



a treatment problem  
with *Candida* vaginitis

# Reluctance to apply topical treatment

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

The modern approach:

**Nizoral**<sup>TRADEMARK</sup>

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

## A SENSE OF ASHER

*A new miscellany*



## A SENSE OF ASHER

*A further collection of the writings of Richard Asher, selected and introduced by Ruth Holland*

This second selection of Richard Asher's writings, with an introduction by Ruth Holland, was originally published in a limited edition in the Keynes Press in 1983. It sold out rapidly and in response to exceptional demand it was decided to produce a paperback edition. This contains the complete text of the original and has a new cover based on one of the original designs for Lewis Carroll's *The Hunting of the Snark* by Henry Holiday.

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Fee £795 (Residential).

### RECENT ADVANCES IN RESPIRATORY MEDICINE

**25 August-6 September 1985 in Edinburgh**

This course will provide a review of major areas of interest and importance in respiratory medicine. Emphasis will be given to areas which are growing points in applied research. The course will be under the direction of **Professor D C Flenley** of the University of Edinburgh Department of Respiratory Medicine. The course is designed for respiratory physicians and general physicians with an interest in respiratory medicine.

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**11-25 September 1985 in Cambridge**

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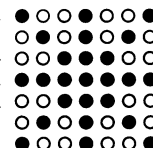
### UROLOGICAL CANCER: AN INTERNATIONAL SEMINAR

**17-27 November 1985 in London**

The aim of this seminar is to review modern approaches to diagnosis and treatment of urological malignancy together with a review of modern understanding of cancer biology and epidemiology as it relates to these tumours. The joint Directors of Studies will be **Professor J P Blandy** of the London Hospital Medical College, University of London and **Dr R T D Oliver** of the Institute of Urology, University of London. The seminar is designed for senior clinicians and research workers.

Fee £695 (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.



# AS YOU WERE


## VE DAY—A MEDICAL RETROSPECT

Elston Grey-Turner, the much loved former secretary of the BMA who died in 1984, was often referred to by colleagues as “The Colonel” in tribute to his military service in the RAMC and the Territorial Army. As a tribute to his memory the *BMJ* commissioned a collection of reminiscences by doctors of their experiences in the second world war and their feelings as it came to an end. For some, VE Day was a time for celebration, but others were too busy to notice or, as prisoners of war, did not even know that it had happened. The exigencies of war brought enormous advances in surgery and medicine—particularly in the use of blood transfusion and penicillin—while in the civilian hospitals newly qualified doctors and medical students took on responsibilities that are almost unimaginable today. Often moving, occasionally horrific, sometimes hilarious, these highly personal memories reflect the many aspects of war from a medical viewpoint.

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**AS YOU WERE**  
VE DAY—A MEDICAL RETROSPECT

**AS YOU WERE**  
VE DAY—A MEDICAL RETROSPECT



**GREY-TURNER, Dr Elston, CBE**

This book is published as a memorial to Elston Grey-Turner, profits from its sale going to BMA charities.

**BMA**

# 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 –  $H_2$  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.

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CHRISTOPHER PALLIS

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# Nizoral<sup>TRADEMARK</sup>

a new beginning  
in antifungal therapy

**Nizoral is the only antifungal drug in the world today  
that offers the simplicity and convenience of  
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to treat all common fungal infections.**

Doctors and patients alike are impressed with  
the modern simplicity of **Nizoral** therapy.  
In *Candida* vaginitis, for example, the dosage is:  
**2 oral tablets once daily for 5 days.**  
That's all it takes today to effectively cure the problem.

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