### ketoconazole

# therapy nfec

Vaginal candidosis:	In all dermatological and in systemic fungal infections:
2 tablets	1 tablet daily

once daily (with food) for 5 days

(with food) until complete sympto-matic and mycological cure is obtained

Not all indications are as yet approved in all countries.

PRESCRIBING INFORMATION

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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, 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, 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 Toer 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

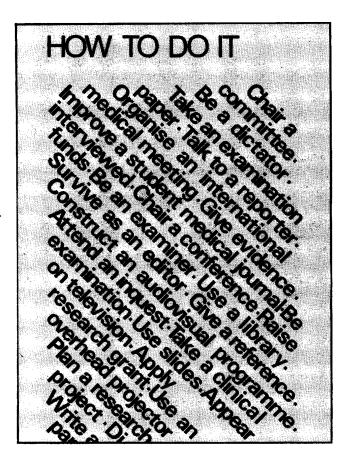
## HOW TO

Every doctor knows the sinking sensation induced by waiting one's turn for an examination viva and the social anxieties of changing jobs. The misery of first night nerves does not, however, disappear with time: each decade brings new challenges. On these occasions chairing a committee, giving evidence in court, appearing on television—practical tips can be enormously helpful. The same is true of the many skills not taught in medical school—how to lecture, referee papers, edit, or use a library. All these and many more nuggets of down-to-earth advice have been collected from past issues of the BM7 to form a compendium for the novice—whatever his or her age or seniority.

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### PRACTISING PREVENTION

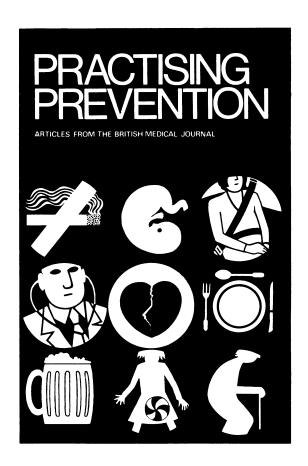
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#### 24 hour control of angina pectoris through the skin



Prescribing information Presentation Transiderm-Nitro is a transdermal drug delivery system, comprising a self-adhesive, pink-coloured patch, containing a drug reservoir of glyceryl trinitrate BP. The Transiderm-Nitro patch has a contact surface measuring 10cm<sup>2</sup>, and a glyceryl trinitrate content of 25mg. Indication Prophylactic treatment of attacks of angina pectoris, as monotherapy or incombination with other anti-anginal agents. Mode of action Transiderm-Nitro is a novel drug delivery system designed to achieve a prolonged and constant release of glyceryl trinitrate. Glyceryl trinitrate acts by venous and aterial vasodilatation and redistribution of myocardial blood flow. Following the application of Transiderm-Nitro the plasma level of glyceryl trinitrate reaches a constant plateau within two hours, which is maintained for all least 24 hours. During the first hour after removal of the patch the plasma level falls rapidly. Dosage and administration One patch is to be applied every 24 hours. The average total amount of glyceryl trinitrate absorbed per patch in 24 hours is 5mg. It is recommended that the patch is applied to the lateral chest wall. The patch should be removed after 24 hours, and the replacement patch applied to a new area of skin. Allow several days to elapse before applying a fresh patch applied to be a new area of skin. It acute attacks of anging pectoris occur, rapid acting nitritate preparations may be required. Efficacy and tolerability beyond 28 days! Therapy have yet to be established. Side-effects Headache may occur and usually regresses after a few days. Reflex tachycardia can be controlled by concomitant treatment with a beta-blocker. Postural hypotension, nauses and dizziness occur rarely. Allergic skin reaccular proturning sensation mayoccasionally occur. Upon removal of the patch, any slight reddening of the skin will usually disappear in a few hours. Precautions in recent myocardial infarction or acute heart failure, Transiderm-Nitro should be employed only under careful clinical

