

a true some problem  
with *Candida* vaginitis

# Reluctance to apply topical treatment

the patient's dislike of topical application  
leads to inadequate therapy

The modern approach:

TRADEMARK  
**Nizoral**

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, H<sub>2</sub>-blockers) should be avoided and, if indicated, such drugs should be taken not less than two hours after Nizoral. Nausea, skin rash, headache and pruritus may occasionally be observed. Alterations in liver function tests have occurred in patients on ketoconazole, these changes may be transient. Cases of hepatitis have been reported with an incidence of about 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  
PHARMACEUTICA**  
B-2340 Beerse, Belgium

# 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*

**Payment must be enclosed with order**

**Order your copy now**  
From: The Publisher  
British Medical Journal  
BMA House  
Tavistock Square  
London WC1H 9JR  
*or any leading bookseller*



# NEW DRUGS

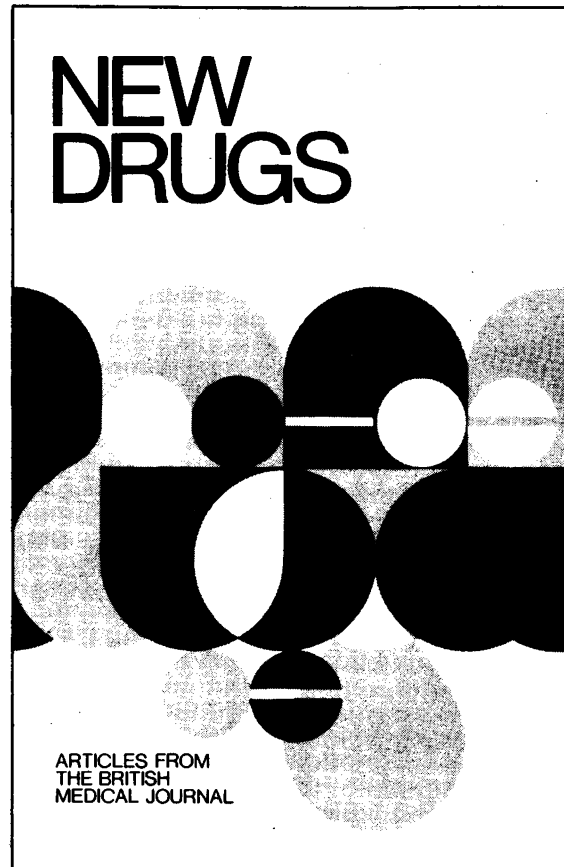
In the past few years the number of important new drugs and our understanding of pharmacology have continued to increase. Reliable and unbiased information on the therapeutic use of these agents is, however, not always readily available. Articles recently published in the *BMJ* on entirely new groups of drugs – H<sub>2</sub> 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*

Payment must be enclosed with order

**Order your copy now**  
From: The Publisher  
British Medical Journal  
BMA House  
Tavistock Square  
London WC1H 9JR  
*or any leading bookseller*





Who's afraid of  
going upstairs?

Your angina patients

# Transiderm<sup>®</sup>-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 10cm<sup>2</sup> and 20cm<sup>2</sup> 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.

