

Nizoral^{TRADEMARK}

(ketoconazole) (tablets)

over 3 million
prescriptions
world-wide:

the new beginning
in antifungal therapy.



Doctors and patients around the world are discovering the modern simplicity of Nizoral oral therapy. Common but problematic fungal infections can now be treated effectively *and* conveniently. Typically, in recurrent *Candida* vaginitis, 2 oral tablets once daily for 5 days is all it takes today to effectively cure the problem.



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PHARMACEUTICA

the drug discovery company

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, gynaecomastia has been reported.



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of
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Wright PEAK FLOW METER

The internationally established instrument for accurately measuring Peak Expiratory Flow in the clinical environment, e.g. hospitals, chest clinics, general practice, industrial health centres etc. It has a scale range of 60-1000 litres/minute in 5 litre divisions.



mini-Wright PEAK FLOW METERS, STANDARD AND LOW RANGE

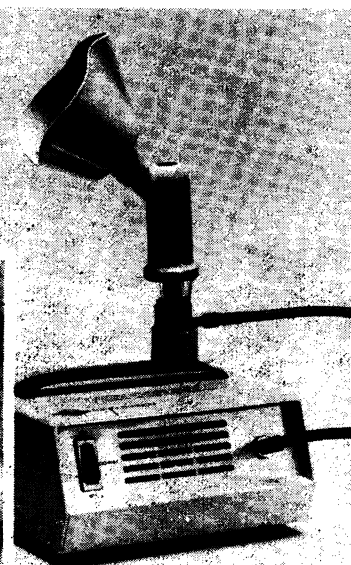
Designed to provide a reasonably priced handy sized instrument suitable for patient monitoring at home in conjunction with medical treatment. The Standard Mini Wright has a scale range of 60-800 litres/minute. The new Low Range Mini Wright (for Paediatric use and patients with a severe respiratory obstruction) has a scale range of 30-370 litres/minute.

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ALCOHOL PROBLEMS

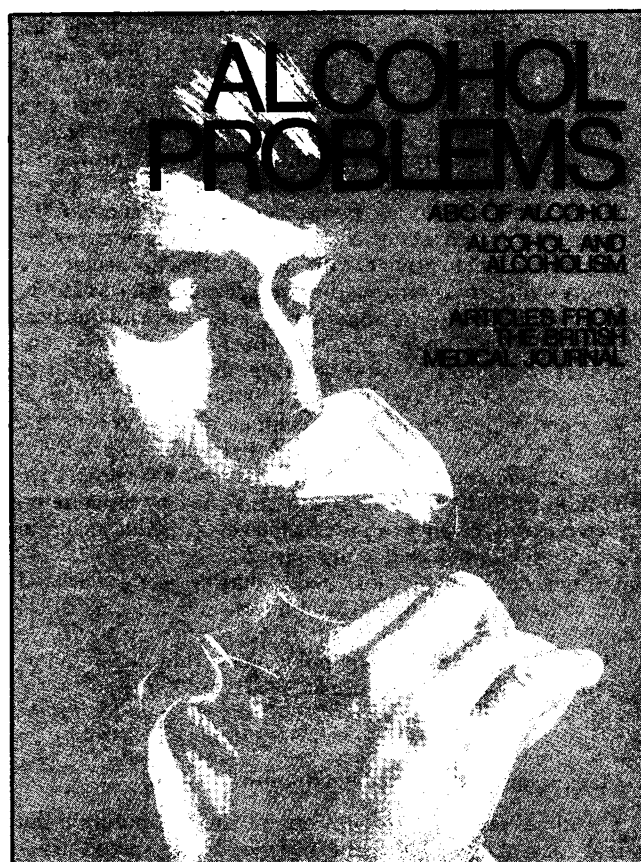
In recent years alcohol problems have increased dramatically and the thinking on them has undergone a revolution. Alcohol Problems brings together two series of articles published in the *BMJ*—the ABC of Alcohol, with its emphasis on straightforward advice for the clinician, and Alcohol and Alcoholism, Dr Richard Smith's more discursive survey of current thinking and controversies. Together they cover both the clinical aspects of managing alcohol problems and the social and political factors that surround them.

Price: Inland £5.50
Overseas £8.00/USA\$14.00
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"... a good account of the right kinds of observations to make in order to detect people with alcohol problems... These articles are succinct and well written and provide the best source of information and reference for general practitioners and trainees. This is an outstanding series which will be of great value to everyone concerned with the prevention, identification and management of alcohol-related problems."

Update 1983; 26: 301

AS YOU WERE

VE DAY—A MEDICAL RETROSPECT

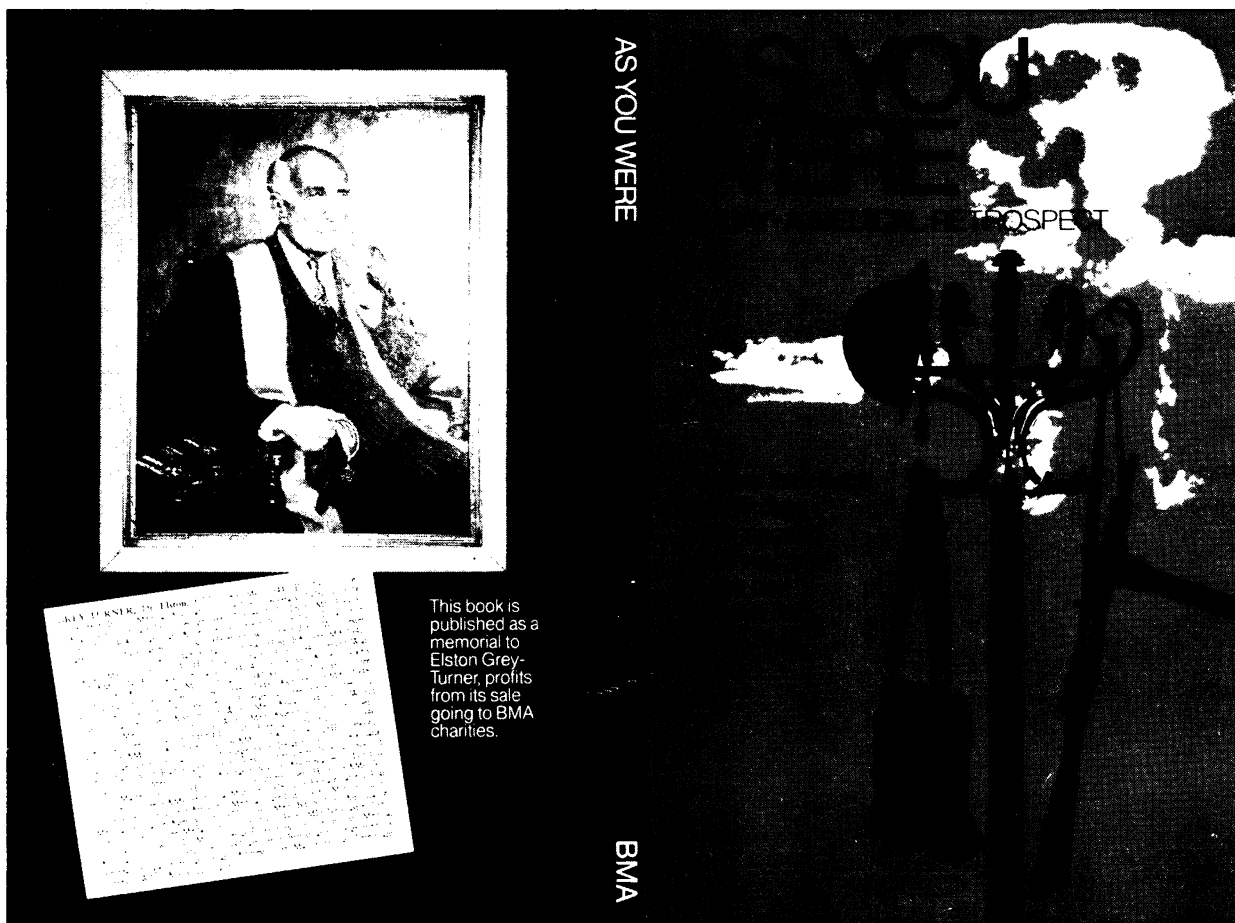
Elston Grey-Turner, the much loved former secretary of the BMA who died in 1984, was often referred to by colleagues as "The Colonel" in tribute to his military service in the RAMC and the Territorial Army. As a tribute to his memory the *BMJ* commissioned a collection of reminiscences by doctors of 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.

Price: Inland £6.00;
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E 4/042

THE MODERN COMPREHENSIVE DRUG THERAPY OF CARDIOVASCULAR DISEASE: ADALAT RETARD.



Composition: Tablet Adalat® retard contains 20 mg nifedipine. **Indications:** Coronary heart disease: Early and long term treatment of coronary heart disease (in particular, angina pectoris, angina pectoris, post-infarction syndrome). All forms of hypertension. **Contraindications:** Pregnancy. **Side effects:** Side effects occur only rarely and, if at all, at the beginning of treatment, they are usually mild and transient. Occasional symptoms may be headache, lumbago, flush and heat sensation, leg oedema, nausea, dizziness, tiredness and skin reactions. As is the case with other vasodilative substances, chest pain may very occasionally occur. **Precautions:** Adalat should be discontinued if the patient is taking other drugs which may interact with it. **Interactions:** Adalat can be administered together with antihypertensive agents, however, the additive effect should be taken into account. Treatment with cardiac glycosides can be begun or continued during nifedipine treatment. A combination treatment of Adalat retard with beta blockers or a saluretic is possible (see 3.4.1). **Dosage:** Treatment should be adjusted individually to the degree of severity of the disease and to the patient's responsiveness. A daily dose of 2 x 1 tablet of Adalat retard (2 x 20 mg) is recommended. In individual cases an increase in the daily dose to 2 x 2 tablets of Adalat retard (2 x 40 mg) may be necessary. The recommended interval between tablet intake is about 12 hours and should not be shorter than 4 hours. Generally, the tablet is swallowed unchanged with a little liquid, independent of meals. **Note:** In the presence of coronary spasm (Prinzmetal's angina, angina at rest) and particularly severe forms of coronary heart disease or in the case of impending anginal attack of the hyperanginal type, which all require a quick onset of effect, Adalat capsules, which are marked by rapid action should be taken. When the patient's condition has improved, a change-over to Adalat retard tablets may be attempted. **Presentation:** Tablets of 20 mg Nifedipine. Box of 30 tablets, box of 100 tablets, hospital size pack.

ADALAT RETARD

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WITH CARDIOPROTECTIVE EFFECT

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