over3 million prescriptions world-wide:

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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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Prescribing information

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

Uses: <u>Nizoralis an orally active animwoctic for the treatment in adults of vaginal candidosis, superficial and systemic mycoses including dermatophytic and vest interedons of the skin, hair and nalis, vest infections of the mouth and oil-crack. Also maintenance creatment of systemic mycose and chrokic mucocutaneous candidosis and prophylaxis in at risk: patients, in children, systemic mycoses and systemic mycoses and chrokic mucocutaneous candidosis and prophylaxis in at risk: patients, in children, systemic mycoses and systemic mycoses and chrokic mucocutaneous candidosis and prophylaxis in at risk: patients, in children, systemic mycoses and systemic mycoses and chrokic mucocutaneous candidosis and prophylaxis in a trisk: patients, in children, systemic mycoses and chrokic mycoses and chrokic</u>

Side effects, precautions, contra-indications: contra-indicated in pregnancy. For maximal absorption literary should be taken with meals. The use of agents which reduce gastric acidity tanti-cholinergic drugs, antacids. H.-biokersis hold be avoided and, if indicated such drugs should be taken not jess than two hours after literary. Assists a kin rash, headache and pruritus may occasionally be observed atterations interfunction trestginave occurred in patients on ketoconazole, these changes may be transic cases of heaptitis shave 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 borner in mind in patients on inorp term therapy. If a patient develops, jail undice or any synthems suggestive of hepatitis, treatment with ketoconazole should be stopped whild asymptomatic increases of liver enzyme levels, on the other hand, do not necessit acid discontinuation of the tragiment. Ketoconazole, when given together with cyclosporin A results in increased blood levels of cyclosporin A is is important that blood levels of cyclosporin A are monitored if the two drugs are given concomitantly, ketoconazole could be subject to the patient of the drug through the produces a trainisent operation. It is important that blood levels of cyclosporin A are monitored if the two drugs are given concomitantly, ketoconazole cyclosporin A is usually not significantly different from controls, in rare instances, synaecomosate has been reported.

ivelife

The British Council International Medical Courses

THE CHILD AND INFECTION: RECOGNITION, MANAGEMENT AND PREVENTION

12-22 January 1986 in London

The purpose of this course is to provide an up-to-date review of practical problems concerning infections in infancy and childhood with regard to their prevention, diagnosis and treatment. Epidemiology, surveillance and the changing patterns of childhood infections in the community will be included.

Modern biological developments of gene identification, cloning and replication as tools for diagnosis, management and prevention of infections will be reviewed along with the role of the laboratory.

The course will be under the direction of **Dr W A M Cutting**, Senior Lecturer in Child Health, University of Edinburgh and **Professor H P Lambert**, Department of Communicable Diseases, St George's Hospital Medical School, University of London.

The course will be open to senior practising paediatricians and others involved in the diagnosis, treatment and control of infectious disease in individuals or children in the community.

There are vacancies for 30 participants.

Fee £695 (Residential), £450 (Non-residential).

The course sessions will take place at a hotel in Central London. Residential participants will be accommodated at the same hotel.

THE BIOLOGICAL BASIS OF RADIOTHERAPY

9-21 February 1986 in London

The course is designed for professors and heads of departments of radiotherapy and radiobiology, clinicians with a major interest in radiation oncology and pharmacologists working with radio-sensitizers and chemotherapy.

The course will be directed by **Professor G E Adams**, Director of the Medical Research Council Radiobiology Unit and **Professor M J Peckham** of the Institute of Cancer Research, University of London and the Royal Marsden Hospitals.

There are vacancies for 35 participants.

Fee £795 (Residential), £515 (Non-residential).

The course sessions will be held at an hotel in London. Residential participants will be accommodated at the same hotel.

BONE MARROW TRANSPLANTATION: SEMINARS ON RECENT ADVANCES

16-21 March 1986 in London

The course will present a perspective of the British experience so far and discuss future developments, both organisational and scientific. The Director of Studies will be **Dr E C Gordon-Smith**, Reader in Haematology, Royal Postgraduate Medical School, University of London.

The course will visit different transplantation centres in London where appropriate symposia will take place. The course is intended for consultants and other senior staff with an academic interest in bone marrow transplantation.

There are vacancies for 30 participants. Fee £450 (Residential), £290 (Non-residential). Residential participants will be accommodated at a hotel in Central London.

ALCOHOLISM AND DRUG DEPENDENCE: A MULTIDISCIPLINARY INTERNATIONAL SEMINAR

6-18 April 1986 in London

The focus will include alcohol, illicit drugs, psychotropic substances and nicotine.

The seminar will be based at the Institute of Psychiatry in London. The Director of Studies will be **Professor Griffith Edwards**, Professor of Addiction Behaviour in the University of London and Director of the Addiction Research Unit at the Institute of Psychiatry, University of London. Dependence problems are of relevance to many disciplines. The seminar aims to attract a very wide representation of those who deal with these issues, either clinically, at the level of policy and organisation, as educationalists or in research.

There are vacancies for 30 participants.

Fee £795 (Residential), £515 (Non-residential).

Residential participants will be accommodated at a hotel in Central London.

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.

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