



a troublesome problem
in modern gynaecology

Intact hymen and *Candida* vaginitis

an intact hymen makes topical therapy
impossible or inadequate

The modern approach:

Nizoral TRADEMARK

ketoconazole

**just 2 oral tablets daily
with a meal
for 5 days.**

Prescribing information

Presentation: white, flat, half scored uncoated tablets marked "Janssen" on one side and K/200 on the reverse. Each tablet contains 200 mg ketoconazole.

Uses: *Nizoral* is an orally active antimycotic for the treatment in adults of vaginal candidosis, superficial and systemic mycoses including dermatophyte and yeast infections of the skin, hair and nails, yeast infections of the mouth and G.I.-tract.

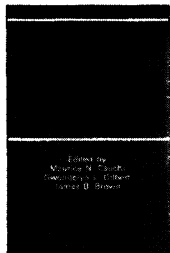
Also maintenance treatment of systemic mycoses and chronic mucocutaneous candidosis and prophylaxis in "at risk" patients. In children: systemic mycoses and severe local infections where previous topical treatment has failed.

Side-effects, precautions, contra-indications:

contra-indicated in pregnancy. For maximal absorption *Nizoral* should be taken with meals. The use of agents which reduce gastric acidity (anti-cholinergic drugs, antacids, H₂-blockers) should be avoided and, if indicated, such drugs should be taken not less than two hours after *Nizoral*. Nausea, skin rash, headache and pruritus may occasionally be observed. Alterations in liver function tests have occurred in patients on ketoconazole, these changes may be transient. Cases of hepatitis have been reported with an incidence of about 1 per 10,000 patients. Some of these may represent an idiosyncratic adverse reaction to the drug. This should be borne in mind in patients on long-term therapy. If a patient develops jaundice or any symptoms suggestive of hepatitis, treatment with ketoconazole should be stopped. Mild asymptomatic increases of liver enzyme levels, on the other hand, do not necessitate discontinuation of the treatment. Ketoconazole, when given together with cyclosporin A results in increased blood levels of cyclosporin A. It is important that blood levels of cyclosporin A are monitored if the two drugs are given concomitantly. Ketoconazole 200 mg once daily produces a transient decrease in plasma levels of testosterone. During long term therapy at this dose, testosterone levels are usually not significantly different from controls. In rare instances, gynecomastia has been reported.

JANSSEN
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B-2340 Beerse, Belgium

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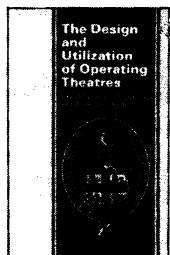


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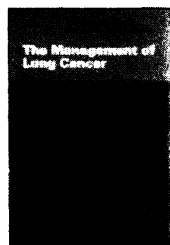


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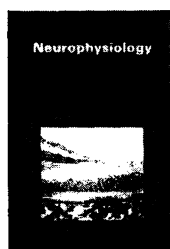
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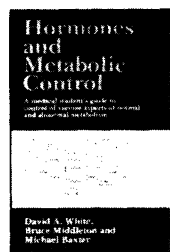
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To be published 27 April 1984

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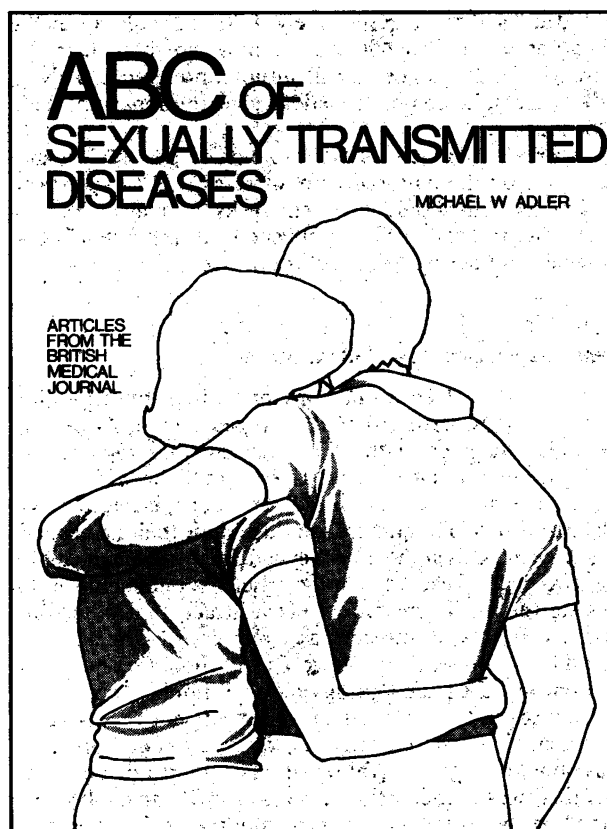
MICHAEL W ADLER

AIDs and genital herpes are only the more dramatic signs of a general increase in the number and range of sexually transmitted diseases. Yet these conditions are not seen only in sexually transmitted disease clinics and doctors need to be aware that common clinical problems such as urinary tract infections, rashes, and pelvic pain may have a sexual origin. Professor Michael Adler's ABC describes the presentation, diagnosis, and management of these conditions, emphasising the need to take a broad clinical view of patients and their problems.

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LETTERS TO A YOUNG DOCTOR

PHILIP RHODES

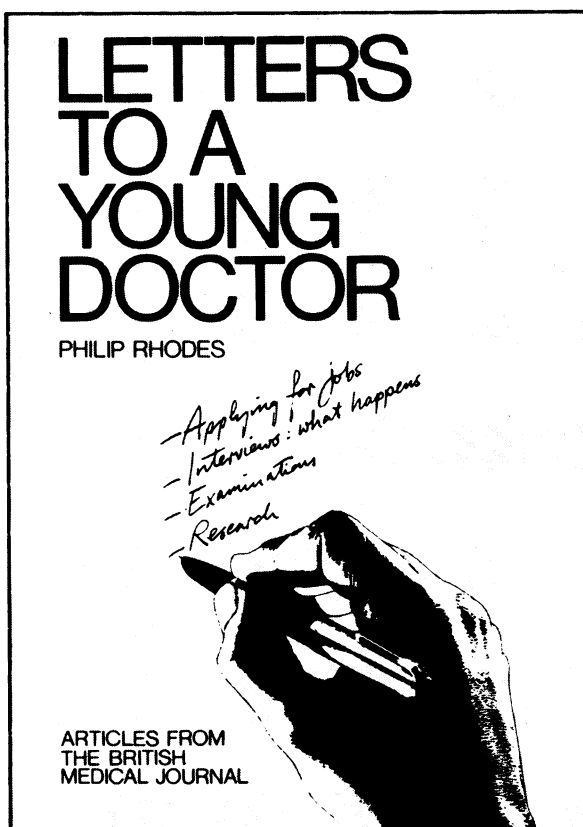
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edited by **G. Bonadonna**, *Istituto Nazionale Tumore, Milan, Italy*

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Cancer Investigation and Management Series

April 1984 360 pages
0471 90193 8 approx. £25.00/\$37.50

VERTIGO

edited by **M.R. Dix**, *Honorary Consultant Audiological Physician, National Hospital, London* and **J.D. Hood**, *MRC Neuro-Otology Unit, Institute of Neurology, National Hospital, London*

To the clinician, and particularly the general practitioner, the vertiginous patient has always presented a difficult problem. This book aims to provide a comprehensive coverage of the many aspects of vertigo. Otologists, neurologists and physicians in audiological medicine will find it an invaluable reference source which bears in mind the needs of the general practitioner as well as the consultant to whom the vertiginous patient might be referred.

April 1984 504 pages
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edited by **A.C. Cuellar**, *Departments of Pharmacology and Human Anatomy, University of Oxford*

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edited by **M.R. Trimble**, *Department of Psychological Medicine, National Hospital for Nervous Diseases, London*

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Contra-indications, Warnings etc

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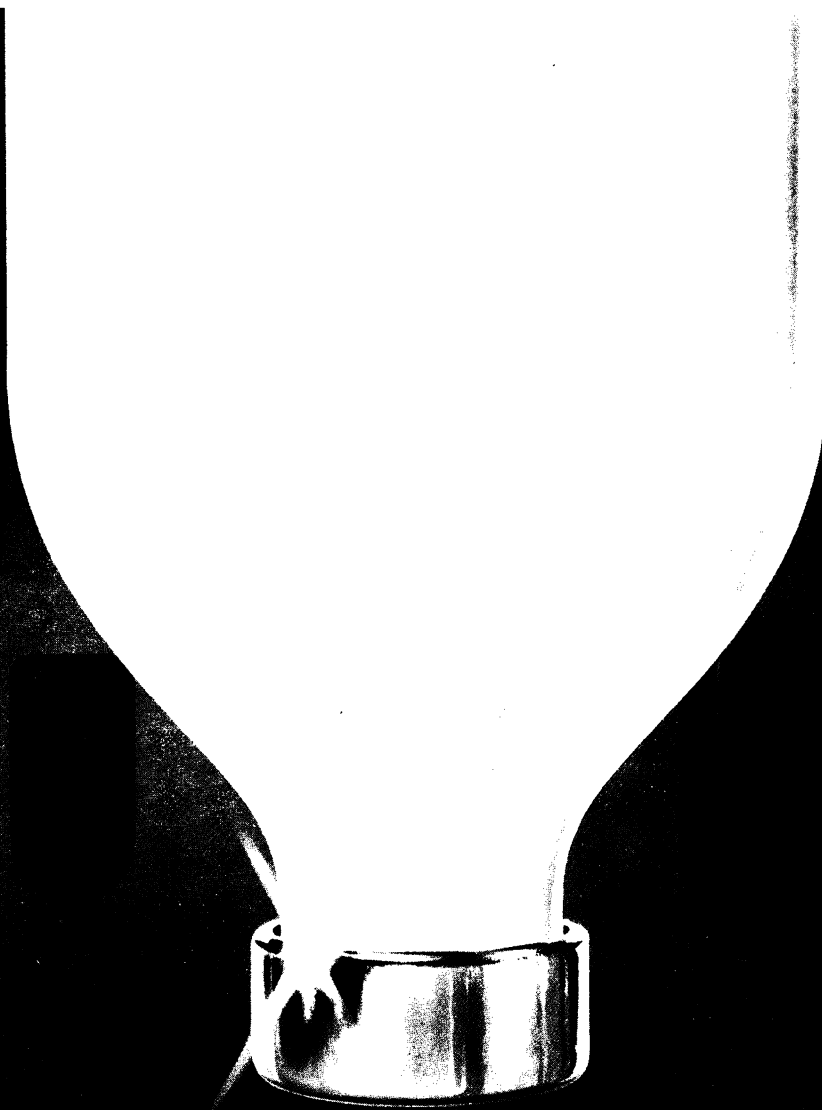
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See Data Sheet for full prescribing information.

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of angina attacks

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