

a troublesome problem
in modern gynaecology

"Pill"-vaginitis

oral contraceptives create the ideal environment
for *Candida albicans* to develop

The modern approach:

Nizoral

ketoconazole

just 2 oral tablets daily
with a meal

scored uncoated tablets. Each tablet contains 200 mg of ketoconazole, a broad-spectrum antifungal agent. Nizoral is indicated for the treatment of systemic mycoses including dermatophytosis, candidiasis, cryptococcosis, and aspergillosis. It is also indicated for the treatment of systemic mycoses and chronic mucocutaneous candidiasis 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 depressed below control. In rare instances, gynecomastia has been reported.

JANSSEN
PHARMACEUTICA
B-2340 Beerse, Belgium

The British Council International Medical Courses

THE AGEING OF POPULATIONS: CLINICAL CARE OF THE ELDERLY

9-21 September 1984 in Edinburgh

This course will present the British viewpoint and experience in relation to the broad field of geriatric medicine and psychogeriatrics with a balance between practice and theory. The increase in people surviving into extreme old age has led to a parallel increase in the numbers of elderly patients with mental illness such as dementia, and there is now a large and growing body of knowledge of age changes and their distinction from disease changes. The Directors of Studies will be **Professor J Williamson** and **Dr R G Smith** of the Department of Geriatric Medicine in the University of Edinburgh. The course is intended for senior medically qualified persons with an interest in the problems of ageing.

Fee £695 (Residential)

INFLAMMATORY BOWEL DISEASE

16-28 September 1984 in Birmingham

The aim of this course is to review the current knowledge, recent advances and practical management of inflammatory bowel diseases. Recent developments in the medical, nutritional and surgical management of Crohn's disease will also be included. The Directors of Studies will be **Mr J Alexander-Williams**, Consultant Surgeon and **Dr R N Allan**, Consultant Physician at the General Hospital in Birmingham and **Mr M R B Keighley**, Reader in Surgery in the University of Birmingham. The course is intended for physicians and surgeons with some years' experience in gastroenterology.

Fee £645 (Residential)

HEARING SPEECH

16-28 September 1984 in London

The purpose of this course will be to provide an up-to-date review of the scientific basis of hearing speech and in particular the practical considerations involved in the diagnosis and management of patients. There will be a series of lectures and demonstrations in laboratories and in clinics. The course will be under the direction of **Professor A Fourcin**, Department of Experimental Phonetics, University College London and **Professor R Hinchcliffe**, Department of Audiology, Institute of Laryngology and Otology, University of London. The course is designed for senior clinicians and others concerned with the diagnosis and care of people with impaired hearing or speech.

Fee £545 (Residential)

CHILD MENTAL HEALTH AND PSYCHOSOCIAL DEVELOPMENT

23 September-5 October 1984 in London

This course is intended to provide information on current methods of assessing and treating emotional and behaviour problems, learning difficulties and mental retardation in children. In addition to formal lectures, there will be ample opportunity to discuss clinical service, teaching and research issues in small working groups. The Directors of Studies will be **Professor P J Graham** and **Dr Naomi Richman** of the Department of Child Psychiatry, Institute of Child Health, University of London and of the Hospital for Sick Children, Great Ormond Street, London. The course is intended to interest psychiatrists, paediatricians, psychologists and senior social workers working entirely with, or with a special interest in, children.

Fee £630 (Residential)

FETAL INTENSIVE CARE

31 October-8 November 1984 in London

This course will review current ways of monitoring the fetus in antenatal and intrapartum care. Expert speakers will lead seminars of consultants in discussion about these subjects, and the symposium will be arranged to allow time for discussion and formal participation from course members. The Director of Studies will be **Professor G V P Chamberlain** of the Department of Obstetrics and Gynaecology, St George's Hospital Medical School, University of London. The course is intended for consultants and senior physicians in charge of pregnancy and childbirth.

Fee £595 (Residential)

EXPANDING HORIZONS OF DIAGNOSTIC ULTRASOUND

11-23 November 1984 in London

This course is designed to explore recent developments in the clinical applications of diagnostic ultrasound and will consist of informal lectures, optional tutorials and extensive discussion periods. The course will be directed by **Dr H B Meire**, Consultant Radiologist at King's College Hospital, London. The Co-Director of Studies will be **Dr P N T Wells**, Chief Physicist at Bristol General Hospital. Applicants should be of consultant or senior registrar status or senior paramedical personnel and should preferably have at least one to two years' experience of applied clinical diagnostic ultrasound.

Fee £735 (Residential)

DIABETES AND ITS COMPLICATIONS: CLINICAL AND SCIENTIFIC ASPECTS

18-30 November 1984 in London

The course will include detailed consideration of the control of diabetes. Methods of recognition of diabetic complications and their early and late treatment will be discussed, and a session will be devoted to embryogenesis, pregnancy and neonatal complications. The Directors of Studies will be **Professor Harry Keen**, Professor of Human Metabolism and **Dr John Pickup**, Senior Lecturer in Chemical Pathology, Guy's Hospital Medical School, University of London. The course is intended for clinicians with an interest in the scientific basis of the complications of diabetes. It is hoped that those actively involved in clinical research in this field will attend.

Fee £675 (Residential)

PAEDIATRIC GASTROENTEROLOGY

17-29 March 1985 in Birmingham

This course will cover a wide range of topics in paediatric gastroenterology. Recent advances in both theoretical and practical knowledge will be highlighted. There will be opportunities to present to fellow course members interesting clinical problems, X-rays and histological specimens from their own experience, and to discuss personal research projects. The Directors of Studies will be **Professor A S McNeish**, Professor of Paediatrics and Child Health in the University of Birmingham, **Dr P J Milla**, Senior Lecturer in Paediatrics, Institute of Child Health, University of London and **Dr C A Hughes**, Senior Lecturer in Paediatrics and Child Health, University of Birmingham. The course content will be of interest and relevance to clinicians, both medical and surgical, to developmental biologists and basic scientists whose field of interest is gastrointestinal pathophysiology.

Fee £745 (Residential)

FURTHER INFORMATION AND APPLICATION FORMS CAN BE OBTAINED FROM YOUR LOCAL OVERSEAS REPRESENTATIVE OF THE BRITISH COUNCIL OR FROM COURSES DEPARTMENT, THE BRITISH COUNCIL, 65 DAVIES STREET, LONDON W1Y 2AA.

ABC OF DIABETES

PETER J WATKINS

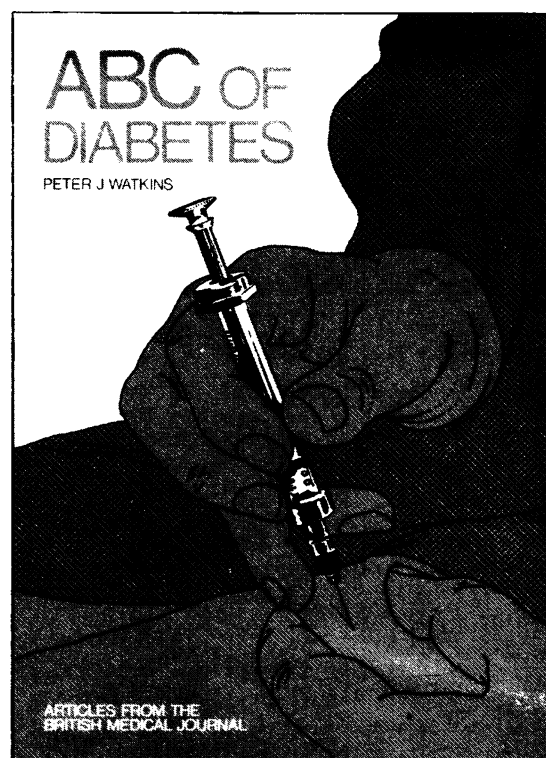
Innovations in the treatment of diabetes have increased rapidly in the last decade: self measurement of blood glucose, intravenous infusions and intramuscular insulin for diabetic emergencies, continuous subcutaneous insulin infusions, and light coagulation for diabetic retinopathy have all helped to improve the outlook for diabetics. Dr Peter Watkins' articles sets these advances in their clinical context and provide a practical guide to the management of diabetes for the non-specialist, both doctor and nurse.

Price: Inland £4.50;
Overseas £6.50/USA\$11.50
(Inland £4.00;
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Publication date 27 April 1984

ABC OF SEXUALLY TRANSMITTED DISEASES

MICHAEL W ADLER

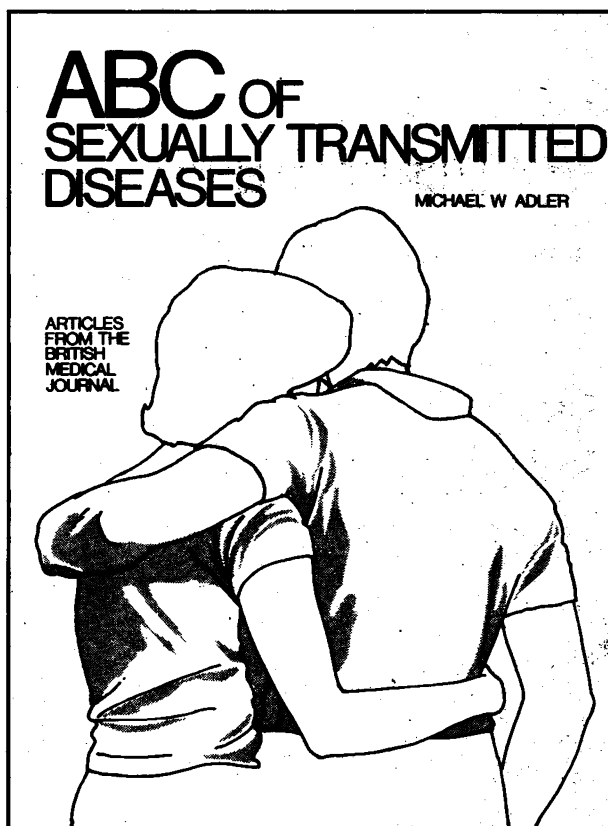
AIDS and genital herpes are only the more dramatic signs of a general increase in the number and range of sexually transmitted diseases. Yet these conditions are not seen only in sexually transmitted disease clinics and doctors need to be aware that common clinical problems such as urinary tract infections, 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.

Price: Inland £4.00;
Overseas £6.00/USA\$10.50
(BMA members: Inland £3.50;
Overseas £5.50/USA\$9.50)

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going upstairs?

Your angina patients

Transiderm-Nitro[®]

glyceryl trinitrate

One patch a day for the prophylaxis
of angina attacks

Prescribing Notes: **Presentation** Transiderm-Nitro 5 and 10 are transdermal drug delivery systems, comprising respectively 10cm² and 20cm² self-adhesive, pink-coloured patches, containing a drug reservoir of glyceryl trinitrate. **Indication** Prophylactic treatment of attacks of angina pectoris, as monotherapy or in combination with other anti-anginal agents. **Dosage** One Transiderm-Nitro 5 patch is to be applied every 24 hours. If a higher dose is required a Transiderm-Nitro 10 patch may be substituted. 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 to the same area of skin. If acute attacks of angina pectoris occur, rapidly acting nitrate 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, nausea and dizziness occur rarely. Allergic skin reactions, a local mild itching or burning sensation may occasionally 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 surveillance. As with all anti-anginal nitrate preparations, withdrawal of treatment should be gradual, by replacement with decreasing doses of long-acting oral nitrates. **Contra-indications** Hypersensitivity to nitrates, severe hypotension, marked anaemia, increased intraocular or intracranial pressure. **Packs** Boxes of 30 patches. Transiderm-Nitro 5 (PL0001/0094), basic NHS price 64.4p per day; Transiderm-Nitro 10 (PL0001/0095), basic NHS price 70.9p per day. *denotes registered trademark. Full prescribing information is available on request from Geigy Pharmaceuticals, Horsham, West Sussex.

