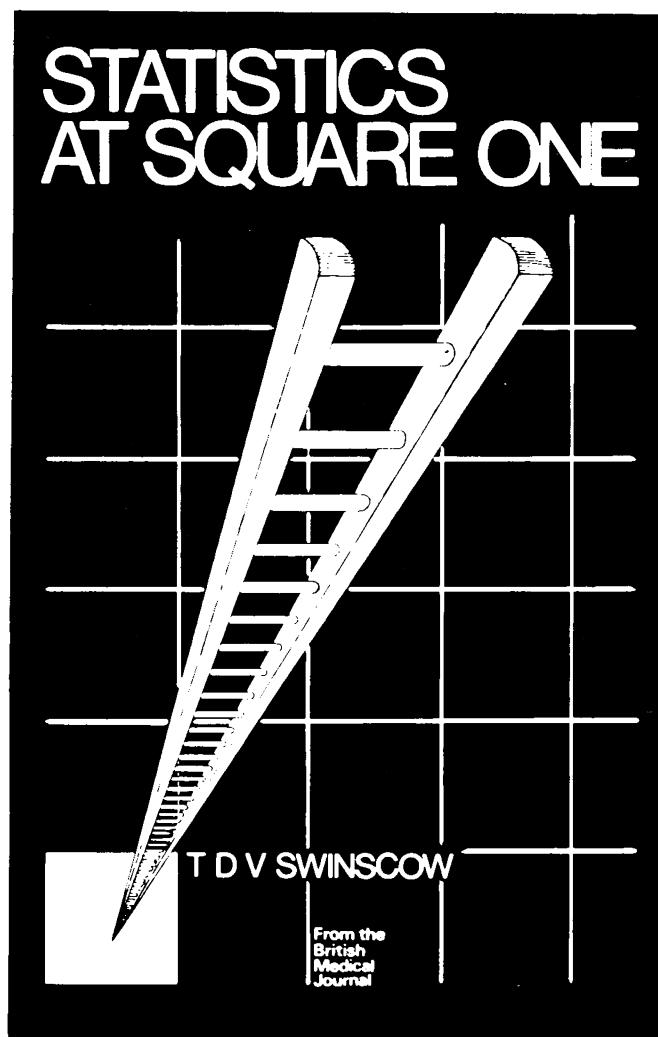
The statistical testing of data is indispensable in many types of medical investigation and a help on countless occasions in clinical practice. This book provides step-by-step instruction. Subjects covered include standard deviation, χ^2 tests, t tests, non-parametric tests and correlation. Methods specially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

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

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



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Prescribing Information

Uses Management of Diabetes mellitus.

Dosage and administration Dosage to be determined by the physician. Site of injection to be changed according to suitable routine. Avoid unintentional intravascular injection.

Neusulin, Soluble Insulin: Administered s.c., i.m. or i.v. S.c., onset of action within 30-60 minutes, duration 6-8 hours. I.m., onset is faster and duration is shorter. I.v. administration has fastest onset and shortest duration, usually reserved for investigational use or diabetic ketoacidosis.

Neuphane, Neulente: Administered s.c. or i.m. *Not to be given i.v.* S.c., onset of action within 2 hours, duration (Neuphane) 20-24 hours, duration (Neulente) 24-28 hours. I.m., onset is faster and duration shorter. Mix well by gently inverting the vial several times before use.

Mixing: Neusulin may be mixed in the syringe, on medical advice, with Neuphane or Neulente if required, *provided the mixture is injected immediately.* However, it is preferable to avoid mixing insulins of different pH.

See data sheet for procedure.

Contra-indications Hypoglycaemia.

Precautions Dosage requirement may alter with variation of lifestyle, infection, pregnancy and with change in species, type or purity of insulin.

Hypo- and hyperglycaemia may be enhanced by drugs which interact with insulin. Beta-blockers may affect insulin requirement and mask hypoglycaemia. MAO inhibitors may potentiate insulin.

Side-effects Hypoglycaemia. Possible altered visual refraction. Transient local reactions at the site of injection.

Storage Store at 2-8°C. *Do not freeze.* Avoid direct sunlight.

Presentation Neusulin, Neuphane and Neulente are available in strengths of 40 and 80 units per ml in vials of 10 ml.

Basic NHS costs

Neusulin		Neuphane	
40 units/ml	PL3/0137 £2.31	40 units/ml	PL3/0139 £2.31
80 units/ml	PL3/0138 £4.14	80 units/ml	PL3/0140 £4.47
Neulente			
40 units/ml	PL3/0141 £2.28		
80 units/ml	PL3/0142 £3.90		

Further information is available on request.

* Trade Mark

Wellcome Medical Division
The Wellcome Foundation Ltd, Crewe, Cheshire



Wellcome

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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ABC OF HYPERTENSION

Hypertension is a common disorder that is easily detected. But it may be deceptively simple: the measurement of blood pressure, interpretation of the results, and the decisions that follow need to be based on a comprehensive knowledge of recent advances.

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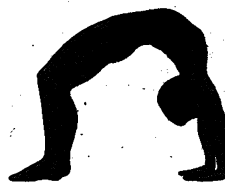
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Voltarol[®]

diclofenac sodium

for osteoarthritis

Presentation Tablets of 25 and 50mg diclofenac sodium; suppositories of 100mg diclofenac sodium. **Indications** Rheumatoid arthritis, osteoarthritis, low back pain and other acute musculo-skeletal disorders, ankylosing spondylitis, acute gout. **Dosage** Tablets: 75-150mg daily in two or three divided doses. **Suppositories**: one daily, usually at night. In more severe cases, combined therapy with tablets is recommended (daily dose should not exceed 150mg). **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. **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. **Contra-indications** Peptic ulceration; patients in whom attacks of asthma, urticaria or acute rhinitis are precipitated by aspirin or other NSAIDs. **Packs** Tablets 25mg (PL0001/0036) in packs of 100, basic NHS price £9.54; tablets 50mg (PL0001/0082) in packs of 100, £18.55; suppositories 100mg (PL0001/0083) in packs of 10, £3.16. Full prescribing information is available from Geigy Pharmaceuticals, Horsham, West Sussex.

Geigy