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## How to get your career off to a flying start.

If there's one thing as vital as qualifying it's finding the right practice. Or perhaps you're already in practice and considering a change.

Either way, the Royal Air Force can offer opportunities where your career can really take off.

As a doctor in the RAF, you would be working in well-equipped, purpose-built hospitals and clinics with highly trained, highly organised staff.

Your patient list will be of a size that gives you ample time to devote to the needs of each patient.

You'll have excellent opportunities for vocational training and you may well decide to work in preventive and occupational medicine. Aviation medicine, for example, presents a fascinating challenge. There'll be plenty of other chances to specialise. If you're interested or qualified in

anaesthetics, pathology or ophthalmology, prospects are particularly favourable.

You'll have the pleasure of being part of a close-knit community with its own special social life and a wide variety of sports facilities. There's also a good chance during your career you'll work abroad in hospitals or medical centres in Hong Kong, Cy-prus, Gibraltar, Sardinia or Germany.

If you are a qualified medical practitioner, you can join us initially on a gratuity-earning three-year Short Service Commission, or if you opt for three years' vocational training the minimum period of service extends to five years. Later you can apply for a pensionable, permanent commission.

Your starting salary would be at least £13,804 (SHO) or more depending on your age and qualifications. Upper age limit on entry is 39.

If you'd like more details and an application form, please write to: Wing Commander I. A. McCoubrey, MB, ChB, MRCGP, DAvMed, AFOM, MRAES, RAF, Room 722 (724/MG/10), First Avenue House, High Holborn, London WC1V 6HE, enclosing a note listing your present and/or intended qualifications. Or call in at any RAF Careers Information Office.

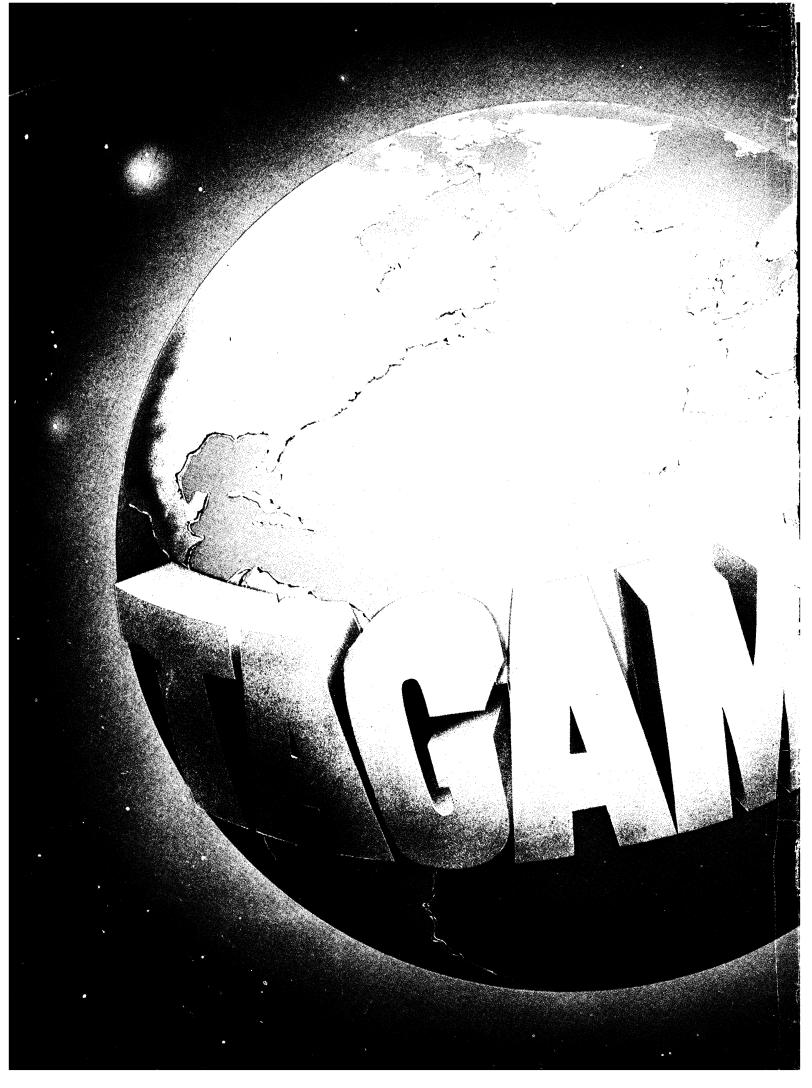
You must be a British subject and should have been resident in the UK for the last five years before applying.

Formal application must be made in the UK.



Pilot and doctor on flightline.





## Icira fira fira

Proven effective over seasy years of idespread clinical experience, gamet' is a known quantity in the stic ulcer treatment.

With 'Tagamet', 25 million patients head of the less experienced excorners, you're on familiar ground.

## Tagamet Control of gastric acid

### The Shall Intermedian

Reducingations, Tagamet Tablets, PL 0002/0092, each containing "ROS ing congridine, 56, 216-21. Tagamet Tablets, PL 0002/0063, Waby containing 200 mg cimetidine, 500, 574 15. Tagamet Syrus PL 0002/0073, containing 200 mg cimetidine per 5 ml. 200 ml.

January Business Duodenet lucer, benign gestric ulcer, recurrent and stornet stays and to gest a country and stornet stays and to gest and to be needed to gest or discussion of gestric acid is beneficial; prophysus of stress-induced gestrointestinal heemonhage and of acid appriation (Mendeleosis) syndrome, analysis principles and acid appriation by the syndrome. Zollinger-Elison syndrome. Donese fuel of sogger Adults. Duodenet ulcer 400 mg bid with breakfast and at bedtime, or 200 mg it dis with meals and 400 mg at bedtime (if 0 giday) for at least 4 weeks. To prevent relapse, 400 mg a bedtime (or 10 giday) for all to suffer and at bedtime for a least 6 months. Bengin gestric ulcer, 200 mg tids, with meals and 400 mg at bedtime (i) of yetly for all least 6 weeks. Gespohagear and to

gestrointestinal haemorrhage, up to 2 g a day divided, to maintain intragastic pl above 4. Prophylaxis of accid aspiration syndrome, 400 mg 90-120 mins before induction of general anaesthesia. 400 mg at start of labour then 200 mg 2 hourly as necessary, maximum 1.6 g. Do not use Tagamer syrup. Zollinger-Ellison syndrome, up to 400 mg at 1d. rarely up to 2 g a day Reversition of stomat ulceration and short bowel symdrome, 200 mg t d s. and 400 mg at before time 1.0 activated.

N.B. For full dosage instructions see Data Sheet.

Cautions impaired rend function reduce desage (see Data Sheet). Potentiation of oral anticoagulants, phenytoin and theophylline (see Data Sheet). Protonged treatment observe patients pendically Evolution enliginarcy in gastric ulcer Care in patients with compromised bone marrow (see Data Sheet). Avoid within premaners and lestation.

Adverse reactions Diarrhoea, dizziness, rash, tiredness. Rarely, mild gynaecomastia, reversible liver damage, confusional states (usually in the elderly or very ill), interstitial nephritis, acute nealitiestitis.

Legory POM. 21.783

SMCF SMITH KLINE & FRENCH LABORATORIES LIMITED.

Melwyn Garden City, Hertfordshire \$2715





Last year, 15,000,000 attacks of cold sores were suffered. 500,000<sup>1</sup> of them were so severe, or so embarrassing, that patients sought treatment from their doctor.

Now, there is new Zovirax Cream, an important achievement of Wellcome antiviral research.

Fiddian et al.2 found that treatment with Zovirax Cream achieved impressive results.

When treatment was begun before lesions developed, 42% of lesions were suppressed, compared to only 11% with placebo (P=0.04).

For the best results, treatment with Zovirax Cream should begin as soon as possible during an attack, preferably during the prodrome, so that the "... proportion of lesions effectively aborting may be increased to a third or more"2

So when patients come to you suffering from recurrent cold sores, prescribé Zovirax Cream.

With early treatment, the cold sores may not show their face.

<sup>1</sup>Data on file <sup>2</sup>Fiddian, A.P. et al. (1983), *British Medical Journal*, **286**, 1699

At the first sign of a cold sore

**ACYCLOVIR** 

scribing Information: Zovirax Cream

Acyclovir 5% w/w in a white aqueous cream base.

ent of herpes simplex infections of the skin including initial and recurrent genital herpes and herpes labialis.

Dosage and Administration

Zovirax Cream is applied five times daily at approximately four-hourly intervals. Treatment should be continued for

5 days. If healing is not complete, treatment may be continued for a further 5 days. Therapy should begin as early as possible after the start of an infection, preferably during the prodromal period.

Contra-indications

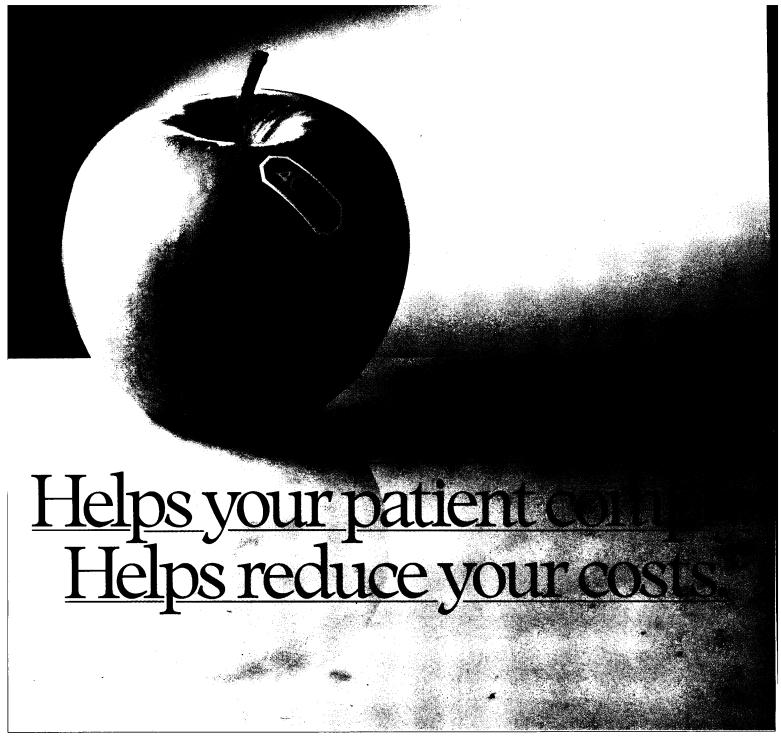
Patients known to be hypersensitive to acyclovir or propylene glycol

Warnings and adverse effects Transient burning or stinging following application may occur. Erythema or mild drying and flaking of the skin een reported in a small proportion of patients

Basic NHS cost 2g tube £4.86 10g tube £14.66 Product Licence No. PL3/0180.

Further information is available on request

Wellcome Medical Division The Wellcome Foundation Ltd, Crewe, Cheshire



Of the many thousands of breast cancer patients being treated with 'Nolvadex', one in three is receiving 40mg daily, often in the form of two 10mg tablets b.d.

Now ICI have introduced 'Nolvadex' Forte, enabling you to prescribe a more convenient, once-daily regimen for these patients, with the likelihood of better

compliance and, therefore, better control.

There is also a 20% cost advantage in prescribing 'Nolvadex' Forte rather than 4 x 'Nolvadex' 10mg.

To ensure that your patient receives 'Nolvadex' Forte in a factory-sealed patient pack, please prescribe in multiples of 30.

### New Nolvadex Forte @

### 40mg once daily in breast cancer

Prescribing Notes. Uses The treatment of breast cancer. Presentation White tablet containing tamoxifen 40mg. Dosage/administration Dose range is 20 to 40mg. daily, as single dose. Contraindications, warnings etc. Not to be given during pregnancy; premenopausal patients must be examined before treatment to exclude possibility of pregnancy. Side effects 'Nolvadex' Forte suppresses menstruation in some premenopausal patients. Reversible cystic ovarian swellings have occurred very occasionally in premenopausal patients receiving 80mg. daily. A small number of patients have developed hypercalcaemia on initiation of theraby. Reported side effects include hot flushes, vaginal bleeding, pruritus vulvae; gastrointestinal intolerance, tumour flare, light-headedness, fluid retention;

transient falls in platelet count. A few cases of visual disturbance, corneal changes and/or retinopathy have been described, mainly following long-term high dosage. Severe side effects may sometimes be controlled by dosage reduction; otherwise, treatment may need to be stopped. Overdosage Théoretically, overdosage would cause antioestrogenic effects. Extreme overdosage (eg 100 times daily dosage) may produce oestrogenic effects. No specific antidote. Packaging Containers of 30 tablets. Product licence no. 0029/0176. Basic NHS price £27.14 per pack of 30. Nolvadex is the trade mark for ICI tamoxifen. Full information is available upon request. Imperial Chemical Industries PLC, & & Pharmaceuticals Division, Alderley House, Alderley Park, Macclesfield, Cheshire SK104TF

## Pi CLONAZEPAM

Useful in all clinical forms of epileptic disease and seizures in infants, children or adults.

Step up to optimum treatment





### **Prescribing information**

### **Indications**

All clinical forms of epileptic disease and seizures in infants, children or adults, especially: typical or atypical petit mal; generalised primary or secondary tonic-clonic seizures including grand mal; focal seizures with elementary or complex symptomatology; various forms of myoclonus and associated abnormal movements.

### Dosage

The dosage must be adjusted according to the needs of the individual. Treatment should be started with low doses, not exceeding 1mg/day for adults, 0.5mg/day for children and 0.25mg/day for infants and small children. The data sheet should be consulted for full details.

### **Precautions**

Avoid alcohol. May modify patients' reactions (driving ability, operation of machinery, etc.). Careful dose adjustments when used in conjunction with other anti-epileptic drugs. Withdraw gradually, Pregnancy.

### Side-effects

Fatigue, somnolence, occasional muscular hypotonia and co-ordination disturbances. In infants and small children; salivary or bronchial hypersecretion with drooling. Paradoxical effects: aggressiveness, irritability or agitation, grand mal or activation of a new seizure type.

### Presentation

Tablets containing 0.5mg or 2mg clonazepam.

### **Basic NHS Cost**

0.5mg tablets £3.37 per 100 2mg tablets £7.02 per 100

### Product Licence Numbers

0031/0076 (tablets 0.5mg) 0031/0077 (tablets 2mg)

### Licence Holder

Sauter Laboratories
Division of Roche Products Limited
PO Box 8, Welwyn Garden City
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Rivotril is a trade mark

Flexible dosage, easily adjusted to suit patient response







Azlocillin is a ureidopenicillin with excellent bactericidal activity against most Gram-negative and Grampositive aerobic and anaerobic organisms. 9

6Of the 116 bacteremias there was a 60% response with azlocillin and amikacin, compared with a response rate of 31% for [cefotaxime/amikacin and ticarcillin/ amikacin]. The differences are statistically significant.<sup>2</sup> 9

Results of a worldwide study by the EORTC\* on 549 immunocompromised patients.

## AZLOCILLIN

### THE POWERFUL PARTNER FOR YOUR AMINOGLYCOSIDE

PRESCRIBING INFORMATION Presentation Vials containing 0.5g, 1.0g, 2.0g and 5.0g azlocillin as azlocillin monosodium. Infusion Pack containing 3 x 5.0g infusion vials. 3 x 50ml Water for Injection BP. 3 x Transfer needles. 3 x Hanging bags. Uses Azlocillin is a broad spectrum injectable penicillin indicated for the treatment of a wide range of bacterial infections. Dosage and administration In non life threatening infections 2.0g i.v. 8 houly. In patients with renal insufficiency the dosage interval should be 12 hours. Children's dosage is a based on 3 x 75mg/kg bodyweight daily. Treatment should be administered for at least 3 days after clinical symptoms have disappeared. Infusion Pack Seg detailed instructions on Packaging Leaflet. Contra-indications A history of allergy to other penicillins and cephalosporins. Securopen is inactivated by B-lactamases penicillinases). As with all new drugs Securopen should not be used during the first 3 months of pregnancy. Side-effects As for other injectable penicillins. Pharmaceutical precautions Store below 25°C. Solution should be prepared immediately prior to administration by shaking with a suitable volume of Water for Injections until dissolved; unused solution should be discarded. Legal Category POM. Basic NHS cost £2.48 per g (ex 5.0g vial). Product Licence Numbers PL0010/0075 Water for Injections BP: PL1502/0003.

Further information is available from: Bayer UK Limited, Pharmaceutical Division, Bayer House, Strawberry Hill, Newbury. Berkshire RG13 1JA. Telephone: Newbury (0635) 39000.

References; (1) Qlive S et al, J Antimicrob Chemother 1983; 11 (Suppl B): 153-158. (2) Gaya H. Paper presented at the International Congress of Chemotherapy, Vienna 1983





### IRGICAL COVER THE NEW STANDA

6...even the newest cephalosporins do not provide adequate cover against the anaerobic faecal micro-organisms.

6Severe wound sepsis occurred in 6% of patients given mezlocillin and 16% given cefuroxime...Post-operative diarrhoea was more common following cefuroxime therapy.

(96 patients, in combination with metronidazole)

Baypen's unique activity encompasses the full range of both aerobes and anaerobes which may be expected in abdominal and urogenital surgery.<sup>3</sup>

SHIELDING THE PATIENT ACROSS THE SPECTRUM

PRESCRIBING INFORMATION Presentation Vials containing 0.5g, 1.0g, 2.0g and 5.0g mezlocillin sodium monohydrate. Infusion Pack containing 3x5.0g infusion vials, 3x50ml Water for Injections BP, 3xTransfer needles, 3xHanging bags. Uses The treatment of systemic or local infections caused by susceptible organisms, and prophylaxis of post-operative sepsis following abdominal surgery and vaginal hysterectomy. Dosage and administration Patients with normal renal function should receive 2.0g 8 hourly for non life-threatening conditions, urinary or biliary tract infections. In life-threatening conditions or infections due to *Pseudomonas* species 5.0g 8 hourly intervals. About the prophylaxis of post-operatively at 8 hourly intervals. Patients with renal insufficiency should receive the appropriate doses as above at 12 hourly intervals. Monitoring serum levels in these patients is recommended. Children's dosage is based on 75 mg/kg twice daily for neonates and premature babies and 3x75 mg/kg for infants. Duration of treatment is usally 7-10 days. Infusion Pack: See detailed instructions on Packaging Leaflet. Contra-indications Penicillin hypersensitivity. First trimester of pregnancy Side-effects As for other penicillins. Pharmaceutical precautions Mezlocillin should be freshly repeared prior to administration by shaking with a suitable volume of Water for Injections BP. PL1502/0003. Further information is available from: Bayer UK Limited, Pharmaceutical Division, Bayer House, Strawberry Hill, Newbury, Berkshire RG13 1.JA. Telephone: Newbury (0635) 39000. References 1. Keighley MRB. BMJ 1983; 286: 1844-1846. 2. Ambrose NS, et al. Paper presented at XIIIth International Congress of Chemotherapy, Vienna 1983. 3. Fass RJ, Arctic Intern Med 1980; 140: 763-8.



- Smooth, sustained diuresis
- Distinctive tablet aids compliance, avoids confusion
- Avoids the need for K<sup>+</sup> supplements
  - Now available as an oral solution

### Abridged Product Information

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

Uses Potassium-conserving diuretic/antihypertensive. For hypertension, congestive heart failure, or hepatic cirrhosis

with ascites, where potassium depletion might be anticipated. **Dosage and administration** Dose range is 1 to 4 tablets (or 5 to 20 ml) daily.

Contra-indications Hyperkalaemia, potassium-conserving agents, potassium supplements; anuria; acute renal failure, severe renal disease, diabetic nephropathy; blood urea over 60mg per 100ml; serum creatinine over 1.5 mg per 100 ml, when electrolyte and urea levels cannot be monitored; sensitivity to amiloride or hydrochlorothiazide. In renal failure hyperkalaemia may develop rapidly. Not recommended for children; during pregnancy, or lactation.

Precautions Diabetes mellitus: hyperkalaemia occurs commonly in diabetics on amiloride. Check renal function in known or suspected diabetics. Discontinue before a glucose-tolerance test. Insulin requirements of diabetics may alter. Latent diabetes may become manifest. Initiate only with caution in severely ill patients liable to acidosis. Hyperkalaemia: seen particularly in the aged, diabetics, cirrhotics, cardiac oedema with known renal involvement, where patients seriously ill or undergoing vigorous diuresis. Discontinue 'Moduretic' immediately if hyperkalaemia develops as some deaths have been reported. On rare occasions, 'Moduretic' may not prevent hypokalaemia. If hypokalaemia occurs use the two agents separately with appropriate dosage adjustment. Potassium should not be given. Hyponatraemia and hypochloraemia may occur. Increases in blood urea may accompany vigorous diuresis; serum electrolyte and blood urea should be moritored in these patients. Caution in renal impairment. Avoid cumulative or toxic effects following reduced excretion. Azotaemia may be precipitated or increased by hydrochlorothiazide. Discontinue if increasing azotaemia and oliguria occurs. Effects in cirrhosis: diuresis is more frequently accompanied by adverse reactions. Hepatic encephalopathy reported with amiloride. Observe these patients for encephalopathy. Jaundice has occurred, relationship uncertain. Sensitivity reactions to thiazides may occur. Hydrochlorothiazide potentiates other antihypertensives. Dosage of these agents may need reduction when 'Moduretic' added. Do not give lithium with diuretics. Activation or exacerbation of systemic lupus erythematosus may occur. Hydrochlorothiazide may decrease arterial responsiveness to noradrenaline. Responsiveness to tubocurarine may increase. Calcium excretion is decreased. Magnesium excretion is increased. Thiazides may decrease serum PBI levels without thyroid disturbance. Changes in parathyroids with hypercalcaemia and hypophosphataemia have been reported. Discontinue before tests for parathyroid function. Hyperuricaemia or gout may occur.

Side effects Gastro-intestinal: intolerance and pain. Diuretic effects: dry mouth, thirst, paraesthesiae, blurring of vision, sialadenitis, dizziness, vertigo, weakness, muscle cramps, orthostatic hypotension. Other side effects: rash, pruritus, confusion, visual disturbances. Thiazide effects: headache, restlessness, jaundice, pancreatitis, yellow vision, hyperglycaemia, glycosuria, hyperuricaemia, thrombocytopenia, leucopenia, agranulocytosis, aplastic anaemia, purpura, rash, urticaria, photosensitivity, necrotising angiitis, fever, respiratory distress. Isolated instances of GI bleeding. Increases in liver function may relate to amiloride. One patient with pre-existing partial heart block developed complete heart block.

Basic NHS cost Tablets (5 mg amiloride hydrochloride BP and 50 mg hydrochlorothiazide BP) £7.59 per 100 (ex 500 pack). Solution (5 mg amiloride hydrochloride BP and 50 mg hydrochlorothiazide BP in 5 ml)  $\pm 4.95$  for 200 ml. **Product licence numbers** Tablets, 0025/5016. Solution, 0025/0165.

® registered trademark. Issued December 1983.

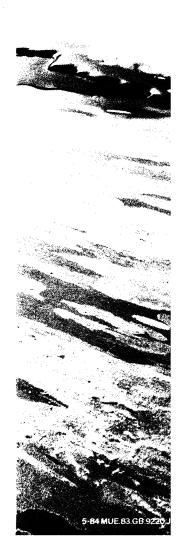


Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire, EN11 9BU



Simple to start with. Simple to stay with.





# DIDYOU EVER WISH FOR ANOTHER OPTION?

Until now many severe chronic asthmatics have required oral steroids over prolonged periods to control their condition.

symptomatic control of severe asthma with measurable improvement in lung function.

Many patients requiring maintenance oral steroids are able to reduce their oral steroids; a significant number are able to stop them altogether.

Becloforte

(Beclomethasone Dipropionate BP)

THE ALTERNATIVE TO ORAL STEROIDS IN SEVERE CHRONIC ASTHMA

Prescribing information Uses For those asthmatic patients who require high doses (greater than  $800\mu$ g to  $1.000\mu$ g daily) of beclomethasone dipropionate to control their symptoms and patients with severe asthma who would otherwise be dependent on systemic corticosteroids to control their symptoms. Dosage and administration Adults: Two inhalations  $(500\mu$ g) twice daily, or one inhalation  $(250\mu$ g) four times daily. If necessary, dosage may be increased to two inhalations  $(500\mu$ g) three or four times daily. Contralindications, warnings, etc. No specific contralindications are known, but special care is necessary in patients with active or quiescent pulmonary tuberculosis. Unnecessary administration of drugs during the first trimester of pregnancy is undesirable. Precautions Patients being treated with high doses of Becotide Inhaler may be transferred directly to treatment with Becloforte Inhaler. In the majority of patients no significant adrenal suppression occurs

until doses of 1.500µg per day are exceeded. Some patients receiving 2.000µg of Becloforte per day may show a degree of adrenocortical suppression although short term adrenal reserve remains intact. In such patients the risks of developing adrenal suppression should be balanced against the therapeutic advantages and precautions should be taken to provide systemic steroid cover in situations of prolonged stress. Patients being treated with oral steroids should be in a stable state before Becloforte Inhaler is added to their therapy. Gradual withdrawal of systemic steroids may be attempted after a week or two. Adrenocortical function should be monitored in patients who have been treated with systemic steroids for long periods of time or at a high dose. These patients should be warned that they may need to increase the dosage of oral steroids in times of stress. Treatment with Becloforte should not be stopped abruptly. Side effects Occasional candidiasis of the mouth and throat occurs in

some patients. Topical therapy with antifungal agents usually clears the condition whilst still continuing with Becloforte Inhaler. **Presentation and Basic NHS cost** Becloforte Inhaler is a metered dose aerosol delivering 250 $\mu$ g Beclomethasone Dipropionate BP per actuation and containing 200 inhalations. Basic NHS cost £21:00.**Product licence number** 0045/0125 Becloforte and Becotide are trade marks



Further information is available on request from:

Allen & Hanburys Limited Greenford, Middlesex UB6 OHB

### 





- Low incidence of nausea and vomiting 1.2.3
- Demonstrated ceiling effect to respiratory depression4
- No significant adverse clinical effect on the cardiovascular system<sup>5,6,7</sup>
- Low incidence of psychotomimetic effects<sup>2,8,9,10</sup>
- Not a Controlled Drug



66Thus; nalbuphine appears to offer a useful alternative to morphine in patients with moderate to severe pain 50 Etrick JK and Heal RC. Nathurbines Daug Evaluation. Drugs 1980 2019 1 211



### Prescribing Information

An ampoule containing a clear colourless sterile aqueous solution of 20mg nalbuphine hydrochloride in 2ml.

Nubain injection is indicated for the relief of moderate to severe pain. It can also be used for pre-

Nubain injection is indicated for the relief of Information and post-operative analgesia.

Dosage and Administration:

Nubain injection may be administered subcutaneously, intramuscularly or intravenously.

The usual recommended dosage is 10mg-20mg for a 70kg individual. The dosage should be adjusted according to the severity of pain, physical status of the patient and other medications.

the patient may be receiving.

Contra-indications, Wamings and Precautions:
Contra-indications: Nubain should not be administered to patients who are hypersensitive to it. Wamings: Drug dependence: Nubain has low abuse potential. However, caution should be observed in prescribing it for emotionally unstable patients or for patients with a history of opioid abuse. When Nubain is selected for the control of chronic pain, its suggested prolonged activity may delay the need for larger or more frequent doses. Abrupt discontinuation of Nubain following prolonged use has been followed by symptoms of opioid withdrawal. Use in ambulatory patients: Nubain may impair the mental or physical abilities required for the performance of potentially dangerous tasks such as driving a car or operating machinery. Therefore, Nubain should be administered with caution to ambulatory patients who should be warned to avoid such hazards. Use in children: Because clinical experience in children under the age of 12 is limited, the administration of Nubain in this age group is not recommended. Use in pregnancy: Safe use of Nubain in pregnancy (including labour) has not been established. Although animal studies have not revealed teratogenic or embryotoxic effects, nalbuphine should only be administered to pregnant women when, in the judgement of the physician, the potential benefits outweigh the possible hazards. Nubain should be used to provide analgesia in patients with head injury and increased intracranial pressure only when essential, and then should be administered with extreme caution. Patients receiving an opioid analgesic, general anaesthetic, phenothiazine or other tranquillizer, sedative, hypnotic or other CNS depressant (including alcohol) concomitantly with Nubain may exhibit an additive effect. When such combined therapy is contemplated, the dose of one or both agents should be

Precautions: Caution should be observed in administering the drug to patients with impaired recatatoris. Sudori should be observed in administrating the drug to patients with impaired respiration, or with other medications which produce respiratory depression. In the presence of bronchial asthma, uraemia, severe infection, cyanosis or respiratory obstruction, Nubain should be administered with caution and in reduced doses. Safety for use in myocardial infarction has not been established. Nubain should be used with caution and administered in reduced amounts in patients with impaired renal or hepatic function.

Adverse Effects:
The most frequently seen reaction to Nubain is sedation. Less frequent are sweating, nausea, vomiting, dizziness, dry mouth, vertigo and headache. Rarely seen are CNS effects such as nervousness, depression, confusion and dysphoria. Also reported have been hyper and hypotension, bradycardia, tachycardia, dyspepsia, gastrointestinal cramps, itching, urticaria, speech difficulty, blurred vision and flushing.

Management of overdosage. The immediate intravenous administration of Narcan (naloxone hydrochloride) is a specific antidote. Oxygen, intravenous fluids, vasopressors and other supportive measures should be used as indicated.

Pharmaceutical Precautions:

Protect from light. Store at room temperature (15:30°C).

Legal Category: Prescription Only Medicine.

Package Quantities: Nubain ampoules each containing 2ml are supplied in boxes of 10 ampoules.

Further information: Nil.

Product Licence Number: 4524/0003.

Basic NHS Cost: £11.60 per box of 10x2ml ampoules.

Date of Preparation: August 1983.

References

1. Fragen R, Caldwell N. Acute intravenous premedication with nalbuphine. Anesth Analg 1977;56:808:12.

2. Jasinski D. Mansky P. Evaluation of nalbuphine for abuse potential. Clin Pharmacol Ther 1972;13:78:90. 3. Data on file. Du Pont Pharmaceuticals (UK) Ltd. 4. Romagnoli A, feats AS. Celling effect for respiratory depression by nalbuphine. Clin Pharmacol Ther 1990;27:478:85. 5. Romagnoli A, Keats AS. Comparative haemodynamic effects of nalbuphine and morphine in patients with coronary artery disease. Bull Tex Heart Inst 1978;5(1):19-24. 6. Lake C et al. Cardiovascular effects of nalbuphine in patients with coronary or valvular heart disease. Anaesthesiology 1982;57:498:503. 7. Lee G et al. Haemodynamic effects of morphine and nalbuphine in acute myocardial infarction. Clin Pharmacol Ther 1981;29(5):576:81. Stambaugh J. Evaluation of nalbuphine: Efficacy and selectly in the management of chronic pain associated with advanced malignancy. Curr Ther Res 1982;3(1):393-401. 9. Houde RW et al. Annual Report of the Analgesis Studies Section of the Memorial Sloan-Metraing Cancer Centre 1976. 10. Tammisto T. Tigerstedt I. Comparison of the Analgesis Effects of Intravenous Nalbuphine and Pentazocine in Patients with Postoperature Pain. Acta Anaesth Scand 1977;21:390-394.

Further information is available on request from the Company Du Pont (IKI) Ltd. Pharmaceuticals. Wedgwood Way, Stevenage, Herts SGI 4QN. Nubain\* is a registered trademark of E.I. du Pont de Nemours & Co. Inc.

### **ABC** OF **HYPERTENSION**

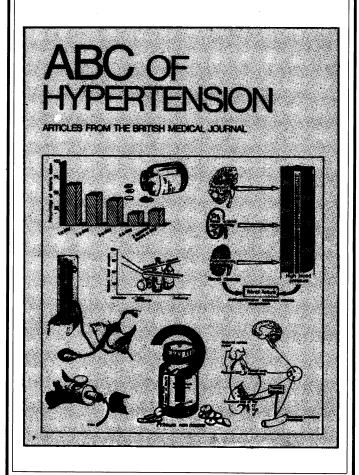
Hypertension is a common disorder that is easily detected. But it may be deceptively simple: the measurement of blood pressure, interpretation of the results, and the decisions that follow need to be based on a comprehensive knowledge of recent advances. These illustrated articles on blood pressure measurement, reduction and management provide a practical guide for general practitioners and others concerned with hypertension.

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When you're pregnant, it's only natural to worry about impurities in your system.

However, when you're pregnant, diabetic, and taking insulin, you simply have no choice.

Unless, of course, Humulin has been prescribed.

Humulin is identical to the insulin

produced by the human pancreas!

It's less immunogenic than the insulin that comes from the pancreas of pigs and cattle?

It produces fewer antibodies?
And it comes in a variety of formulations to suit differing needs.

The pregnant diabetic can also be secure in the knowledge that Humulin

actually minimises immunological disturbance.<sup>2</sup>

Fortunately, not all expectant mums have to endure diabetes. But for those who do, there is now at least a natural solution.



### Humulin

'HUMULIN'S ▼ 'HUMULIN'I ▼ 'HUMULIN' Zn ▼ Human insulin (crb) Presentation: Humulin S: A sterile, aqueous solution of human insulin (crb), 40, 80 and 100 IU/ml. Humulin I: A sterile suspension of isophane human insulin (crb),40,80 and 100 IU/ml. Humulin Zn: A sterile suspension of crystalline human insulin (crb), 100 IU/ml. Uses: For the treatment of insulindependent diabetics. Dosage and Administration: The dosage should be determined by the physician, according to the requirements of the patient. Humulin S may be administered by subcutaneous, intramuscular or intravenous injection. Humulin I and Humulin Zn should be administered by subcutaneous or intramuscular injection only. Humulin S may be administered in combination with Humulin I or Humulin Zn as required. Humulin I and Zn: Rotate vial in palm of hands before use to re-suspend. Mixing of insulins: The shorter-acting insulin should be drawn into the syringe first, to prevent contamination of the vial by the longer-acting preparation. It is advisable to inject immediately after mixing. Contra-indications, Warnings, etc. Contra-indications: Hypoglycaemia. Under no circumstances should Humulin I or Humulin Zn be given intravenously. Precautions: Usage in pregnancy: Insulin requirements usually fall during the first trimester and increase during the second and third trimesters. Transferring from other insulins: A small number of patients transferring from insulins of animal origin may require a reduced dosage, especially if they are very tightly controlled and bordering on hypoglycaemia. The risk of hypoglycaemia can be considered minimal if the daily dosage is less than 40 IU. Insulin-resistant patients receiving more than 100 IU daily should be referred to hospital for transfer. Side effects: Lipodystrophy, insulin resistance and hypersensitivity have rarely been reported. <u>Legal Category:</u> P Package Quantities: 10ml glass vials in packs of 5.
Price: Humulin S: 40 IU/ml £2.70, 80 IU/ml £5.40, 100 IU/ml £6.44. Humulin I: 40 IU/ml £2.70, 80 IU/ml £5.40, 100 IU/ml £6.44. Humulin Zn: 100 IU/mI£6.44.

**Product Licence Numbers:** 

Humulin Zn 100 IU/ml 0006/0179

Date of preparation: December 1983. Full Prescribing Information Available From: Eli Lilly and Company Limited, Kingsclere Road, Basingstoke, Hampshire, RG21 2XA. Or from: Eli Lilly and Company Limited, 5 Percy Place, Dublin 4: Telephone: 680 179. 'HUMULIN' is a trade mark. HU70 Dec '83

1. Johnson I.S., Diabetes Care 1982, Vol. 5, Suppl. 2, 4-12. 2. Fineberg, S.E. et al (Indianapolis), Diabetes May 1983, 32, Suppl. 1,3A.

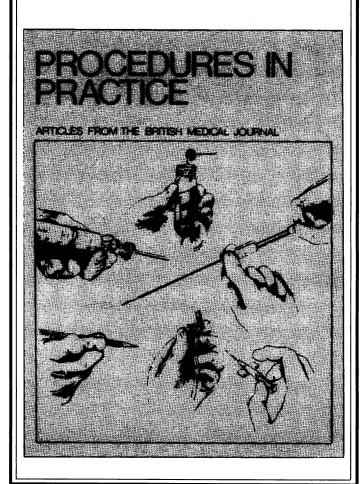


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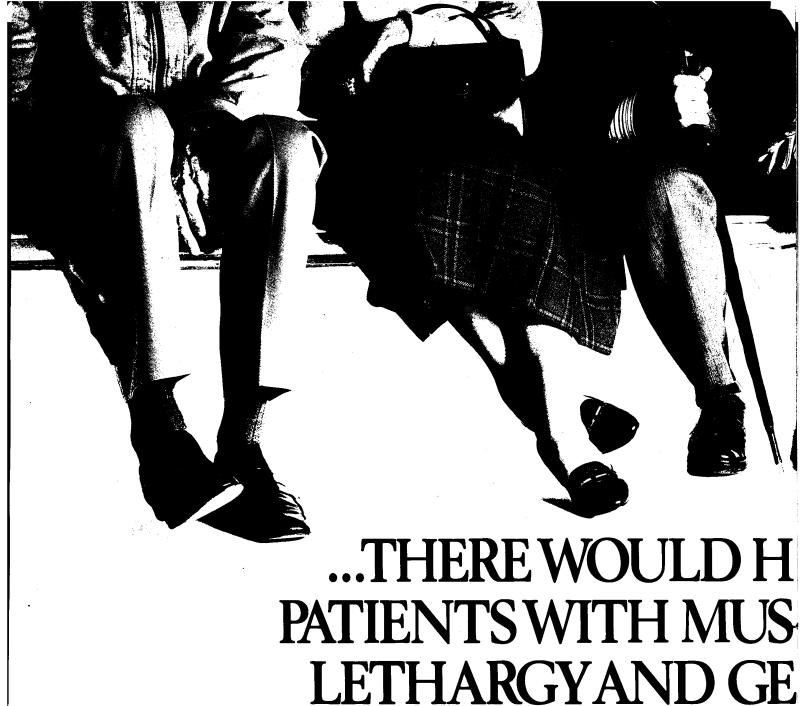
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Mehta J., Cohn J.N. Circulation 1977; 55: 370-375.
Edwards R.C., Raftery E.B. Brit J. clin Pharmacol. 1976; 3 (Supp.): 733-736.
Heck I et al. Clinical Science 1981; 61 (Supp.): 429-432.
Richards D.A., Jackson J.L. In: Fletcher E. ed. The European Society of Cardiology Drug Symposium labetalol 1979; 105-111.

### rescribing information

ses Treatment of all grades of hypertension, including the hypertensions of pregnancy hen oral antihypertensive therapy is indicated. Trandate Tablets are also indicated for

e treatment of patients with angina pectoris coexisting with hypertension.

osage and administration Treatment may start with one 100mg tablet or one 200mg

blet twice daily. In patients already being treated with antihypertensive drugs, the

the blood pressure is not controlled by the initial dosage, increases should be made at intervals of about fourteen days. Many patients have satisfactory blood pressure control on 400mg daily. A twice-daily dosage regimen can be maintained up to a total daily dose of 800mg. However, resistant cases may require higher doses. In these patients it is preferable to administer Trandate three or four times a day to minimise side effects. Trandate Tablets should preferably be taken with food. Trandate therapy is not applicable to children. In hypertensive patients with angina, the dose of Trandate will be that required to control the hypertension.

Contra-indications There are no known contra-indications.

Warnings There have been reports of skin rashes and/or dry eyes associated with the use of beta-adrenoceptor blocking drugs. The reported incidence is small and in most



### AVE BEEN FEWER CULAR TIREDNESS, NERAL MALAISE



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of the drug should be considered if any such reaction is not otherwise explicable. Jaundice (both hepatic and cholestatic) has been reported as a rare complication of Trandate therapy. Should it occur, treatment should be stopped since it has been shown to be reversible on stopping the drug.

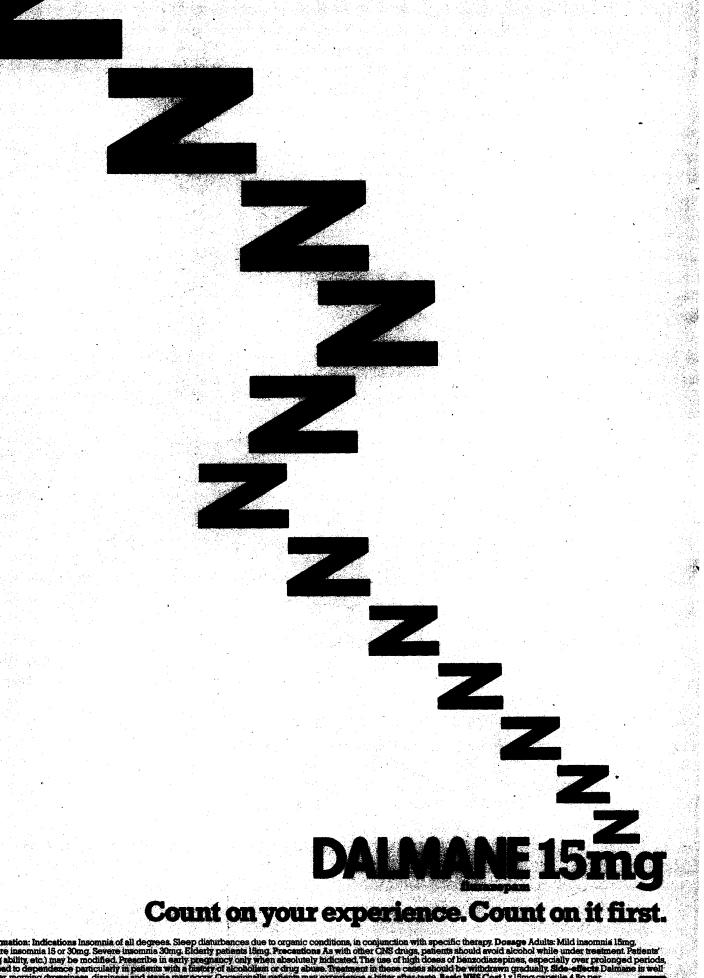
Precautions Trandate should not be given to patients with uncompensated or digitalisresistant heart failure or with atrioventricular block. The presence of severe liver disease may necessitate reduced doses of Trandate. Care should be taken in asthmatic patients and others prone to bronchospasm. Unnecessary administration of drugs during the first trimester of pregnancy is undesirable.

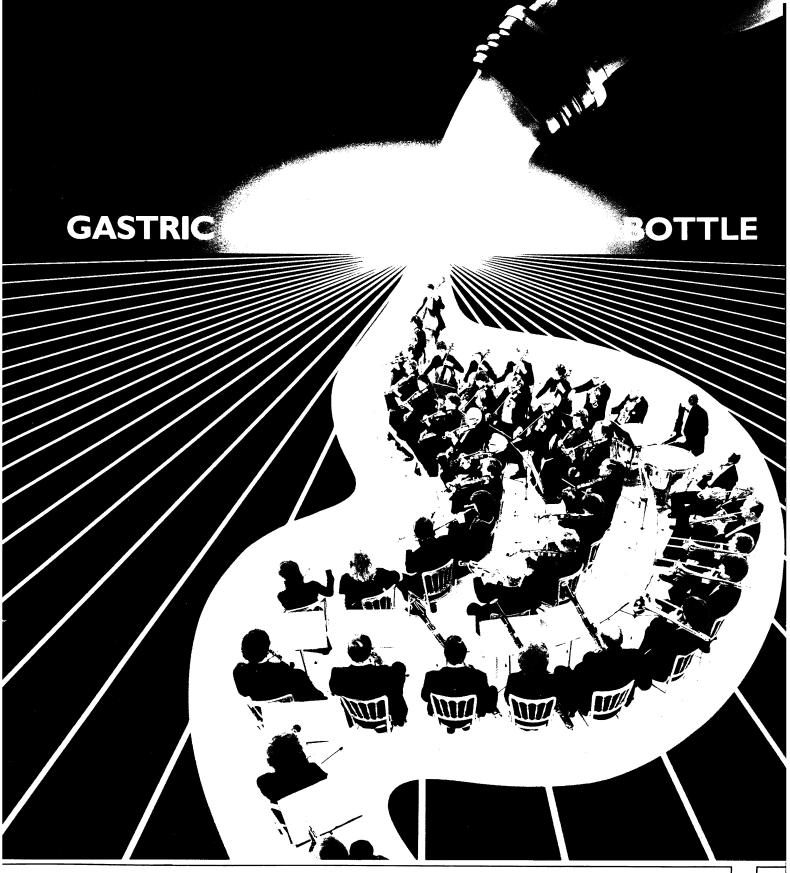
Side effects If the recommended dosage instructions are followed side effects are infrequent and usually transient. Those that have been reported include: headache, pain, nausea and vomiting, a tingling sensation in the scalp, and, in a very few patients, a lichenoid rash.

Presentation, Package quantities and Basic NHS cost Trandate Tablets 100mg.
Trandate Tablets 200mg and Trandate Tablets 400mg each contain 100mg, 200mg and 400mg labetalol hydrochloride, respectively. In containers of 50 and 250 tablets. Basic NHS cost of 50 Trandate Tablets 100mg is £3·97. **Product licence numbers** Trandate Tablets 100mg PL0045/0106, Trandate Tablets 200mg PL0045/0107, Trandate Tablets 400mg PL0045/0109



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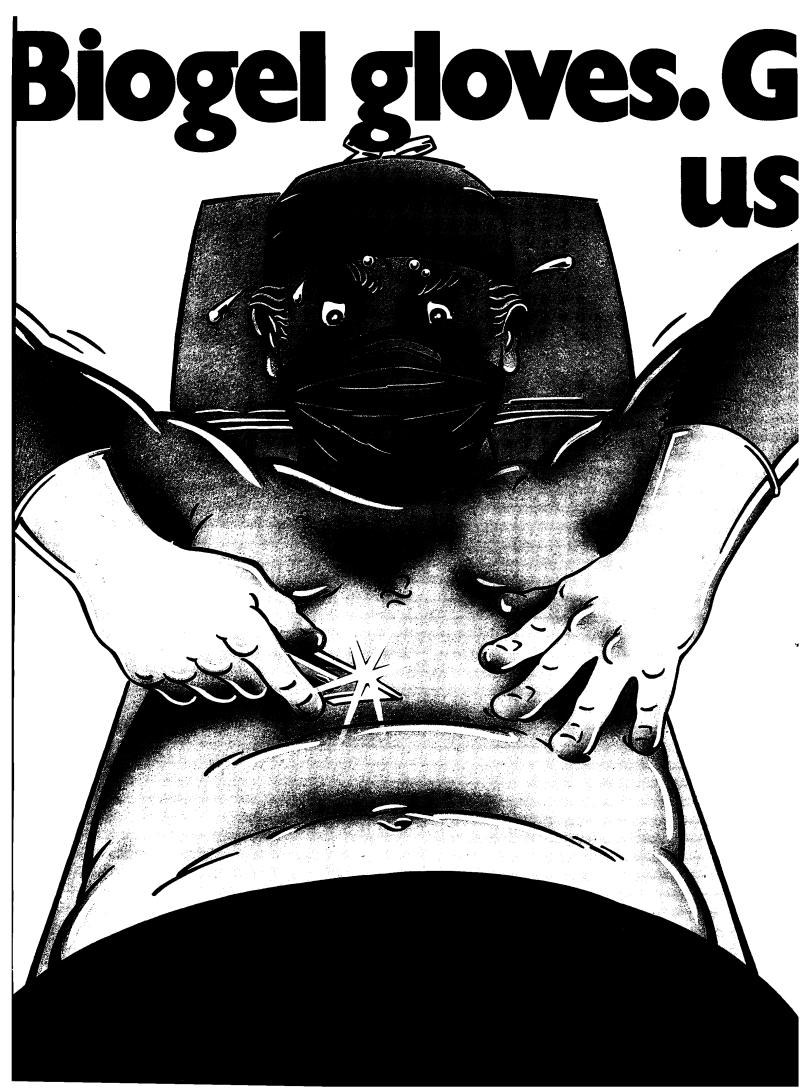




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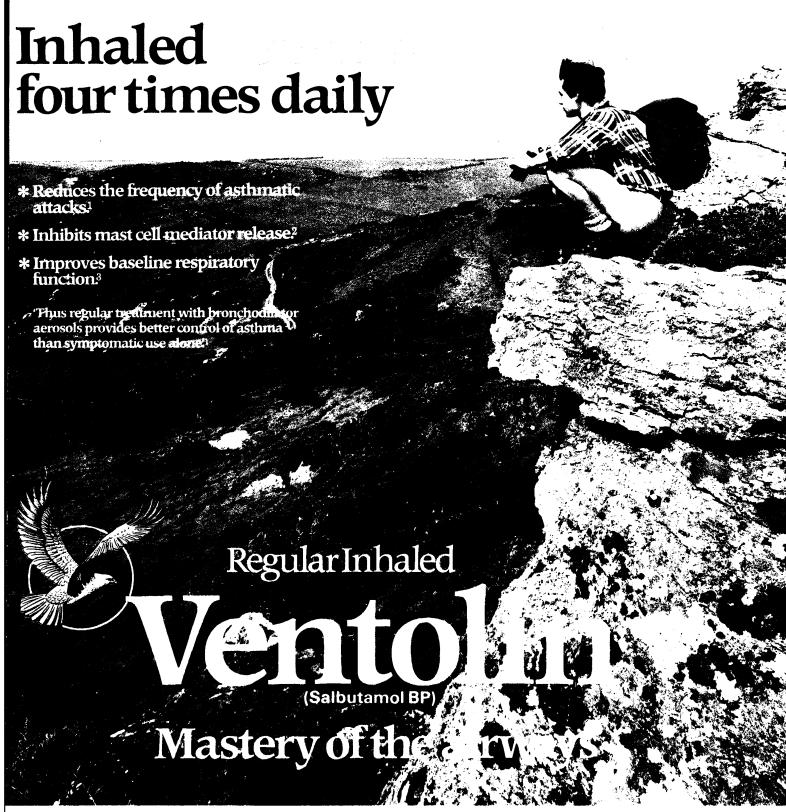


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Clinical Features and Surgical Management

Edited by M.A.R. Freeman, London

1980. 206 figures, 50 tables. XIII, 282 pages. Cloth DM 198,— (approx. £ 49.50). ISBN 3-540-09699-X

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Roger Drury British Medical Journal

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By R.O. Weller, Southampton, M. Swash, London, D.L. McLellan, Southampton, C.L. Scholtz, London

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Children's Dosage: See Data Sheet. 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.
See Data Sheet for full prescribing information.
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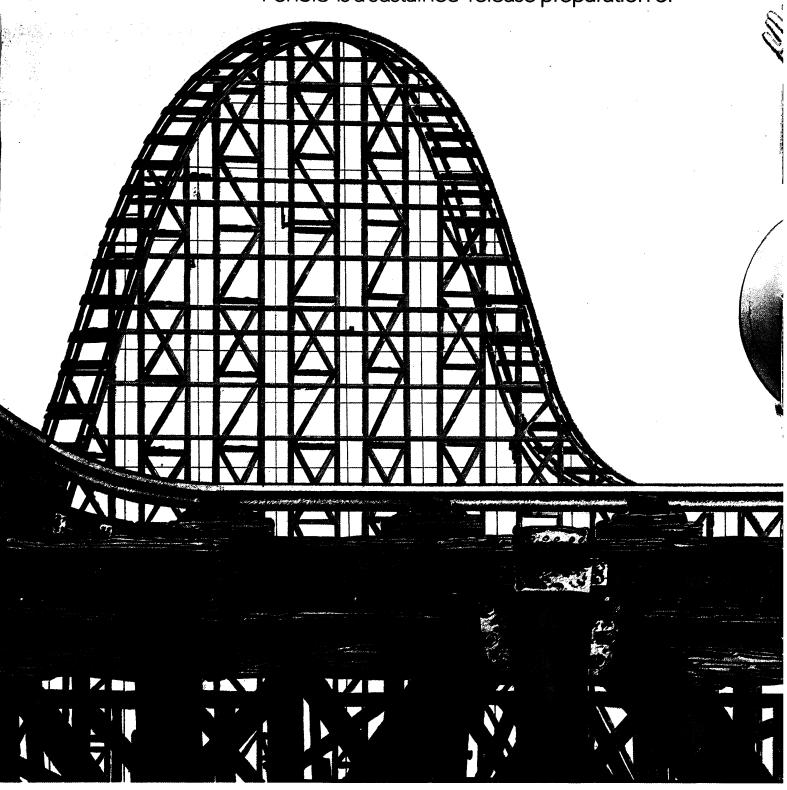
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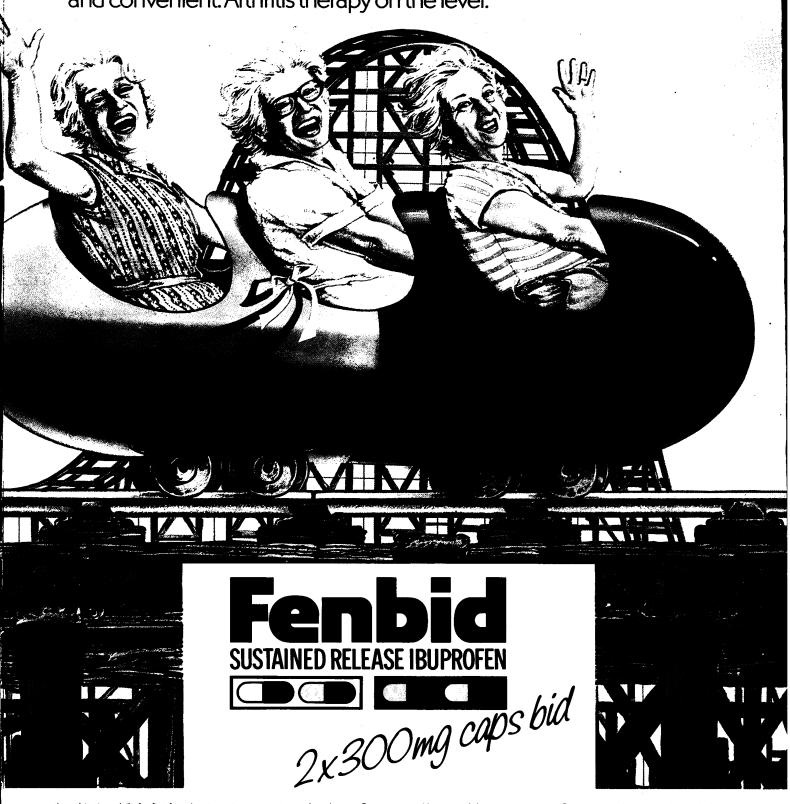


PRESCRIBING INFORMATION. Presentation — 'Fenbid' Capsules, PL 0002/0111, each containing 300 mg ibuprofen in sustained-release form. 120, £8.40. Indications — Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, other seronegative (non-rheumatoid) arthropathies; acute periarticular disorders; relief of mild to moderate pain in sprains, strains, low back pain, dysmenorrhoea; dental and post-operative pain. Dosage — Adults and children over 12 years: Start with 2 capsules night and morning. May be increased to 3 capsules b.d. until acute phase is controlled. Maintenance: 1 or 2 b.d. Do not chew or suck capsules or pellets. Capsule may be opened and pellets mixed with soft food. Contra-indication — Active peptic ulceration. Cautions — Gastrointestinal disease (but may be tolerated in patients with intolerance to other anti-rheumatic drugs); actual, or history of, bronchial asthma. Monitor

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ibuprofen formulated to reduce these highs and lows. 'Fenbid' provides effective relief of symptoms. And is at least as well tolerated as conventional ibuprofen.

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prothrombin time daily for first few days in patients on anticoagulant therapy. Pregnancy and lactation. Adverse reactions — Gastrointestinal upsets, rash, headache, nervousness tinnitus, oedema. Rarely gastrointestinal haemorrhage. Blurred vision, toxic amblyopia, thrombocytopenia, oliguric renal failure reversed on stopping treatment. Overdosage — Treatment maintain normal blood pressure, correct electrolyte imbalance; consider emesis in children and gastric lavage in adults; symptomatic measures.

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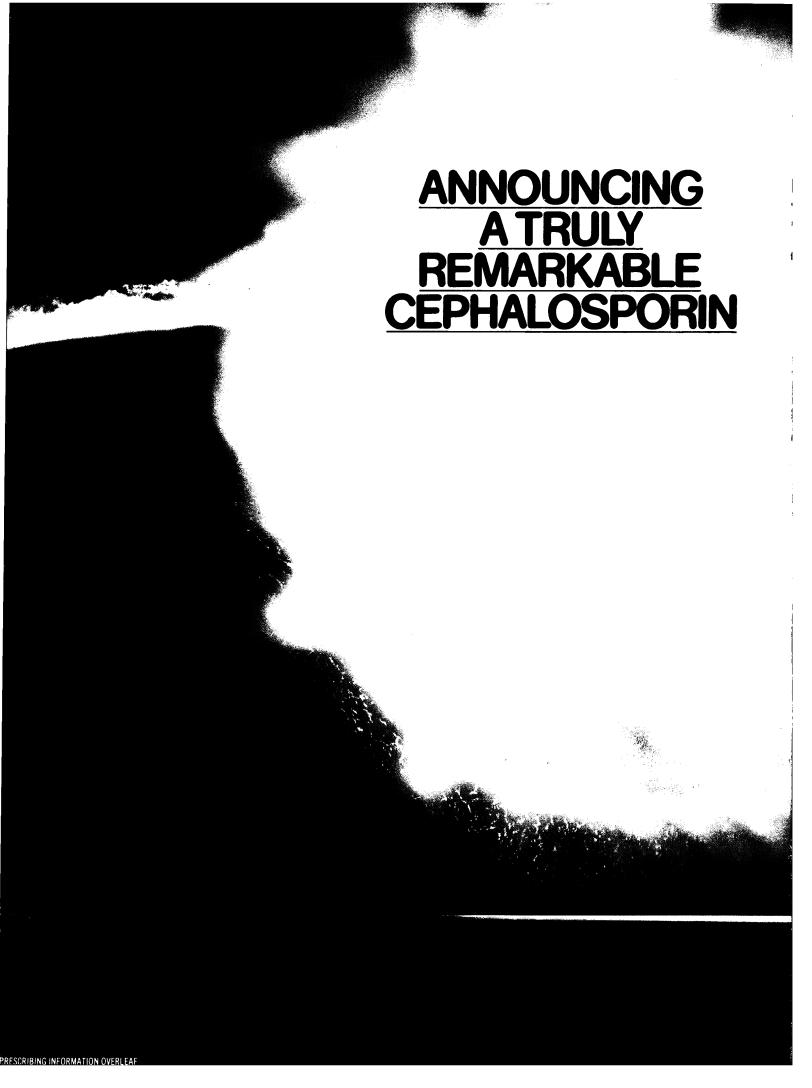
ry short-acting hypnotics nnot ensure a full night's eep and may couse renormal sleep<sup>2</sup> without impaired daytime performance<sup>3</sup>

Long-acting hypnotics can impair performance the following day and tend to accomplate in the body.

## NOCTAMID 1mg NOCTAMID 1mg NOCTAMID 1ormetazepam FAST AS LEEP ALL NIGHT-WIDE AWAKE ALL DAY

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Fortum is a bactericidal cephalosporin antibiotic which is resistant to most beta-lactamases and is active against a wide range of Gram-positive and Gram-negative bacteria.

It is indicated for the treatment of single infections and for mixed infections caused by two or more susceptible organisms. Fortum, because of its broad antibacterial spectrum, may be used alone as first choice drug, pending sensitivity test results.

Dosage and administration
The usual adult dosage is in the range 1g to 6g i.m. or i.v. per day (see Data Sheet for details).

Contra-indication
Fortum is contra-indicated in patients with known hypersensitivity to cephalosporin antibiotics.

Precautions
Cephalosporins may, in general, be given safely to patients who are hypersensitive to penicillins. Care is indicated in patients who have experienced an anaphylactic reaction to penicillin.

Cephalosporin antibiotics at high dosage should be given with caution to patients receiving concurrent treatment with nephrotoxic drugs. Clinical experience with Fortum has shown that this is not likely to be a problem at the recommended dose levels. Reduce dosage when renal function is impaired (see Data Sheet).

As with all drugs, Fortum should be administered with caution during the early months of pregnancy and in early infancy. Fortum is excreted in human milk in low concentrations.

Fortum does not interfere with enzyme-based tests for glycosuria. Slight interference with copper reduction methods may be observed. Fortum does not interfere in the alkaline picrate assay for creatinine

Fortum and aminoglycosides should not be mixed in the same giving set or syringe. As with other broad spectrum antibiotics, prolonged use of Fortum may result in the overgrowth of non-susceptible organisms (e.g., Candida, Enterococci) which may require interruption of treatment or adoption of appropriate measures.

Side effects

Fortum is generally well tolerated with only infrequent adverse reactions, e.g., pain and/or inflammation after i.m. administration and phlebitis and/or thrombophlebitis after i.v. administration, rashes, fever, pruritis, gastro-intestinal disturbances, headache, dizziness, paraesthesiae and bad taste. Transient changes in laboratory values may occur including; eosinophilia, a positive Coombs' test, thrombocytosis and slight rises in hepatic enzymes.

Basic NHS cost (exclusive of VAT)
The basic NHS cost of Fortum is £9.90 per gram.
Available in packs of; 5 x 500mg, 5 x 1g and 5 x 2g vials and an infusion pack of 5 x 2g vials.

Product Licence numbers 500mg: 0004/0292 1g: 0004/0293 2g: 0004/0294

Further information is available on request from:

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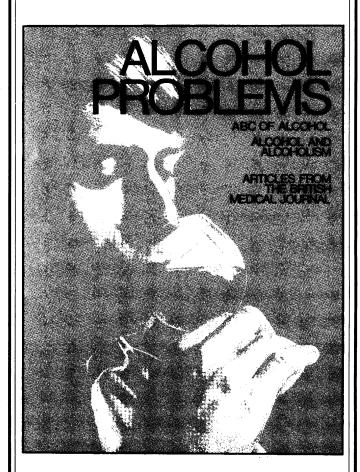
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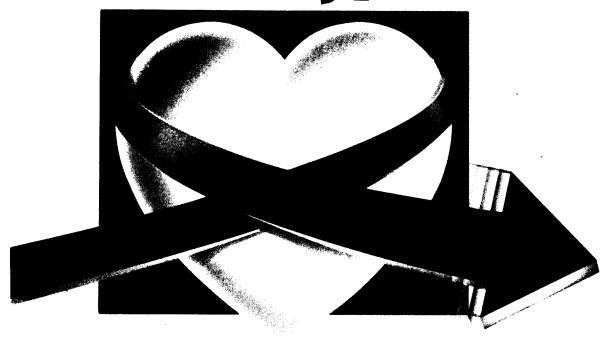
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Hypovase when added to these first line anti-hypertensives restores the plasma lipid ratio, providing yet another good reason for adding Hypovase to your first line therapy.

## Hypovase\*

a dual role in hypertension, an important role in congestive heart failure.

Prescribing Information: Indications Hypertension of varied aetiology and all grades of severity, congestive heart failure of moderate to severe degrees. Contra-indications Sensitivity to Hypovase. Precautions A low initial dose and gradual titration is recommended. A small percentage of patients may react more rapidly and to a greater extent than the majority. In some cases this has led to sudden loss of consciousness generally lasting a few minutes. Subsequent treatment may be satisfactory. Hypovase is not recommended in pregnancy, during lactation or in children under 12 years of age. Side Effects Dizziness, drowsiness and lack of energy are the most common. Dosage: Congestive Heart Failure Suggested Initial Daily Dose Range: 0.5mg increasing to 1.0mg t.i.d., or q.i.d. Usual Daily Maintenance Dose:

4.0mg to 20mg in divided doses. **Hypertension** Starting dose 0.5mg two to three hours before retiring; thereafter up to 20mg/day in divided doses. Twice daily dosing is usually adequate. **Basic N.H.S. Cost** 0.5mg tablet (PL57/0149) pack of 100, £4.08; 1mg tablet (PL57/0106) pack of 100, £5.25; 2mg tablet (PL57/0107) pack of 100, £5.25; 5mg tablet (PL57/0107) pack of 100, £5.25; 5mg tablet (PL57/0108) pack of 100, £15.58.

Also available is a b.d. Starter Pack, for hypertension only, containing  $8\times0.5$ mg and  $32\times1$ mg Hypovase tablets, £2.70.

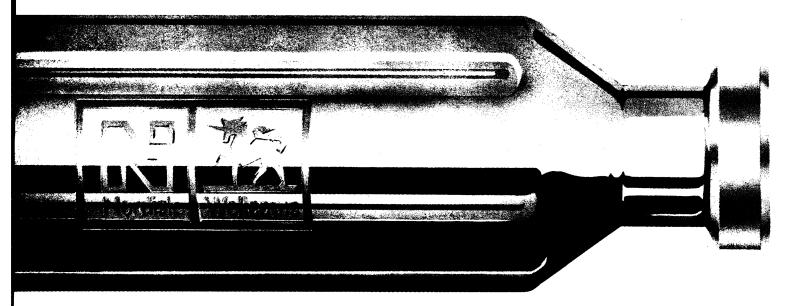
REFERENCES: 1. Leren, P., Eide, I., Foss, O. P., Helgeland, A., Hjermann, I., Holme, I., Kjeldsen, S. E., The Oslo Study, Lancet, July 5th, 1980; 2: 4–6. 2. Medical Research Council Working Party, Lancet 1981, II, 539–543. 3. Veterans Administration Co-operative Study Group, JAMA, 1970; 213: 1143–1152. 4. Hypertension Detection and Follow-up programme Co-operative group, JAMA, 1979; 242: 2560–2577. 5. Australian National Blood Pressure Study Management Committee, Lancet, 1980, I, 1261–1267. 6. Johnson, B. F., Journal of Cardiovascular Pharmacology, 1982, 4, Suppl. 2: S213–221. 7. Kaplan, N. M., Journal of Cardiovascular Pharmacology, 1982, 4, Suppl. 2: S187–189. 8. Oliver, M. F., New England Journal of Medicine 1982; 306, No. 5: 297–298. 9. Lowenstein, J., Neusy, A. J., Journal of Cardiovascular Pharmacology, 1982; 4, Suppl. 2: S262–264.

Full information on request. Pfizer Ltd., Sandwich, Kent. \*Trade Mark. 20868



### **Dual Control**

Two research based organisations combine



-now-a comprehensive treatment programme for the British diabetic patient.

PRESCRIBING INFORMATION VELOSULIN (Neutral Insulin Injection BP). INSULATARD (Isophane Insulin Injection BP). MIXTARD 30/70 (Neutral Suspension comprising 30% Neutral Insulin Injection BP). INSULATARD (Isophane Insulin Injection BP). MIXTARD 30/70 (Neutral Suspension comprising 50% Neutral Insulin Injection BP). Welosulin, Insulatard, Mixtard 30/70 and Initard 50/50 are manufactured from highly purified pork insulin. PRESENTATION Velosulin, Insulatard, Mixtard 30/70 and Initard 50/50 are available in 10ml vials containing to iu/ml, 80 iu/ml and 100 iu/ml, and are fitted with tamper-proof caps colour coded as follows:-40 iu/ml – Blue, 80 iu/ml – Green. 100iu/ml – Orange. To provide sensory identification of insulin ype, the metal sealing rings of the vial have tactile marks as follows:-40 iu/ml and provide marks. Initard 50/50 – four marks. USES Treatment of insulin Dependent Diabetics. Velosulin is particularly suitable in the treatment of diabetic coma and precoma. It may be mixed with Insulatard (NPH). Mixtard 30/70 or Initard 50/50 in all proportions without changing the characteristic effect of any of the types of insulin. (See Data Sheet for procedure). DOSAGE AND ADMINISTRATION Dosage to be determined by the physician,

The Nordisk and Wellcome Foundations in diabetes.

Nordisk Insulinlaboratorium, the Danish charitable Foundation, has been at the forefront of insulin innovation for sixty years. Through a dedicated research programme Nordisk has been first with slow-acting insulin preparations, first to concentrate production on pork and first to bring to patients and physicians the benefits of single-vial mixes.

The Wellcome Foundation is an acknowledged leader in research, and has been supplying the needs of the British diabetic patient for sixty years. Wellcome also continues to demonstrate an extensive commitment to postgraduate medical education throughout the United Kingdom.

The mutual co-operation of these two organisations creates a major force in diabetes therapy – with a flexible range of highly purified pork insulins now to appear under a combined Nordisk Wellcome label. Additionally, and importantly, the philosophy of both organisations extends to supportive care of the diabetic patient in the community together with a continuing nationwide series of educational courses and symposia for the professions.

Also, for the first time and as a result of this cooperation, part of the complex manufacturing process of these insulins will be carried out in the United Kingdom. Distribution of these insulins will be effected throughout this country and the Republic of Ireland by The Wellcome Foundation Ltd.

As may be expected of two highly regarded research based organisations, further important product developments will be announced under the Nordisk and Wellcome symbol, substantiating their claim that with proper care the effect of diabetes on quality of life can be further minimised.



## Nordisk and Wellcome in diabetes Caring in concert

Further information is available from: Nordisk-UK,

Highview House, Tattenham Crescent, Epsom Downs, Surrey KT18 5OI.

Telephone No: Burgh Heath (07373) 60621

The Wellcome Foundation Limited, Crewe Hall, Crewe, Cheshire CWI 1UB. Telephone No: Crewe (0270) 583151

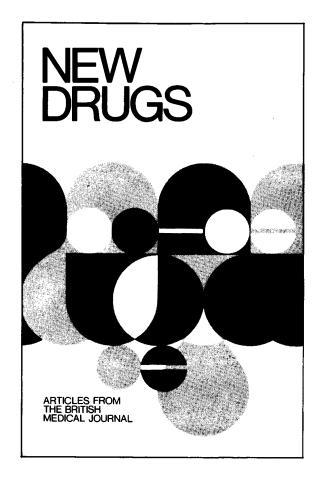
according to the needs of the patient. Avoid accidental intramuscular injection. CONTRA-INDICATIONS AND WARNINGS Insulin is contra-indicated in hypoglycaemia. In the event of overdosage, glucose should be given either orally or intravenously. Glucagon may also be administered. Insulatard, Mixtard 30/70 and Initard 50/50 should not be given intravenously. Treatment with cortico-steroids, oral contraceptives or thyroid hormones may lead to an increase in dosage requirements. Beta-blockers may affect insulin requirements and mask hypoglycaemia. U100 insulin must only be used in U100 syringes. PHARMACEUTICAL PRECAUTIONS Store at 2-8 degrees C, protected from sunlight. Do not freeze. LEGAL CATEGORY P. BASIC NHS PRICE VELOSULIN: 40 in/ml £2.34, 80 in/ml £4.62, 100 in/ml £6.32. INSULATARD, MIXTARD 30/70, INITARD 50/50: 40 in/ml £2.39, 80 in/ml £4.71, 100 in/ml £4.71, 100 in/ml £6.32. INSULATARD, MIXTARD 30/70 3132/0014-15-21 and 0003/0189/3/4. Initard 50/50 3132/0012-13-20 and 0003/0189/6/7.

# **NEW DRUGS**

In the past few years the number of important new drugs and our understanding of pharmacology have continued to increase. Reliable and unbiased information on the therapeutic use of these agents is, however, not always readily available. Articles recently published in the  $BM\mathcal{F}$  on entirely new groups of drugs –  $H_2$  receptor antagonists, calcium antagonists, captopril – and on new members of groups of drugs already available – beta-blockers, tranquillisers, hypnotics, diuretics – fill this gap and are now collected together in book form. Busy practitioners will find that this comprehensive review allows them to make a more rational choice of treatment.

Price: Inland £6.50; Overseas £7.50/USA\$13.00 (Inland £6.00; Overseas £7.00/USA\$12.00 to BMA members) Despatched by air overseas

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# PATERT RESPONSE In a recent multicentre trial lower 17 weres, a lot stat tory response was obtained at 81 lot patients. Ref. 1 May & Baker I to load a from 1695 patients analysis of the patients.



#### .NO RELEASE IN THE STOMACH

The acid environment prevents release of the drug through the pH-sensitive membrane of each pellet. Gastric irritation is therefore minimised.

**PROGRAMMED** LEASE IN THE

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2 CAPSULES o.d.

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Prescribing information

Dosage Orally with food, 100-200mg once daily Indications Rheumatological disorders, including osteoarthnits, rheumatoid arthnits, ankylosing spondylitis, acute could be a condition and dysmenormoea Contra-indications Peptic ulceration, chronic dyspepsia, use in children, use in patients sensitive to aspirn or other non-steroidal anti-inflammatory drugs known to inhibit prostaglandin





M&B May&Baker

synthetase or with bronchial asthma or allergic disease. **Precautions** Pregnancy, lactation Concomitant administration of protein-bound drugs. **Side-effects** Occasional gastro-intestinal intolerance, very rare gastro-intestinal haemorrhage/skin rashes. **Presentation** 100mg capsules PL 0012/0143 **Basic NHS Cost** (Aug 'B3) 100 x 100mg capsules £17 98. Oruvall is a trade mark Further information is available on request. May & Baker Ltd., Dagenham, Essex RM10 7XS.

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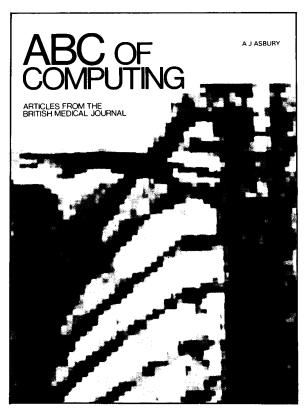
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#### Critical Care of the Obstetric Patient

Edited by Richard L. Berkowitz

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This book contains detailed information about the diagnosis and management of serious, but relatively infrequent, conditions affecting pregnant women

It is invaluable in that it assembles in one volume relevant material from a variety of sources relating to the modern assessment and therapy of potentially fatal conditions which can arise in pregnancy

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# Drugs and Pregnancy: Human teratogenesis and related problems

Edited by D.F. Hawkins

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This is a book by clinicians for clinicians and will be of great benefit when decisions must be made on when and what drugs to prescribe to pregnant patients

It gives basic guidance through the mass of drug information emanating from sources of varying usefulness, complexity and authenticity

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# **Drug Prescribing in Pregnancy** (Current Reviews in Obstetrics & Gynaecology-7)

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This invaluable book provides the most up-to-date information available on the effects of drugs on a mother and her fetus

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# AGAINST RESPIRATOR THAN AMPICILLIN, **ZOLE AND TETRACYCL**

**Excellent clinical activity** in hospital patients

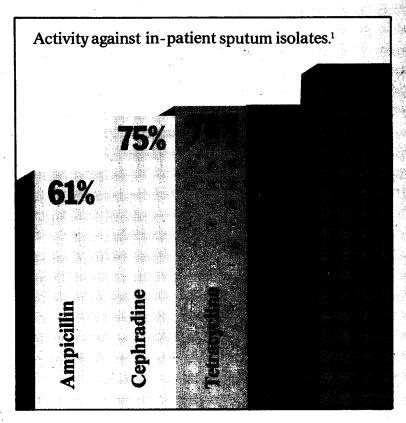
Clinical trials on a wide range of respiratory infections in hospital have confirmed that Augmentin is highly effective in practice.2,3 One study<sup>2</sup> involved 91 patients with acute

exacerbations of chronic bronchitis or pneumonia, many of whom had underlying diseases and all of SUCCESS whom had failed to respond to one or more oral or

parenteral antibiotics such as ampicillin, tetracycline, co-trimoxazole and cefuroxime. Despite these circumstances, when Augmentin was administered orally "80 of the patients had an excellent or a partial response consisting both of improvement in general condition and of change of sputum character from purulent to mucoid."2

Penicillin-based therapy

Augmentin has been shown to be welltolerated as would be expected from a penicillin-based antibiotic.4



# AUGMENTIN THE PROMISE OF SUCCESS FOR MORE PATIENTS!

#### **Prescribing Information**

USES: Chest; ENT, Genito-urinary tract, Skin and soft tissue infections. DOSAGE: Chest, EN I, Gentto-urinary tract, Skin and sort tassue infections.

DOSAGE: Adults and children over 12 years: 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
(186 mg) three times a day. Children 9 months-2 years: 5 ml half-strength Augmentin
Paediatric Suspension (78 mg) three times a day. Children 3-9 months: 2.5 ml half
strength Augmentin Paediatric Suspension (39 mg) three times a day. In severe infections,

dosages for patients aged 2 years and over, may be doubled. 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. Dosage need not be reduced in patients with renal impairment, unless dialysis is required. SIDE-EFFECTS: Uncommon, mainly mild and transitory, eg diarrhoea, indigestion, nausea, vomiting, candidiasis, urticarial and erythematous rashes. If gastro-intestinal side-effects occur, they may be reduced by taking Augmentin at the start of meals.

PRESENTATIONS: (Prices correct at October, 1983.) ▼ Augmentin Tablets and Dispersible Tablets, each providing 125 mg clavulanic acid with 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 - 32½p PL0038/0272. ▼ Augmentin Junior Suspension. Powder to prepare 100 ml suspension. Each 5 ml provides 62 mg clavulanic acid with 125 mg amoxycillin. Cost per 5 ml dose – 18p PL0038/0274. ▼ **Augmentin Paediatric Suspension**. Powder to prepare 100 ml suspension. Each 5 ml provides 31 mg clavulanic acid with 125 mg amoxycillin. Cost per 5 ml dose – 14p PL0038/0298. The clavulanic acid is present as potassium clavulanate and the amoxycillin as the trihydrate. All the above presentations are sugar-free formulations. Further information is available on request to the Company.



**Beecham Research** Laboratories, Brentford, England. Augmentin and the BRL logo are trade marks.



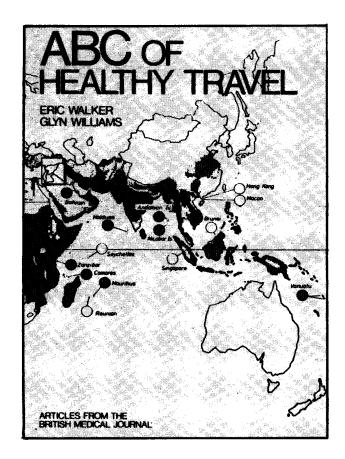
# ABC OF HEALTHY TRAVEL

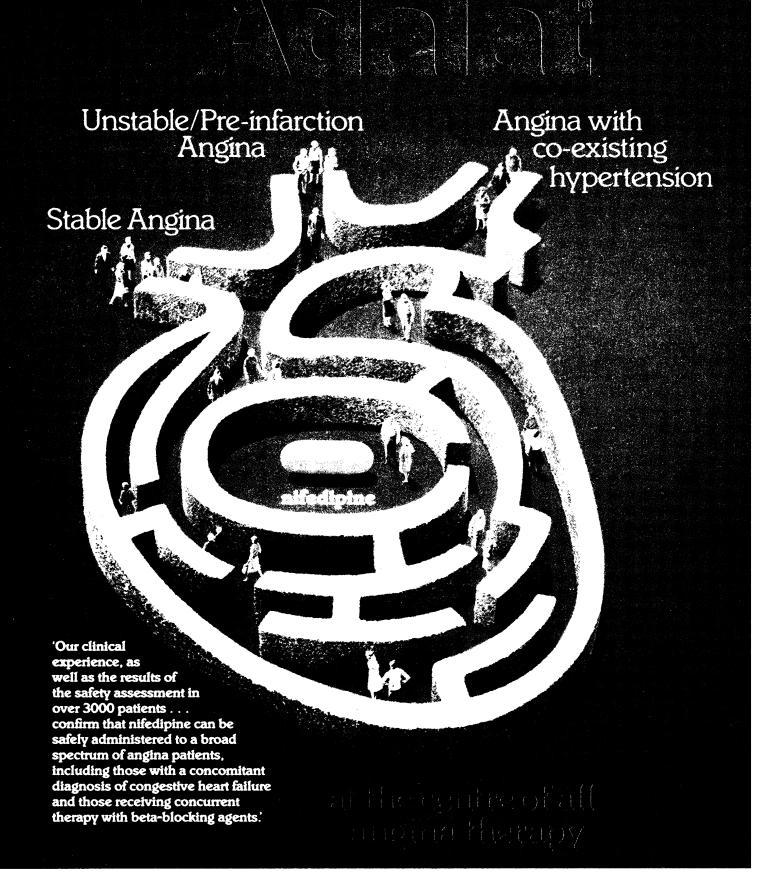
ERIC WALKER GLYN WILLIAMS

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 return home. In the ABC of Healthy Travel in 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 £4.00; Overseas £6.00/USA\$10.50 (Inland £3.50; Overseas £5.50/USA\$9.50 to BMA members) Despatched by air overseas

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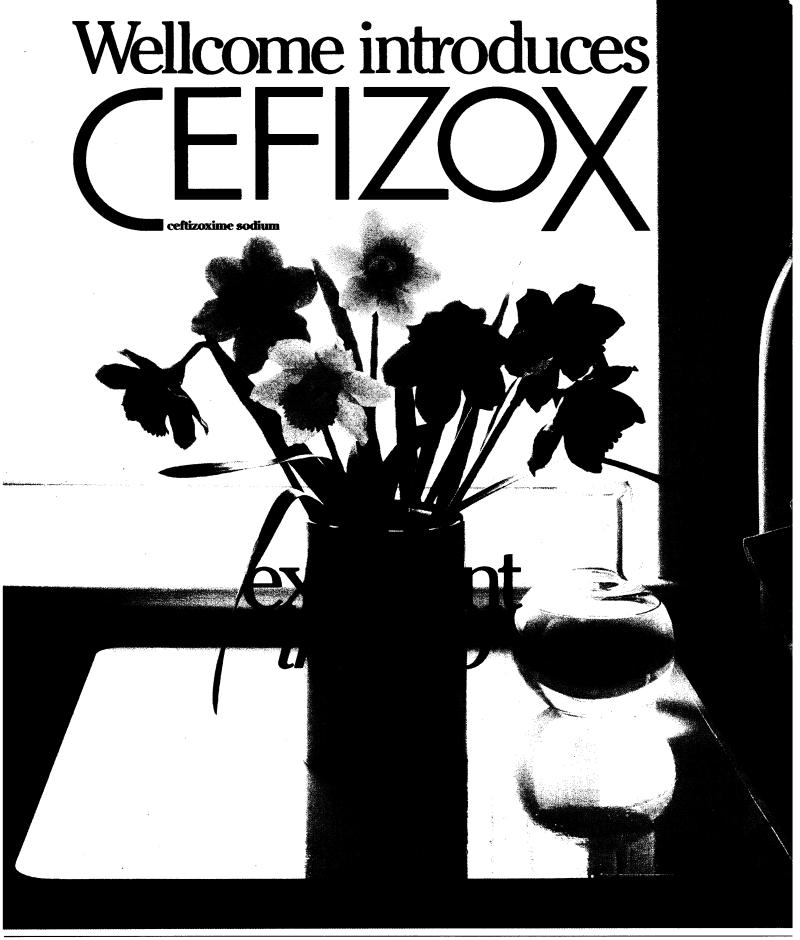
Prescribing Information
Indications: For the treatment and prophylaxis of angina pectoris. Dosage and Administration:
Maintenance 1 to 2 lomg capsules nifedipine (Adalat) 3 times daily with a little fluid during or
after meals; the 5 mg capsule of nifedipine (Adalat) 5 permits titration of initial dosage in the
elderly. Coatra-Indications: Must not be given to women capable of child bearing. Warnings
and Precarations: Adalat is not a beta-blocker and therefore gives no protection against the
dangers of abrupt beta-blocker withdrawal; any such withdrawal should be by gradual
reduction of the dose of beta-blocker, preferably over 8-10 days. Adalat may be used in
combination with beta-blocking drugs and other antihypertensive agents, but the possibility of
an additive effect resulting in postural hypotension should be borne in mind. Adalat will not
prevent possible rebound effects after cessation of antihypertensive therapy. Adalat should be
used with caution in patients whose cardiac reserve is poor. Ischaemic pain has been reported
in some patients, commonly within 30 minutes of the introduction of Adalat therapy. Patients
experiencing this effect should discontinue Adalat. The use of Adalat in diabetic patients may experiencing this effect should discontinue Adalat. The use of Adalat in diabetic pa

require adjustment of their control. There is no known drug incompatibility. **Side Effects**: Adalat is well tolerated. Minor side effects, usually associated with vasodilatation are mainly headache, flushing and lethargy. These are transient and invariably disappear with continued treatment. Overdosage – standard measures such as atropine and noradrenaline may be used for resultant bradycardia and hypotension. Intravenous calcium gluconate may be of benefit. Pharmaceutical Precautions: The capsules should be protected from strong light and must be stored in the manufacturer's original container. Legal Category: POM. Pack Quantities: Adalat and Adalat 5 are available in foil packs of 100 capsules. Daily Treatment Cost: Adalat; 37p per 3 capsules. Adalat 5; 26p per 3 capsules. Product Licence Number: UK Adalat capsules 10mg PL0010/0021 UK Adalat 5 capsules 5mg PL0010/0079.



Full prescribing information on Adalat (nifedipine) is available from: Bayer UK Limited, Pharmaceutical Division, Haywards Heath, West Sussex, RH16 1TP. Telephone: Haywards Heath (0444) 414161. 

Registered trademark of Bayer, Germany.



#### Prescribing information:

Presentation: Vials containing 500mg, 1g and 2g of ceftizoxime as the sterile sodium salt.

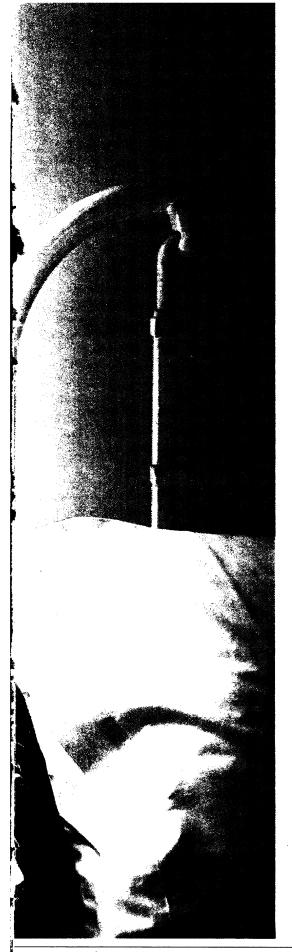
Uses: Broad-spectrum, bactericidal, cephalosporin antibiotic. Indications include lower respiratory tract infections, genito-urinary tract infections including gonorrhoea, intra-abdominal infections, septicaemia, skin and soft tissue infections. Cefizox is active against a wide range of Gram-positive and Gram-negative organisms and is stable to a broad spectrum of beta-lactamases produced by both aerobic and anaerobic organisms.

Dosage and administration: By slow intravenous injection,

by continuous or intermittent intravenous infusion, or by deep intramuscular injection. For reconstitution details see Data Sheet. Modification of the following guideline dosages is necessary in patients with impaired renal function (see Data Sheet). Adults: urinary tract infection, 0.5-lg 12-hourly, IM or IV; gonorrhoea, lg single dose, IM; other infections, 1-2g 8-12 hourly, IM or IV; severe or life-threatening infections, 2-3g 8-hourly, IM or IV. Children over the age of 3 months: 30-60 mg/kg bodyweight/day in 2-4 divided doses, increased in severe or life-threatening infections to 100-150mg/kg bodyweight/day. The total dose should not exceed the adult dose. Under the age of 3 months: insufficient data to recommend use.

**Contra-indications:** Hypersensitivity to cephalosporin antibiotics

Precautions: Renal status should be monitored, especially in seriously ill patients receiving maximum dose therapy and coadministration of aminoglycoside antibiotics. Although the occurrence has not been reported with Cefizox, nephrotoxicity has been reported following concomitant administration of other cephalosporins and aminoglycosides. As with any other antibiotic, prolonged use may result in overgrowth of non-susceptible organisms. Caution in penicillin-sensitive patients because of possible cross-reaction. Side- and adverse effects: Cefizox is generally well



The excellent *in vivo* performance of Cefizox is the sum of many factors. Most notably, its powerful spectrum of antibacterial activity, stability to ß-lactamases, and highly effective tissue penetration.

#### Potent antibacterial spectrum

Cefizox is a powerful, third-generation, injectable cephalosporin. It has a wide spectrum of activity against both Gram-negative and Gram-positive aerobic and anaerobic organisms including *E. coli, Klebsiella pneumoniae, Proteus mirabilis, H. influenzae, Strep. pneumoniae, Staph. aureus* and *Strep. pyogenes*! 2

It is also active against hospital opportunist pathogens not so frequently encountered, such as indole-positive Proteus, *Serratia marcescens, Morganella morganii*, and Enterobacter.<sup>1,2</sup>

#### Superior &-lactamase stability

Cefizox has excellent ß-lactamase stability, and is resistant to a wider range of ß-lactamases than cefotaxime.

#### **Excellent tissue penetration**

After a single dose, concentrations of Cefizox in most tissues and body fluids are easily in excess of the MIC of likely pathogens.

Study has shown that Cefizox achieves greater concentration in most tissues and body fluids than cefotaxime, after equivalent doses!

And, unlike cefotaxime, Cefizox is not metabolised. Thus the full therapeutic effect of Cefizox is maintained.

#### **International clinical success**

Extensive experience confirms that Cefizox provides excellent clinical results against opportunist hospital pathogens.

It has been shown to be highly effective in lower respiratory tract infections, genito-urinary tract infections including gonorrhoea, intraabdominal infections, septicaemia, and skin and soft tissue infections?

Cefizox has also been notably successful in treating infections resistant to ampicillin, carbenicillin, cefamandole, tobramycin or gentamicin.<sup>6</sup>

And Cefizox has proved suitable for use in neutropenic patients<sup>7</sup> and children.<sup>8</sup>

With a broad spectrum of antibacterial activity, proven efficacy and a low level of side effects? Cefizox is a logical choice in serious infection. Especially before the infecting organism is identified, where multiple infection is suspected, or the infection is resistant to other cephalosporins, aminoglycosides or penicillins.

When infection threatens, Cefizox is an excellent choice.



**References** 1 Barry, A.L. *et al* (1982), *J. Antimicrob. Chemother.*, **10**, Suppl. C, 25. 2 Parks, D. *et al* (1982), *ibid.*, 327. 3 Simpson, I.N., *et al* (1982), *J. Antimicrob. Chemother.*, **9**, 357. 4 Gerding, D.N. and Peterson, L.R. (1982), *J. Antimicrob. Chemother.*, **10**, Suppl. C, 105. 5 Quintiliani, R. and Nightingale, C.H. (1982), *ibid.*, 99. 6 Neu, H.C. (1982), *ibid.*, 193. 7 Lawson, R.D. and Baskin, R.C. (1982), *ibid.*, 159. 8 Shikuma, C.M. *et al* (1982), *ibid.*, 293. 9 Platt, R. (1982), *ibid.* 135. Cefizox is a Trade Mark.

tolerated. The most common adverse reactions have been local following IM or IV injection. These include burning, cellulitis, pain, induration, tenderness, paraesthesia and phlebitis. Other adverse reactions include hypersensitivity reactions (rash, pruritis, fever), gastrointestinal disturbance (diarrhoea, nausea, and vomiting), vaginitis, transient eosinophilia, thrombocytosis. Neutropenia, leucopenia and thrombocytopenia have been reported rarely. Some individuals have developed a positive Coombs' test. Transient elevation in SGOT, SGPT, alkaline phosphatase, BUN and serum creatinine have occasionally been observed.

Use in pregnancy and lactation: There are no data in

pregnant women, thus the benefit of using Cefizox in pregnancy should be weighed against the possible hazard. Caution should be exercised if Cefizox is administered to a nursing mother

nursing mother. **Basic NHS costs:** 

1 x 500mg vial (PL3/0174) \$2.76 1 x 1g vial (PL3/0175) \$5.50 1 x 2g vial (PL3/0175) \$11.00

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

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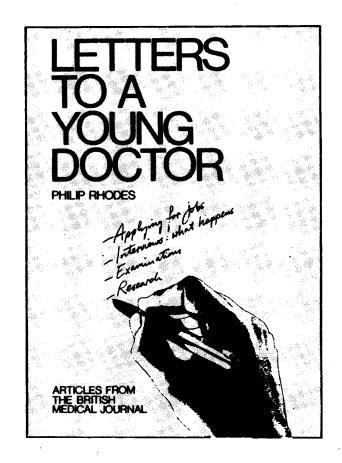


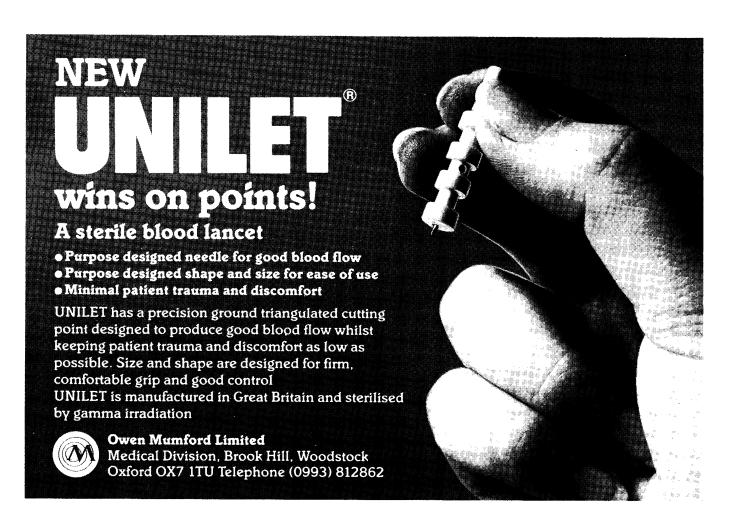
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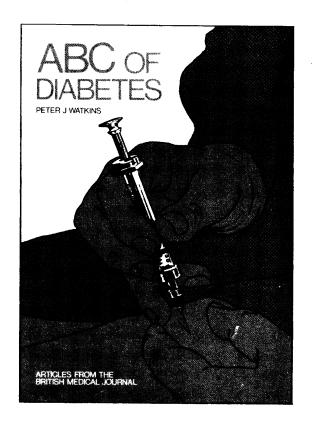


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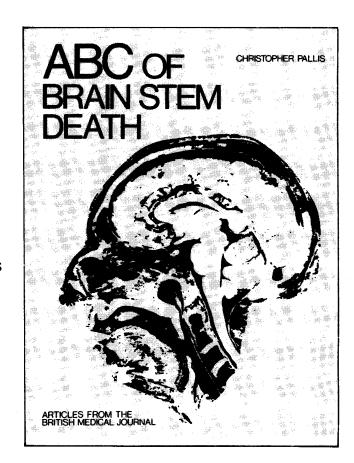
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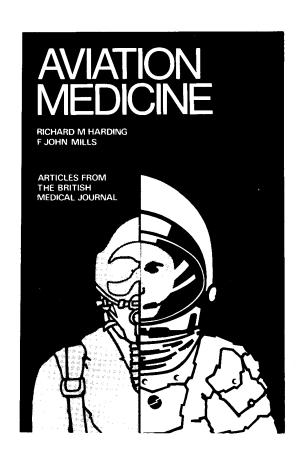
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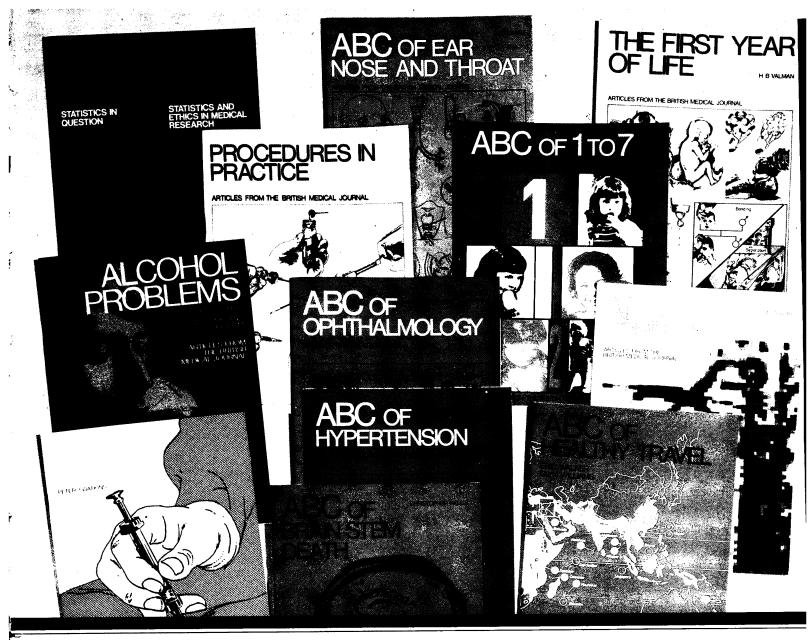
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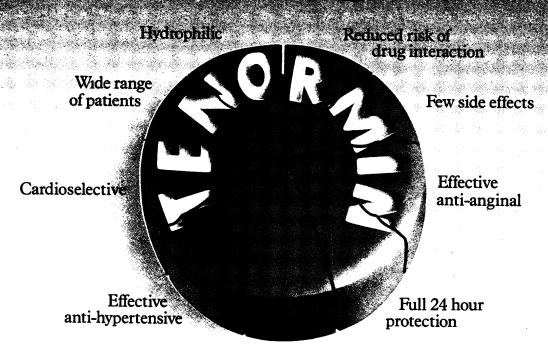
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