What's the difference between BM Test Glycemie 20–800 and other visually read blood glucose test strips?

Convenience for your patient:

1 **No need** to use a tap or wash bottle – just **wipe-off** the strip
(*Diabetes Care*, Vol.3, No.5, 1980, 640)

2 No need to worry about exact reading times
(*Lancet*, 1981, Vol.1, 53)

3 Used strips are stable and can be brought to you for checking results, technique and compliance
(*Diabetes Care*, Vol.4, No.3, 1981, 392-426)

Assurance for you:

4 You are confident your patient is checking blood glucose levels with a test-strip of ***proven*** CONVENIENCE, ACCURACY, SAFETY and STABILITY.
(*Lancet*, 1980, Vol.2, 823)

BCL
The Boehringer Corporation (London) Ltd.

Bell Lane, Lewes, East Sussex BN7 1LG

Septrin Assurance

Prescribing Information
Indications Sensitive bacterial infections of the lower respiratory, urinary and genital tracts, sinusitis, otitis media, skin infections, septicaemia, typhoid and para-typhoid fevers, and other infections caused by sensitive organisms.
Dosage Septrin Paediatric Suspension. Children 6-12 years: 10 ml twice daily. 6 months to 6 years: 5 ml twice daily. 6 weeks to 6 months: 2.5 ml twice daily. Septrin Paediatric Suspension may be diluted with Syrup BP. In acute infections Septrin should be given for at least five days or until the patient has been symptom-free for two days.
Contra-indications Septrin is contra-indicated in patients with marked liver parenchymal damage, blood dyscrasias or severe renal insufficiency. Septrin 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 Septrin 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.
Additional Information In the treatment of tonsillopharyngitis due to Group A beta-haemolytic streptococci, eradication of these organisms from the oropharynx is less rapid than with some other antibiotics.
Presentation Septrin Paediatric Suspension contains 40 mg Trimethoprim BP and 200 mg Sulphamethoxazole BP in each 5 ml.
Basic NHS cost £1.56 for 100 ml. PL3/5222.

Septrin* Paed. Susp. b.d.
co-trimoxazole

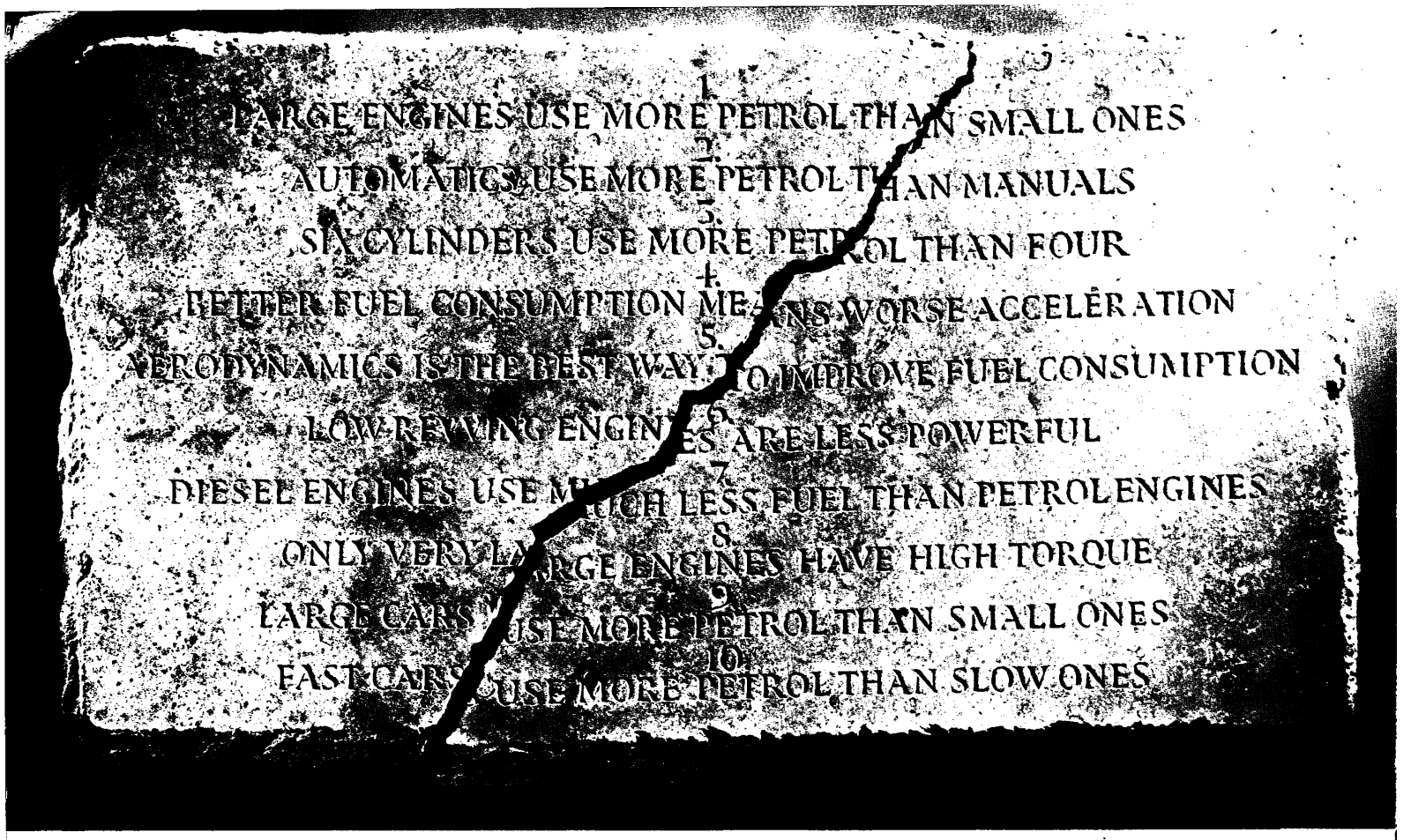
Further information is available on request.
Wellcome Medical Division
The Wellcome Foundation Ltd., Crewe, Cheshire
*Trade Mark

Wellcome

'Inderal' LA, once daily in hypertension and angina.

ICI INDERAL LA
Propranolol Hydrochloride BP
6230 Works a 24 hour day

Abridged prescribing information. Presentation: Long-action capsules each containing 160mg of propranolol hydrochloride BP. **Uses:** Control of hypertension. Management of angina, anxiety and essential tremor. Adjunctive management of thyrotoxicosis. Prophylaxis of migraine. **Dosage:** Adults: 1 or 2 capsules, once daily. Children: Not intended for use in children. **Contraindications:** Heart block. Bronchospasm. Prolonged fasting. Metabolic acidosis. Co-administration with verapamil. **Precautions:** Untreated cardiac failure. Bradycardia. Discontinuance of clonidine. Anaesthesia. Pregnancy. **Adverse Reactions:** Cold extremities, nausea, insomnia, lassitude and diarrhoea are usually transient. Isolated cases of paraesthesia of the hands; rashes and dry eyes have been reported with beta-blockers. Consider discontinuance if they occur. Beta-blockers should be withdrawn gradually. **Overdosage:** See data sheet. **Basic NHS cost:** 28 day calendar pack £6.66. **P.L. No:** 0029/0128 'Inderal' LA is a trademark for propranolol hydrochloride in a long-acting formulation.
Full prescribing information is available from: Imperial Chemical Industries PLC, Pharmaceuticals Division, Alderley House, Alderley Park, Macclesfield, Cheshire SK10 4TF.



BMW HAVE JUST RE-WRITTEN THEM ALL.

Above, the conventional wisdom of the car industry. A set of rules that can be summed up in one word: compromise.

Below, a car that owes little to convention and nothing to compromise: the revolutionary BMW 525e.

The 525e is a paradox on wheels. An automatic, executive saloon that gives you, on the one hand, exhilarating BMW acceleration, and on the other, fuel consumption figures that read like misprints.

(47.9mpg at a constant 56mph for example; a figure even diesels would be jealous of.)

This gain in both performance and efficiency has been achieved with the help of a BMW innovation called the eta engine.

The eta runs much more slowly than normal engines, which is how it stretches fuel. But it produces its maximum power much earlier, at engine speeds where most driving is done.

Which is why it responds so eagerly.

In the 525e the eta engine is teamed up with another BMW innovation – a four speed automatic gearbox that actually uses less fuel than a five speed manual.

It's a combination that finally lays to rest those time-honoured motoring "rules."

For example, it's no longer true that in order to shrink fuel consumption you have to shrink the engine.

The eta is a smooth running, 2.7 litre, six cylinder engine. Yet it uses less fuel than some engines of just 1.6 litres and four cylinders.

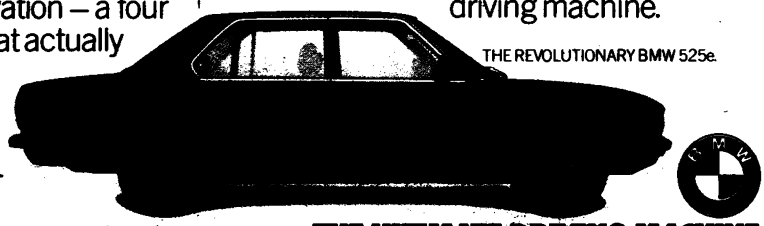
It's no longer true that an economic, low-revving engine leaves you short on power. At just 4,250rpm the eta generates a full-blooded 125bhp.

And it's certainly not true that aerodynamics is the biggest factor in saving fuel. In fact, wind resistance accounts for only 12% of a car's energy loss.

What does count is the engine. Which is why the 525e uses less fuel than the 2.2 litre automatic billed as the most aerodynamic production car in the world.

The 525e is also faster from 0-60 mph.

Which demonstrates the most important breakthrough of all: that fuel economy and driving pleasure need not be mutually exclusive. That a BMW designed for ultimate efficiency can still be the ultimate driving machine.



THE REVOLUTIONARY BMW 525e.

THE ULTIMATE DRIVING MACHINE

THE NEW 4 SPEED AUTOMATIC BMW 525e COSTS £11,495. DOE FUEL CONSUMPTION FIGURES: URBAN: 24.6 MPG, 56MPH: 47.9 MPG, 75MPH: 37.7MPG. THE 525e ABOVE SHOWN WITH OPTIONAL ALLOY WHEELS. PRICES CORRECT AT TIME OF GOING TO PRESS INCLUDE CAR TAX AND VAT BUT NOT DELIVERY OR NUMBER PLATES. INCLUSIVE DELIVERY CHARGE INCORPORATING BMW EMERGENCY SERVICE AND INITIAL SERVICES: £185 + VAT. FOR A BMW 525e. INFORMATION FILE, PLEASE WRITE TO: BMW INFORMATION SERVICE, PO BOX 46, HOUNSLOW, MIDDLESEX, OR TELEPHONE 01-897 6665 (LITERATURE REQUESTS ONLY).

AUGMENTIN

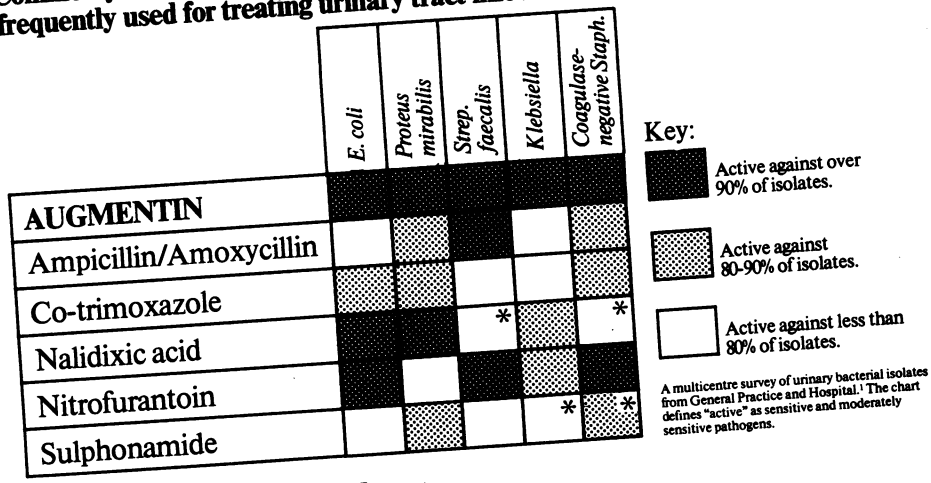
CLAVULANATE-POTENTIATED AMOXYCILLIN

Superiority confirmed in urinary tract infections.

Superior in Activity

Sensitivity studies have shown that Augmentin is active against more urinary pathogens than other commonly prescribed oral antibacterials, including co-trimoxazole.[1,2]

Commonly occurring urinary isolates and their sensitivity to antibacterials frequently used for treating urinary tract infections



A multicentre survey of urinary bacterial isolates from General Practice and Hospital.[1] The chart defines "active" as sensitive and moderately sensitive pathogens.

Superior Clinical Results

versus co-trimoxazole

	Good Response
AUGMENTIN	76%
Co-trimoxazole	67%

In a recent comparative trial[2] carried out in general practice, Augmentin and co-trimoxazole were compared for their efficacy in the treatment of urinary tract infections. So that the antibiotics can be accurately assessed against proven infections, only those patients who had pathogens isolated are included above.

versus amoxycillin

	Good Response
AUGMENTIN	97%
Amoxycillin	71%

In a second comparative trial[3] Augmentin and amoxycillin were compared for efficacy in urinary tract infections with the results above.

Overall, these superior clinical results indicate a clear role for Augmentin in the treatment of everyday urinary tract infections in general practice.

*Where an antibacterial was tested against less than 100 isolates of any particular bacterium it has been asterisked; these more limited results are included as they are thought to be clinically significant.

References

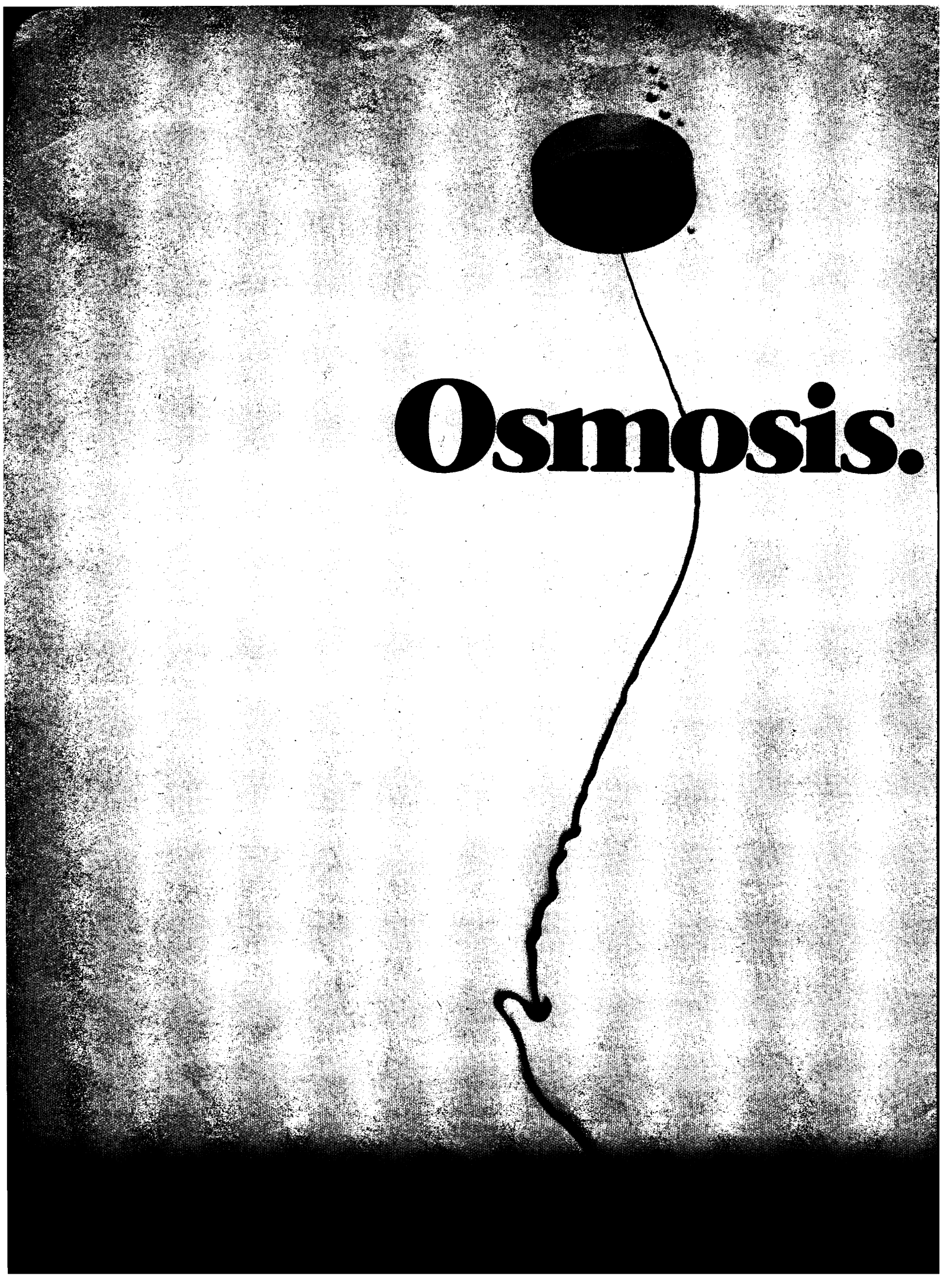
1. Further analysis of the data presented in summary form in: Proceedings of the First Augmentin Symposium. Rolinson, G.N. and Watson, A. (eds) Excerpta Medica, 1980, pp 173-183.
2. Davies, J.G., Rose, A.J., and Walker, G.D., A comparison of Augmentin and co-trimoxazole in the treatment of adult infections in general practice. Brit. J. Clin. Pract., 1982, **36**, (11/12), 387-393.
3. Levenstein, J.H., and Kritzinger, N.A., Proceedings of the Second Augmentin Symposium. Leigh, D.A., and Robinson, O.P.W. (eds) Excerpta Medica, 1981, pp 113-124.

Prescribing Information

Uses: Respiratory tract - Bronchitis, otitis media, upper respiratory tract infections. Genito-urinary tract infections. Skin and soft tissue infections. **Dosage: Adults and children over 12 years of age:** *One Augmentin or Augmentin Dispersible Tablet (375 mg) three times a day.* **Children 6-12 years:** *5 ml Augmentin Junior Suspension (187 mg) three times a day.* **Children 2-6 years:** *5 ml Augmentin Paediatric Suspension (156 mg) three times a day.* As a guide: Children over 21 kg should receive Augmentin Junior. In severe infections the above dosages may be doubled. For children under 2 years: see data sheet. Treatment with Augmentin should not be extended beyond 14 days without review. **Contra-indication:** Penicillin hypersensitivity. **Precautions:** Safety in human pregnancy is yet to be established, although high dose animal studies show no teratogenicity. Dosage need not be reduced in patients with renal impairment, unless the condition is severe enough to require dialysis. **Side-Effects:** These are uncommon and mainly of a mild and transitory nature and include diarrhoea, indigestion, nausea, vomiting and candidiasis. If gastro-intestinal side-effects occur they may be reduced by taking Augmentin at the start of meals. Erythematous and urticarial rashes sometimes occur but their incidence has been particularly low in clinical trials. Treatment should be discontinued if either type of rash appears. **Availability and Basic NHS Prices:** (Prices correct at time of printing). Augmentin Tablets and Dispersible Tablets, each containing potassium clavulanate (equivalent to 125 mg clavulanic acid) with amoxycillin trihydrate (equivalent to 250 mg amoxycillin). ▼ Augmentin Tablets (bottles of 30, 100). Cost per tablet - 29p. PL0038/0270. ▼ Augmentin Dispersible Tablets (foil wrapped 30, 90). Cost per tablet - 32½ p. PL0038/0272. ▼ Augmentin Junior Suspension. Powder to prepare 100 ml suspension. Each 5 ml contains potassium clavulanate equivalent to 62 mg clavulanic acid with amoxycillin trihydrate equivalent to 125 mg amoxycillin. PL0038/0274 (Price: 18p per 5 ml dose). ▼ Augmentin Paediatric Suspension. Powder to prepare 100 ml suspension. Each 5 ml contains potassium clavulanate equivalent to 31 mg clavulanic acid with amoxycillin trihydrate equivalent to 125 mg amoxycillin. PL0038/0298 (Price: 14p per 5 ml dose).

Further information is available on request from the Company. Augmentin and the BRL logo are trade marks. January 1983 BRL 9000

Beecham Research Laboratories
Brentford England


Osmosis.

The tablet.

OSMOSIN is the tablet that releases therapy only in solution.

Designed to deliver a constant flow of relief from pain, inflammation and stiffness.

With a precision and regularity that no other oral therapy can achieve.

OSMOSIN releases a solution gradually and consistently which is absorbed throughout the digestive system.

To help minimise GI and CNS side effects associated with conventional therapies.

One tablet daily will provide full 24-hour efficacy, for most patients.

OSMOSIN is the principle of osmosis in a tablet.

Osmosin™

sodium indomethacin trihydrate

Antiarthritic

FOR MOST ARTHRITICS

OSMOSIN: One tablet a day gives 24-hour relief.

OSMOSIN: Highly effective relief from pain, inflammation and stiffness.

OSMOSIN: Minimises GI and CNS side effects.

℞ Osmosin daily (30)
1

Abridged Product Information.
Full prescribing information is available on request and should be consulted before prescribing.
INDICATIONS Osteoarthritis; rheumatoid arthritis; ankylosing spondylitis; acute musculo-skeletal disorders and low back pain. Pain and associated symptoms of primary dysmenorrhoea.
DOSAGE Usually one daily. If required one twice daily, take whole (do not chew or crush) and take with food or immediately after a meal. The maximum dose is two per day.
CONTRA-INDICATIONS Active peptic ulcer, history of gastro-intestinal lesions, sensitivity to indomethacin or other non-steroidal anti-inflammatory agents, children, lactating women, and pregnancy.
PRECAUTIONS If GI symptoms occur, weigh benefits against risks of continuing. If GI bleeding occurs discontinue OSMOSIN. May mask the signs and symptoms of infection. Use cautiously in the elderly and in patients with a history of psychiatric disorders, epilepsy or parkinsonism. Monitor the prothrombin time when adding OSMOSIN to the treatment of patients on anticoagulants. Interactions: aspirin, probenecid, lithium, frusemide, thiazides, beta-blockers.
SIDE EFFECTS OSMOSIN is usually well tolerated. GI symptoms including nausea, dyspepsia, are most common. Isolated cases of peptic ulcer and bleeding have been reported with indomethacin as have hepatic CVS, and renal effects. CNS symptoms including headache, dizziness, rarely hypersensitivity (including skin rashes) and haematological reactions; ocular changes including blurred vision and corneal deposits have occurred.
BASIC NHS COST Each OSMOSIN Tablet is blue, coded 'OSMOSIN' and contains 100 mg sodium indomethacin trihydrate. Pack of 30 – Basic NHS price £10.80.
Product licence number: 0025/0148 Product authorisation number: 35/59/1
Issued November 1982
TM denotes trademark.

MSD MERCK SHARP DOHME

Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire, EN11 9BU

Osmosin™

sodium indomethacin trihydrate

Antiarthritic

The shape of nutrition

A range of nutritionally balanced, complete tube feeds, ready-to-use, in 500ml bottles.

Cow & Gate Limited, Clinical Products Division, Cow & Gate House, Trowbridge, Wiltshire. BA14 8YX

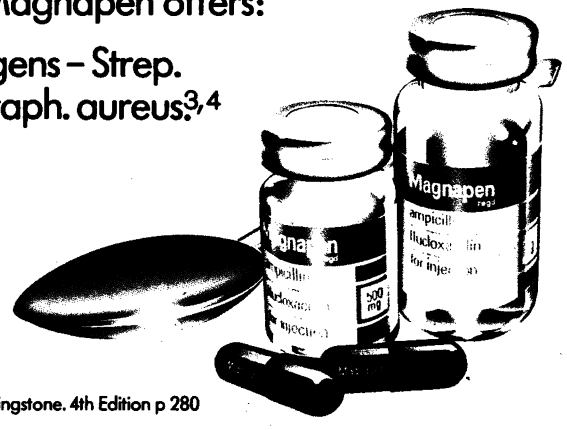
Magnapen

ampicillin/flucloxacillin

Reliable broad-spectrum cover for the patient at risk.

Throughout the management of surgical patients, Magnapen offers:

- Decisive, bactericidal action against relevant pathogens – Strep. viridans,[1] H. influenzae,[2] and virtually all strains of Staph. aureus.[3,4]
- High blood levels and excellent tissue penetration.[5]
- The acknowledged safety of penicillin.
- Oral and parenteral forms – now including 1g vial for added convenience and dosage flexibility.



1. Zbl. Bakt. Hyg. I. Abt. Orig. A., (1976) **236** 235 2. Antibiotic and Chemotherapy (1973) Publ Churchill Livingstone. 4th Edition p 280
3. Brit. med. J. (1978) **2** 536 4. Brit. med. J. (1978) **1** 1679 5. Brit. J. clin. Pharmac. (1978) **6** 135

BRL 2029

Prescribing information

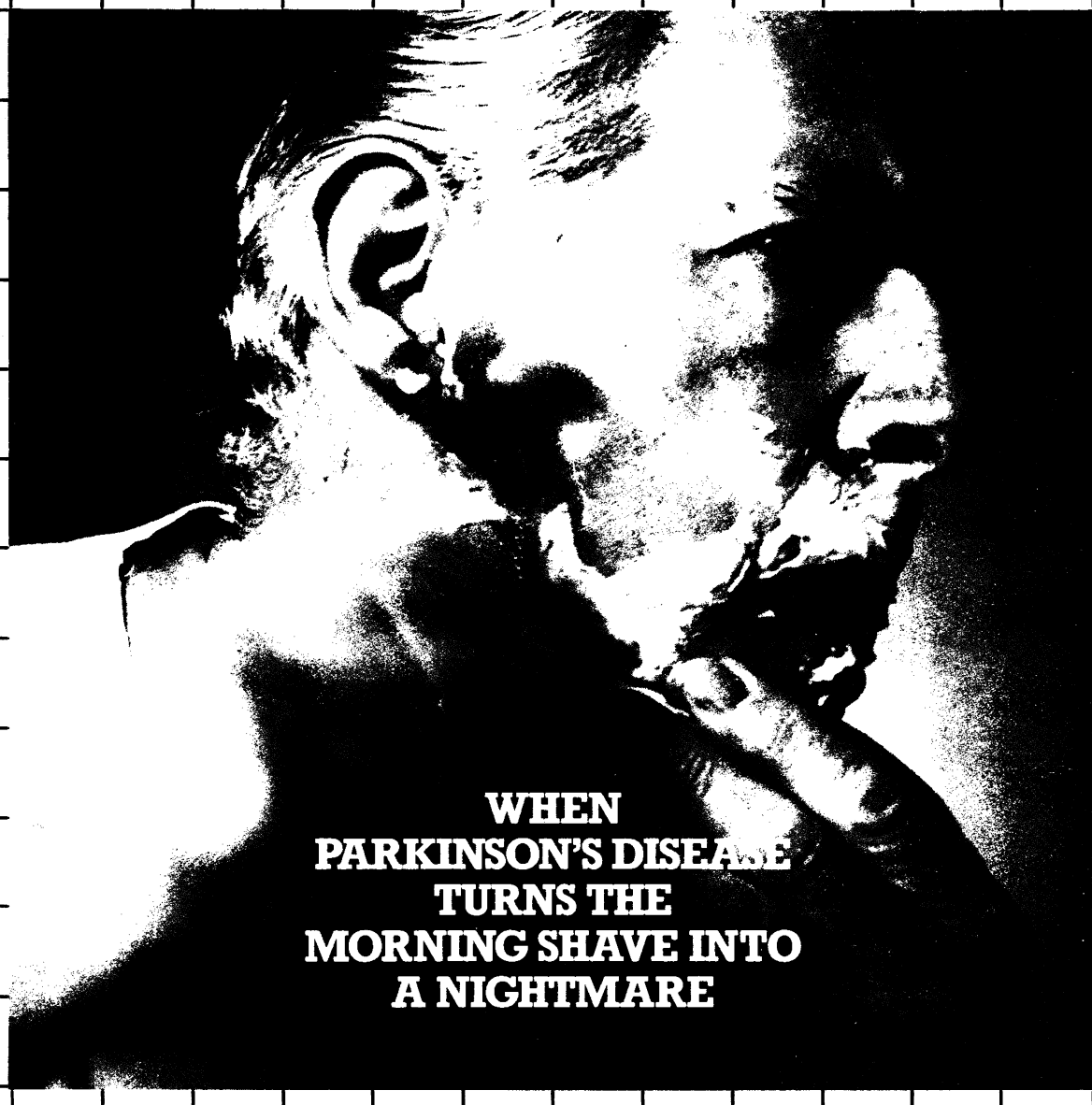
Uses: Severe infections. Post-operative chest and wound infections. Prophylaxis in major surgery.
Usual Adult Dosage: Oral: 500mg-1g q.i.d., ½-1 hour before meals. **I.M.:** 500mg q.i.d., dissolved in 1.5ml Water for Injections B.P. or 1g q.i.d., dissolved in 2ml Water for Injections B.P. **I.V. (Injection):** 500mg q.i.d., dissolved in 10ml Water for Injections B.P. or 1g q.i.d., dissolved in 20ml Water for Injections B.P. Administer by slow intravenous injection (3-4 minutes). **I.V. (Infusion):** Magnapen injection may be added to infusion fluids or injected, suitably diluted, into the drip tube over a period of 3-4 minutes. Magnapen solutions for injection should be used immediately. Magnapen may be added to most intravenous fluids but should not be mixed with blood products or other protein-aceous fluids (e.g. protein hydrolysates). In intravenous solutions containing dextrose or other carbohydrates Magnapen should be infused within 2 hrs.
Usual Children's Dosage: 2-10 years: ½ adult dose. Under 2 years: ¼ adult dose. (Ampiclox Neonatal is recommended for the treatment of neonates and premature babies. PL 0038/5001, 5009.)
Side-effects: As with other penicillins. An erythematous rash may occasionally occur, as with ampicillin. The incidence of this rash is particularly high in patients with infectious mononucleosis. If a rash is reported it is advisable to discontinue treatment.
Contra-indications: Penicillin hypersensitivity; ocular administration.

Availability and Basic NHS Prices
(Correct at February 1981)
CAPSULES 500mg £4.22 for 20
SYRUP 125mg/5ml £3.51 for 100ml. VIALS 500mg 98p each
1g £1.97 each

Favourable Hospital Rates are available from the Company. Further information on Magnapen and a Data Sheet are available on request to the Company.

Magnapen (ampicillin with flucloxacillin in equal parts) is a product of

Beecham Research Laboratories
Brentford, England.
PL 0038/0089, 0090, 0120.



WHEN
PARKINSON'S DISEASE
TURNS THE
MORNING SHAVE INTO
A NIGHTMARE

EARLY TREATMENT WITH

SINEMET-Plus®

Carbidopa 25 mg and
levodopa 100 mg, MSD

HELPS RESTORE THE THREAD OF LIFE

For abridged product information see overleaf

MSD MERCK SHARP DOHME Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire, EN11 9BU

3.84.SEM.83.GB.9010.J

SINEMET®

Carbidopa and levodopa, MSD

ABRIDGED PRODUCT INFORMATION

Full prescribing information is available on request and should be consulted before prescribing.

Indications

Parkinson's disease and syndrome.

Dosage and administration

Dosage variable.

Patients not receiving levodopa

Usually 1 tablet of 'Sinemet-Plus' three times a day. Adjust as necessary. Maximum daily dose is 8 tablets. If more levodopa required, substitute 'Sinemet'-275, 1 tablet three or four times a day. If further titration needed, increase 'Sinemet'-275 to maximum 8 tablets a day.

Patients receiving levodopa

Discontinue levodopa at least twelve hours (24 hours for slow-release preparations) before starting 'Sinemet.' Dose of 'Sinemet' approximately 20% of previous daily dosage of levodopa.

Usual starting dose 'Sinemet'-275 1 tablet three or four times a day. Patients requiring less than 1,500 mg levodopa a day start with 'Sinemet-Plus' 1 tablet three or four times a day. Maximum is 8 tablets a day.

Contra-indications

Narrow-angle glaucoma; known hypersensitivity. Do not use in patients with history of melanoma or with suspicious undiagnosed skin lesions. Discontinue MAO inhibitors at least two weeks before starting 'Sinemet.'

Pregnancy and lactation

Not recommended in lactating mothers. Use in women of childbearing potential requires that anticipated benefits be weighed against possible hazards should pregnancy occur.

Precautions

Not recommended for drug-induced Parkinsonism. Use cautiously in patients with severe cardiovascular or pulmonary disease, bronchial asthma, renal, hepatic, endocrine disease, psychoses, chronic wide-angle glaucoma, with a history of myocardial infarction; and when receiving antihypertensives (adjust dosage if necessary). Monitor carefully for mental changes, depression with suicidal tendencies, and other serious antisocial behaviour. Observe carefully patients with history of severe involuntary movements or psychoses when 'Sinemet' substituted for levodopa.

GI haemorrhage may occur in patients with history of peptic ulcer.

If general anaesthesia is required, 'Sinemet' may be continued whilst patient permitted oral intake. Usual daily dosage may be given when oral medication is possible.

Transient abnormalities in renal function tests, liver function tests, and protein-bound iodine may occur without evidence of disease.

Not recommended for children under 18 years of age.

Side effects

Choreiform, dystonic, and other involuntary movements are most common. Other mental changes are less common.

Less frequent are cardiovascular irregularities, the 'on-off' phenomenon, GI intolerance, and dizziness.

Rarely, GI bleeding, duodenal ulcer, hypertension, phlebitis, leucopenia, and agranulocytosis.

Positive Coombs test reported but haemolytic anaemia extremely rare.

Other side effects include psychiatric, neurological, GI, dermatological, respiratory, urogenital, special senses, hot flushes, weight gain or loss, and abnormalities in laboratory tests.

Basic NHS cost

'Sinemet-Plus' (25 mg carbidopa/100 mg levodopa BP) tablets £13.07 per 100 pack;

'Sinemet'-275 (25 mg carbidopa/250 mg levodopa BP) tablets £14.89 per 100 pack;

'Sinemet'-110 (10 mg carbidopa/100 mg levodopa BP) tablets £7.70 per 100 pack.

Product licence numbers

'Sinemet-Plus,' 0025/0150

'Sinemet'-275, 0025/0085

'Sinemet'-110, 0025/0084

® denotes registered trademark

™ denotes trademark

Issued April 1983

MSD MERCK SHARP DOHME

Merck Sharp & Dohme Limited
Hoddesdon, Hertfordshire, EN11 9BU

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Bringing patient information management into the microelectronic age.

MicroMed is a range of microcomputer based patient information systems specifically for hospital specialists. It offers the following advantages:

- Cuts time spent on administration, to make time for patient care.
- Makes thorough analysis of patient data a practical reality.
- Full word processing facility.
- Comprehensive and reliable.
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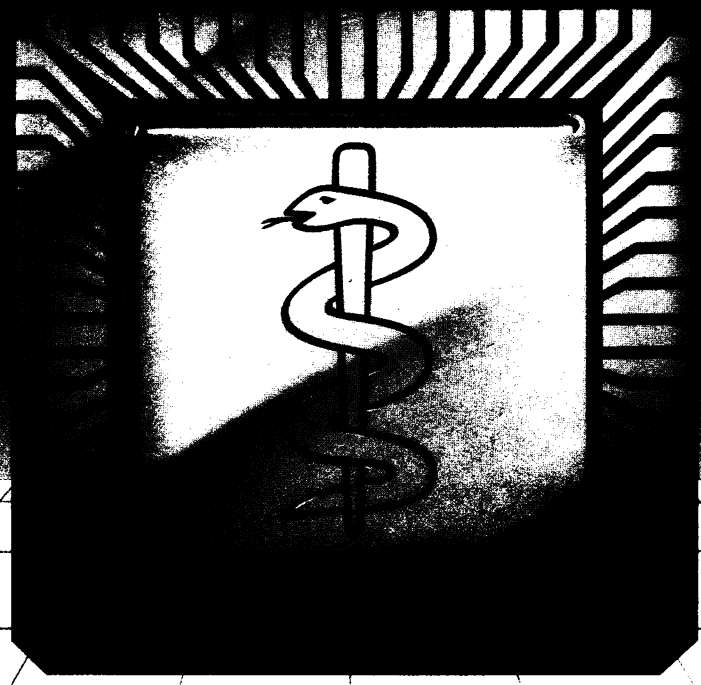
- Economic to purchase.



NEW **MICRO MED***

Microcomputer based patient information systems specifically for hospital specialists.

MICROMED SURGICAL AUDIT for General Surgeons

MICROMED ENDOSCOP for Gastrointestinal specialists.

When otitis media is a recurring problem

Ceporex rapidly penetrates to the site of infection and swiftly eradicates the pathogens, reducing pain and the risk of irreversible tissue damage, which could result in permanent hearing loss.

CEPOREX

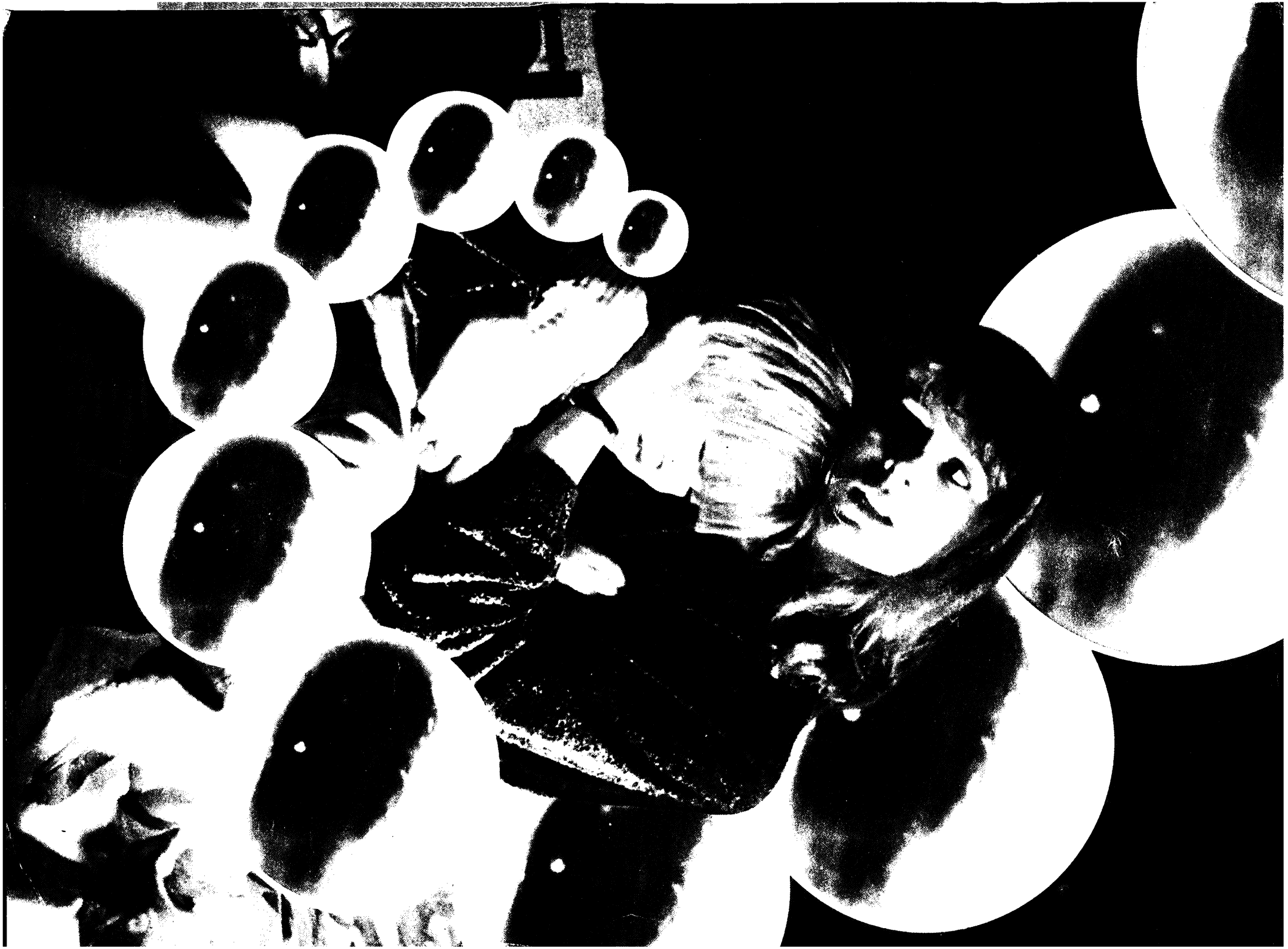
(cephalexin)

penetrates fast to eradicate infection

Prescribing information. Indications Infections of the respiratory tract; ear, nose and throat; urinary tract; skin and soft-tissue. **Usual dosage** Children 1-5 years: 125mg t.d.s. Children over 5 years: 250mg t.d.s. Adults: 500mg t.d.s. **Contra-indications** Hypersensitivity to cephalosporins. **Precautions** Ceporex is usually well-tolerated by patients allergic to penicillin, but cross-reaction has been encountered rarely. Reduce dosage when renal function is markedly impaired. As with all drugs, cephalexin should be administered with caution during the early months of pregnancy. Cephalexin does not interfere with enzyme-based tests for glycosuria. Cephalosporins interfere with tests for glycosuria which use copper or ferricyanide reduction methods and with the alkaline picrate assay for creatinine. **Side effects** A few patients experience gastro-intestinal disturbances such as nausea, vomiting and diarrhoea. As with other broad-spectrum antibiotics overgrowth of commensal organisms can occur, and may present as vulvo-vaginitis. Reversible neutropenia has occurred, but rarely. Drug rashes are uncommon. **Overdosage** Serum levels of cephalexin can be reduced greatly by peritoneal dialysis or haemodialysis. **Product Licence numbers** Tablets and Capsules 4/5046-7.4/5041-2 Syrup and Paediatric Drops 4/5043-4-5 Suspension 4/0268-9. Treatment cost per day: 3 x 125mg/5ml doses of syrup = 22p, 3 x 250mg/5ml doses of syrup = 43p, 3 x 500mg capsules/tablets ex 500 pack = 80p.

Glaxo

Further information on Ceporex (trade mark) is available from: Glaxo Laboratories Limited, Greenford, Middlesex UB6 0HE



A new steroid for the treatment of moderate and severe asthma.

Pulmicort is a new highly-effective inhaled steroid for use in moderate and severe asthma. It is rapidly metabolised[1], thus reducing the risk of systemic side-effects.[2]

Pulmicort is delivered via a novel Spacer device (collapsible for convenience) which ensures that more steroid reaches the site of action in the conducting airways,[3] and may reduce the risk of oral candidiasis.[4]

Pulmicort is available in two strengths, Pulmicort Inhaler (200μg/puff) and Pulmicort paediatric Inhaler (50μg/puff).

Both presentations have a simple and convenient b.d. dosage regimen.

Abridged Prescribing Information:
Uses:
Dose and Administration:
Adults
Children
Contra-indications, warnings, etc:
Precautions:
Side effects:
Legal category:
Presentations:
Licence number:
References
1.
2.
3.
4.

Pulmicort® b.d.

budesonide

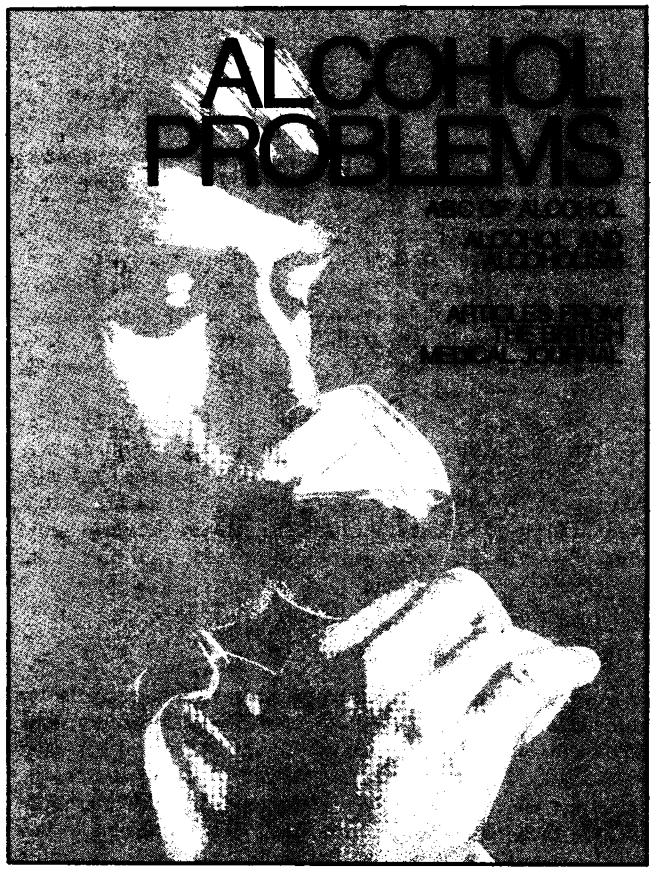
More impact on the lungs less on the throat.

Astra Pharmaceuticals Ltd., St. Peter's House, 2 Bricket Road, St Albans, Herts. AL1 3JW.

ASTRA

ALCOHOL PROBLEMS

In recent years alcohol problems have increased dramatically and the thinking on them has undergone a revolution. Alcohol Problems brings together two series of articles published in the *BMJ*—the ABC of Alcohol, with its emphasis on straightforward advice for the clinician, and Alcohol and Alcoholism, Dr Richard Smith's more discursive survey of current thinking and controversies. Together they cover both the clinical aspects of managing alcohol problems and the social and political factors that surround them.



Price: Inland £5.00
Overseas US$17.50*
(Inland £3.75; Overseas US$14.50* for BMA members)

**including air mail postage*

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". . . a good account of the right kinds of observations to make in order to detect people with alcohol problems . . . These articles are succinct and well written and provide the best source of information and reference for general practitioners and trainees. This is an outstanding series which will be of great value to everyone concerned with the prevention, identification and management of alcohol-related problems."
Update 1983; **26:** 301

"This excellent book divided into two very different parts. The first is . . . easy to read but packed with useful facts, well-illustrated . . . The second section of articles by Richard Smith are a bonus. They are well worth reading and excellently referenced . . . Every postgraduate centre should have several copies."
Postgrad Med J 1983; **59:** 401

Gastrozepin is a selective antimuscarinic agent which provides balanced control of gastric secretion without markedly affecting other peripheral receptor sites. This gastro-selective action means that, in practice, Gastrozepin is a well-tolerated drug which heals peptic ulcers.

Gastrozepin DOES NOT . . .
- **rely on acid reduction alone**
- **rely on pepsin reduction alone**
- **rely on mucosal protection alone**
- **profoundly affect intragastric pH**

Gastrozepin DOES . . .
- **relieve daytime pain**
- **relieve night-time pain**
- **reduce antacid intake**
- **heal peptic ulcers with one 50 mg tablet b.d.**

NEW FROM BOOTS
For the treatment of peptic ulcer
Twice daily
GASTRO SELECTIVE
Gastrozepin®
pirenzepine

Prescribing Information; Presentation: White tablets each containing 50 mg of pirenzepine dihydrochloride scored on one face with "G" on one side of the score, and "50" on the other. The obverse is impressed with the symbol ℞ **Uses:** Gastrozepin is indicated in the treatment of gastric and duodenal ulcers. **Dosage:** 50 mg at bedtime and in the morning before meals. In severe cases the total daily dose may be increased to 150 mg in divided doses. Continuous therapy may be recommended for up to three months. **Contra-indications, Warnings etc:** Interaction with sympathomimetics and monoamine oxidase inhibitors and Gastrozepin is a theoretical possibility. Gastrozepin is not recommended during pregnancy although in animal experiments no teratogenic effects were noted. Breast milk concentration after therapeutic doses is unlikely to affect the infant. *Side effects:* occasionally transitory dry mouth and accommodation difficulty may occur. Treatment of overdosage: entirely symptomatic. There is no specific antidote. **Basic NHS price:** 50 mg tablets, 60 £20.50. **Product Licence No:** 50 mg tablets, PL0014/0260.

℞ Further information is available on request
The Boots Company PLC,Nottingham

Gastrozepin® Trade Mark

ELANTAN®

isosorbide mononitrate

Now b. d. dosage with the 20 or 40 mg tablet

PREDICTABLY

THE FIRST CHOICE ORAL NITRATE

LONG ACTING NITRATE WITH ZERO FIRST PASS METABOLISM

Further information is available from:

SANOL SCHWARZ

Sanol Schwarz Pharmaceuticals Limited,
The Limes, 130 High Street, Chesham HP5 1EF. Tel: (0494) 772071. Telex: 837252.

PRESCRIBING INFORMATION

Presentations: White tablets with break score, containing isosorbide mononitrate. The tablets are available in two strengths; Elantan 20 (marked E20) containing isosorbide mononitrate 20mg and Elantan 40 (marked E40) containing isosorbide mononitrate 40mg. **Use:** Prophylaxis of angina pectoris. **Dosage and Administration:** The tablets should be taken unchewed with a little water after meals. Elantan 20: One tablet to be taken two or three times a day. Elantan 40: One tablet to be taken twice a day. The dosage may be increased up to 120 mg/day. **Contra-indications, warnings, etc.:** Elantan should not be used in cases of acute myocardial infarction with low filling pressures; acute circulatory failure (shock, vascular collapse); very low blood pressure. The drug should dose in patients with liable circulation: nitrate headache may also occur. Both symptoms can be largely avoided if the treatment is started with a lower dose of Elantan initially. Reaction capacity may be reduced if alcohol is consumed during treatment. **Pharmaceutical precautions:** Store in a cool dry place. **Legal category:** POM **Package quantities:** Elantan 20 is blister packed in cartons of 50 and 100 tablets. Elantan 40 is blister packed in cartons of 50 tablets. **Basic NHS cost:** Elantan 20: 50 tablets £4.45. 100 tablets £8.42. Elantan 40: 50 tablets £7.25. Special hospital prices available on request. **Further information:** Isosorbide mononitrate is the British approved name for isosorbide 5-mononitrate. **Product Licence Numbers:** Elantan 20: 4438/0005. Elantan 40:

BRITISH MEDICAL JOURNAL
EUROPEAN ASSOCIATION OF SCIENCE EDITORS

EDITING A MEDICAL JOURNAL:
a workshop for editors of medical journals

to be held on 27/28 October 1983
at the Mansion Hotel, Grand Parade, Eastbourne, East Sussex BN21 3YS

Programme

Thursday 27 October 1983

1530	Registration and tea
1555	Introduction, Dr Stephen Lock (editor, *BMJ*)
1600	What others are up to: reports from meetings of the Vancouver Group and the joint editors' conference in Philadelphia
1620	What I dislike about journals: a librarian's view, Mr S Jenkins (reader services librarian, Birmingham Medical School Library)
1730-1900	Workshops*

Friday 28 October 1983

0900	The business aspects of publishing a journal, Ms Gillian Page (Pageant Press)
1015	Coffee
1035-1205	Workshops*
1245	Lunch
1400	A computer system in the editorial office, Ms Jane Smith (staff editor, *BMJ*)
1500	Editing a multiauthor textbook, Dr John Ledingham (coeditor, *Oxford Textbook of Medicine*)
1615	Tea and Conference ends
[1700	The visual presentation of data, Mr Doig Simmonds (medical artist, Royal Postgraduate Medical School)—*see below*]

*The workshops will be on: The ethics of editing a medical journal (led by Dr Stephen Lock); New Technology (led by Dr H de Glanville); Editorial boards (led by Professor G Slavin and Dr R Grahame)

Eastbourne, on the south coast of England, is about 1½ hours from London by train. It is a pleasant resort with some fine late Georgian seaside architecture. The fee of £75 (£70 for BMA and EASE members) includes a single room and all meals. Participants at this conference are most welcome to attend the first talk of the next conference by Mr Doig Simmonds on the visual presentation of data. Applications, including the fee (cheques made payable to the *British Medical Journal*) should be sent to the Editor, *British Medical Journal*, BMA House, Tavistock Square, London WC1H 9JR.

The visual presentation of data in medical journals

28/29 October 1983

A meeting for scientific editors of medical journals on presenting data will be held from 1700 on 28 October to 1600 on 29 October 1983, at the Mansion Hotel, Grand Parade, Eastbourne, East Sussex BN21 3YS. It will be conducted by Mr Doig Simmonds (medical artist, Royal Postgraduate Medical School) and will start with a talk on Thursday evening on the general principles of presenting data visually. It will continue on Saturday with a series of seminars, including practical demonstrations, on faults in tables and illustrations and on what editors can do to prevent and rectify them. Participants will have an opportunity to do some practical illustration work themselves. Numbers will be limited.

The fee of £70 (£65 for members of the BMA or EASE) includes a single room and all meals. A special rate of £130 (£125 for members of the BMA or EASE) is available for editors attending both the conference on the visual presentation of data and the editing conference on 27/28 October. Applications, including the fee (cheques made payable to the *British Medical Journal*) should be sent to the Editor, *British Medical Journal*, BMA House, Tavistock Square, London WC1H 9JR.

Publication date 27 June 1983

ABC OF HEALTHY TRAVEL

With more people travelling abroad each year the health problems of travellers, both abroad and on their return, assume increasing importance. Travellers may be at hazard from the environment, their lifestyles, and their lack of familiarity with foreign customs. Doctors need to be able to advise their travelling patients and to be aware of the – sometimes potentially serious – infections that may not become apparent until the traveller has returned home. In the recent ABC of Healthy Travel on the *BMJ* Dr Eric Walker and Dr Glyn Williams described the problems facing the traveller, the immunisations he needs, the infections he may bring home; suggested ways of preventing and treating illness abroad; listed sources of up to date information; and reviewed recent advice on malaria prophylaxis. These articles have been collected into a book to provide the busy practitioner with a practical guide to advising travellers and managing their illnesses.

Price: Inland £3.50
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Overseas US$10.75* to
BMA members)
**including air mail postage*

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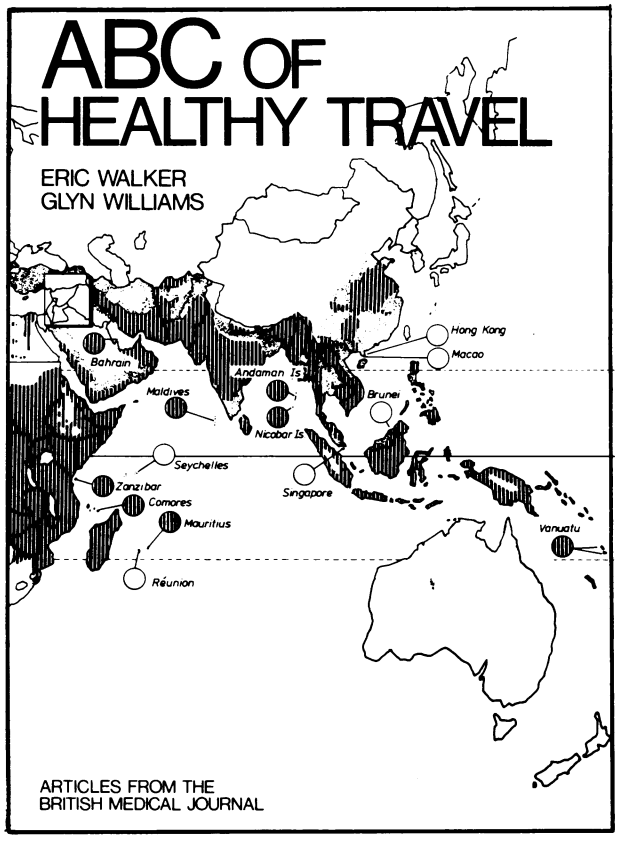

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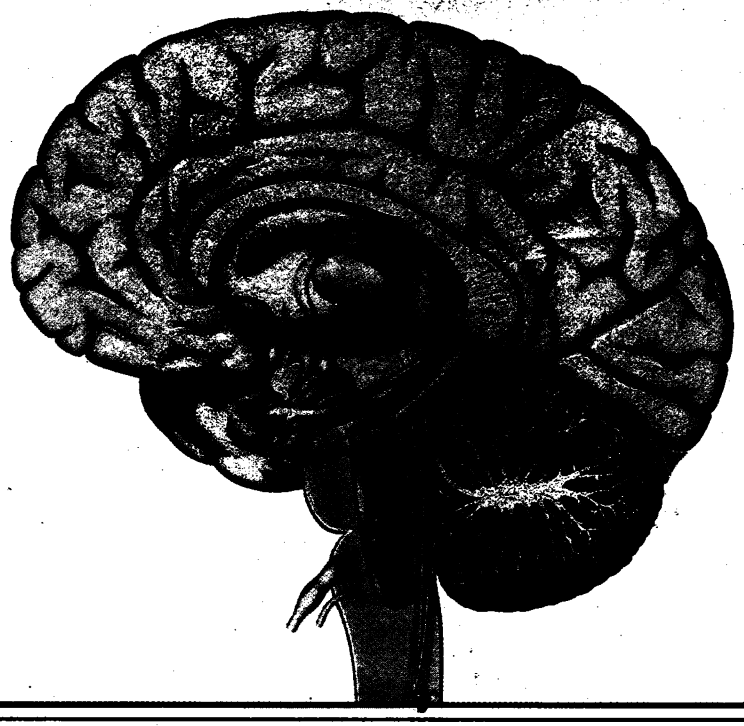

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Motilium*, a potent peripherally acting dopamine antagonist, achieves a high degree of efficacy through a dual mode of action.

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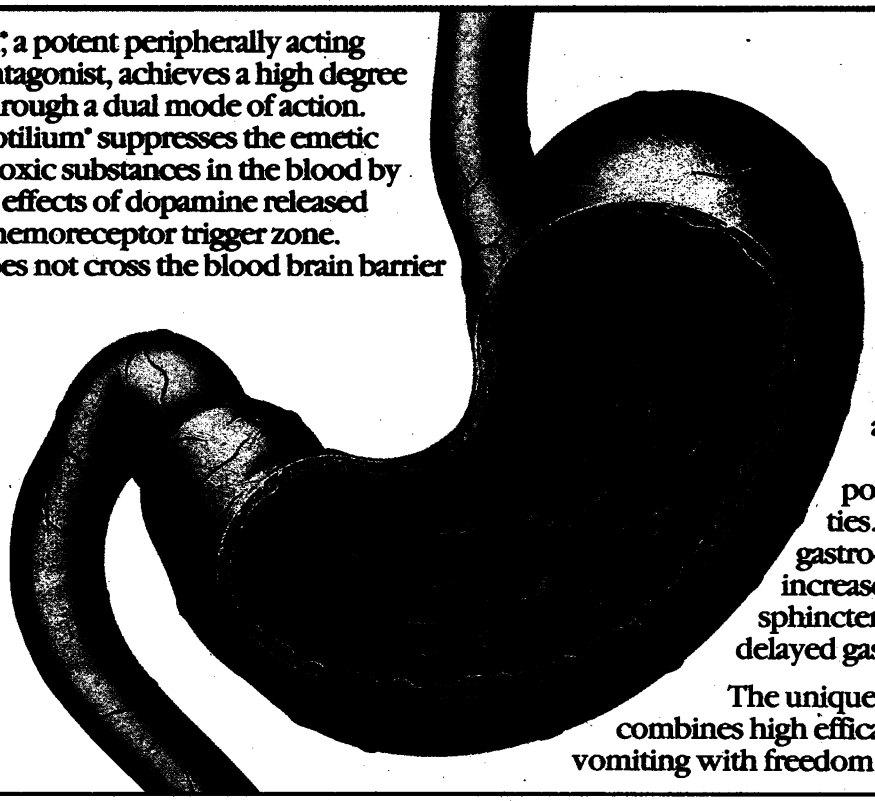
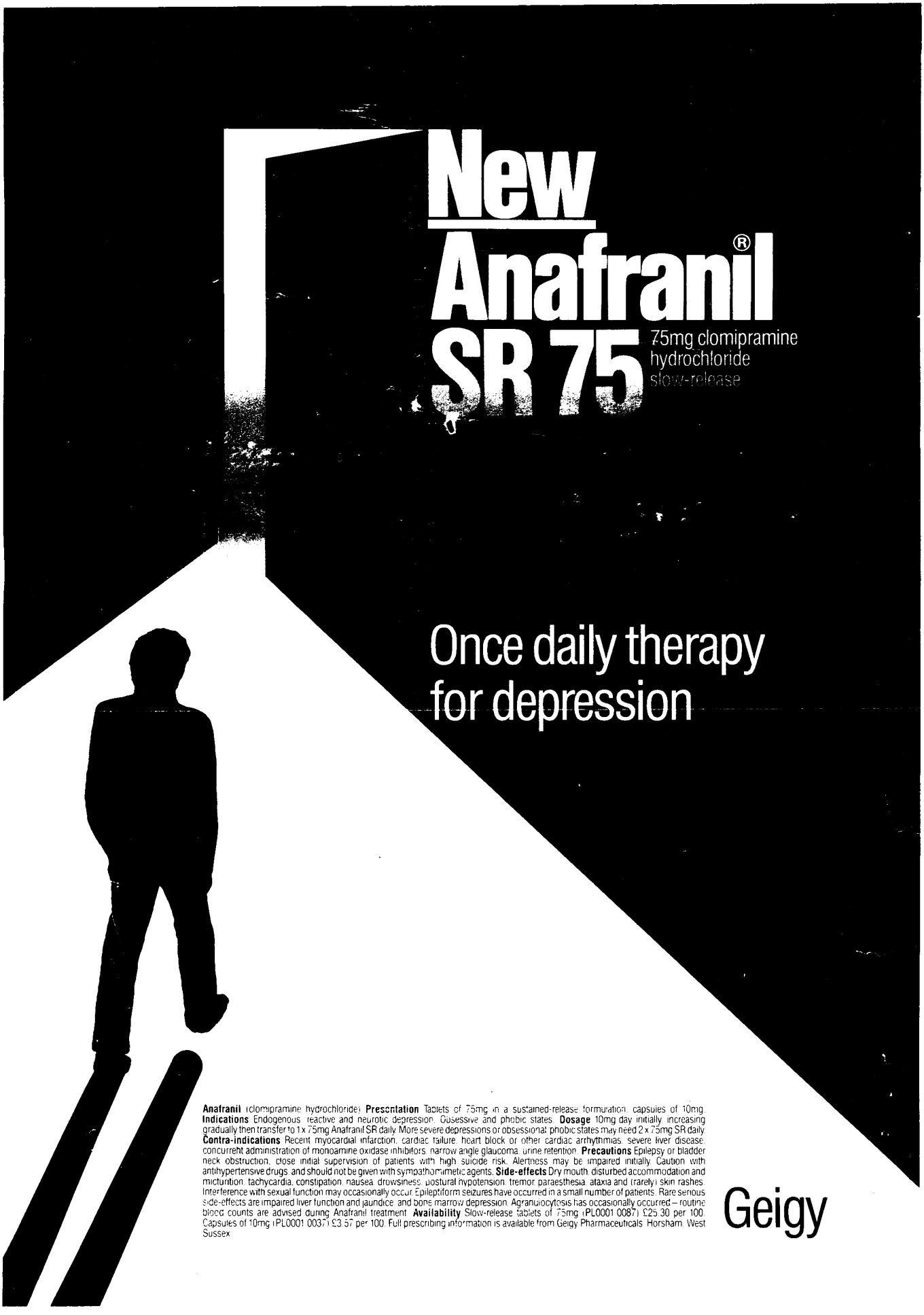


Secondly Motilium* possesses gastrokinetic properties. Acting locally on the upper gastro-intestinal tract Motilium* increases lower oesophageal sphincter pressure and improves delayed gastric emptying.

The unique mode of action of Motilium* combines high efficacy in controlling nausea and vomiting with freedom from central side effects.

MOTILIUM* Prescribing Information ▼ Presentation White tablets containing 10mg domperidone. 2ml colourless ampoules, each containing 5mg/ml domperidone. **Uses** Adults: acute nausea and vomiting from any cause. Children: nausea and vomiting following cancer chemotherapy or irradiation only. **Dosage** Adults: 1-2 tablets by mouth or 1-2 ampoules by IM or IV injection at 4-8 hourly intervals. Children: 0.2-0.4mg/kg by mouth or injection at 4-8 hourly intervals. Patients requiring intravenous MOTILIUM* who are also receiving concomitant cytotoxic chemotherapy or who are predisposed to hypokalaemia or cardiac arrhythmias should receive an infusion diluted 1:10 with saline over 15-30 minutes. **Contra-indications, Warnings etc.** No specific contra-indications. MOTILIUM* produces a rise in serum prolactin; however the clinical relevance of this has not been established. Although no teratogenic effects have been observed in animals, the safety of MOTILIUM* in pregnancy has not yet been established. **Product Licence Numbers** Tablets 0242/0071 Injection 0242/0073. **Basic NHS Cost** Pack of 100 tablets: £11.00 Pack of 10 ampoules: £3.10. (Correct at time of printing.)

Further information is available from:- Janssen Pharmaceutical Limited, Janssen House, Chapel Street, Marlow, Bucks. SL7 1ET *Trademark



Anafranil (clomipramine hydrochloride) **Presentation** Tablets of 75mg in a sustained-release formulation, capsules of 10mg. **Indications** Endogenous, reactive and neurotic depression. Obsessive and phobic states. **Dosage** 10mg day initially, increasing gradually then transfer to 1 x 75mg Anafranil SR daily. More severe depressions or obsessional phobic states may need 2 x 75mg SR daily. **Contra-indications** Recent myocardial infarction, cardiac failure, heart block or other cardiac arrhythmias, severe liver disease, concurrent administration of monoamine oxidase inhibitors, narrow angle glaucoma, urine retention. **Precautions** Epilepsy or bladder neck obstruction, close initial supervision of patients with high suicide risk. Alertness may be impaired initially. Caution with antihypertensive drugs, and should not be given with sympathomimetic agents. **Side-effects** Dry mouth, disturbed accommodation and micturition, tachycardia, constipation, nausea, drowsiness, postural hypotension, tremor, paraesthesia, ataxia and (rarely) skin rashes. Interference with sexual function may occasionally occur. Epileptiform seizures have occurred in a small number of patients. Rare serious side-effects are impaired liver function and jaundice, and bone marrow depression. Agranulocytosis has occasionally occurred – routine blood counts are advised during Anafranil treatment. **Availability** Slow-release tablets of 75mg (PL0001 0087) £25.30 per 100. Capsules of 10mg (PL0001 0037) £3.57 per 100. Full prescribing information is available from Geigy Pharmaceuticals, Horsham, West Sussex.

Geigy