

Reducing the chance of relapse in vaginal candidosis

When *Candida* plays hide and seek

Recent microscopy studies have shown that *Candida albicans* appears capable of penetrating the deeper keratinous layers of vaginal epithelial cells. This suggests that the organisms may be protected from topical antifungal agents, only to re-emerge and proliferate again some time later when the epithelial cells are normally shed.

As the deeper layers of the vaginal mucosa are reached more easily by systemic than by topical treatment, relapse is likely to be avoided accordingly.

Scanning electron microscopy of mycelial cells penetrating between vaginal surface epithelial cells. X 3000

TRADEMARK
Nizoral
ketoconazole

*the elegant way
to treat an inelegant problem*

Presentation: white, flat, half-scored uncoated tablets marked "Janssen" on one side and K/200 on the reverse. Each tablet contains 200 mg ketoconazole. **Dosage** (for vaginal candidosis only): two tablets (400 mg) once daily for 5 days. For maximal absorption Nizoral should be taken with meals. Nizoral is contra-indicated in pregnancy. **Precautions:** 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 2 hours after Nizoral. 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. **Side-effects:** 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.

Full prescribing information available on request.
Ref.: Acta Cytol. (Baltimore) 26, 7 (1982)



JANSSEN


PHARMACEUTICA


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The power to relieve arthritis

PRESCRIBING INFORMATION:

PRESENTATION: White, convex tablets, 11mm in diameter marked SURGAM 300 on one side and  on the reverse. Each tablet contains 300mg tiaprofenic acid.

White, convex tablets, 10mm in diameter, marked SURGAM 200 on one side and  on the reverse. Each tablet contains 200mg tiaprofenic acid. Sachets containing 300mg tiaprofenic acid.

Uses/Properties: Surgam is a non-steroidal anti-inflammatory agent with marked analgesic properties. **Indications:** Rheumatoid arthritis, osteoarthritis; ankylosing spondylitis; low back pain; musculo-skeletal disorders such as fibrositis, capsulitis, epicondylitis and other soft-tissue inflammatory conditions; sprains and strains, post-operative inflammation and pain, and other soft-tissue injuries.

Dosage and administration Adults: 600mg daily in divided doses. 300mg twice daily. Alternatively, 200mg three times daily.

Elderly: Current research suggests that it is not necessary to modify the dosage of Surgam in the elderly or in cases of mild to moderate renal impairment. In severe renal impairment, it is suggested that the dosage should be reduced to 200mg twice daily.

Children: There are insufficient data to recommend use of Surgam in children.

Contra-indications, warnings etc. Contra-indications: Active peptic ulceration, history of peptic ulceration, hypersensitivity to the drug. **Precautions:** Surgam should be used with care in patients with a history of severe renal or hepatic insufficiency, asthma or previous sensitivity to aspirin or other non-steroidal anti-inflammatory agents. Non-steroidal anti-inflammatory drugs may cause some sodium and fluid retention. This should be borne in mind in patients with incipient or actual congestive heart failure. Since Surgam is highly protein-bound, it may be necessary to modify the dosage of other highly protein-bound drugs, e.g. anticoagulants, sulphonamides, hypoglycaemic agents, phenytoin and certain potent diuretics when these are administered concurrently.

Pregnancy: Although animal studies have not revealed evidence of teratogenicity safety in human pregnancy and lactation cannot be assumed and, in common with other non-steroidal anti-inflammatory agents, administration during the first trimester should be avoided.

Lactation: There are no data on the passage of Surgam into the breast milk. **Side effects:** Surgam is generally well tolerated. Gastro-intestinal reactions which have been reported include dyspepsia, nausea, abdominal pain, vomiting, anorexia, indigestion, heartburn, stomatitis, constipation, gastritis, flatulence or diarrhoea. In common with other non-steroidal anti-inflammatory agents, peptic ulcers, gastro-intestinal bleeding and perforation have occasionally been reported and in exceptional cases may have been associated with fatalities. Headache and drowsiness have occasionally been reported as have skin reactions, which include rash, photosensitivity, urticaria, pruritis, angio-oedema and alopecia.

Treatment of overdosage: In the event of an overdosage with Surgam, supportive and symptomatic therapy is indicated.

Pharmaceutical precautions Store in a cold place and protect from light.

Legal category Prescription Only Medicine.

Package quantities 300mg tablets in bottles of 60. 200mg tablets in bottles of 100. 300mg sachets in packets of 60.

Basic NHS prices and Product licence numbers Surgam 300mg £15.44 per pack of 60 0109/0109 Surgam 200mg £16.39 per pack of 100 0109/0108 Surgam 300mg sachets £15.44 per pack of 60. 0109/0127

Further information Nil. **Date of preparation** March 1987.

SURGAM

tiaprofenic acid

300

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EDITED BY MICHAEL W ADLER

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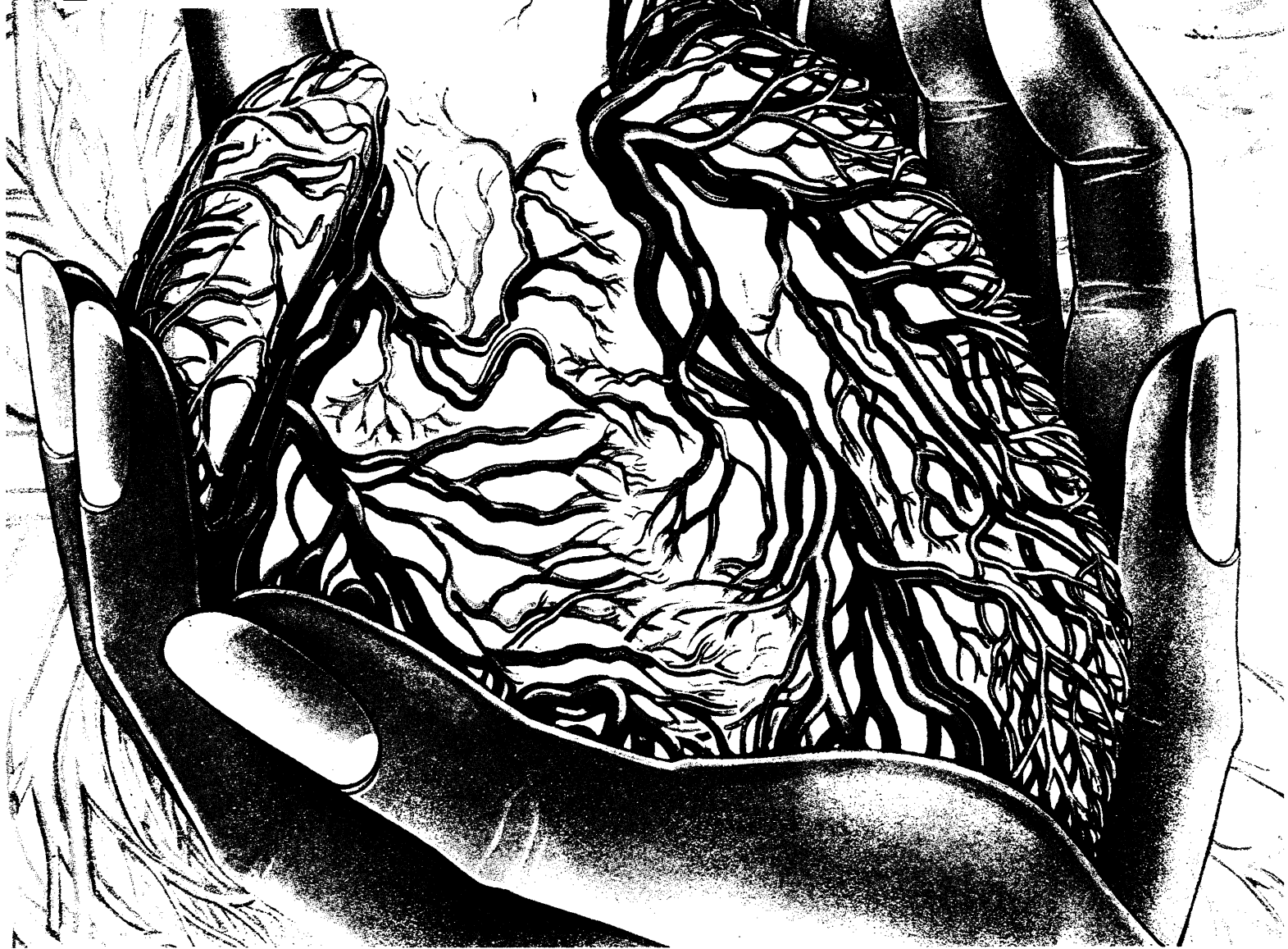
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indications, contraindications, side effects, dosage
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Adalat: The cardioprotective coronary therapeutic agent



Composition: 1 Adalat capsule contains 10 mg nifedipine. **Indications:** 1. **Coronary heart disease:** Chronic stable angina pectoris, angina at rest, including vasospastic angina (Prinzmetal's angina, variant angina) and unstable angina (crescendo preinfarction angina), angina pectoris following myocardial infarction (except in the first 8 days following acute myocardial infarction). 2. **Hypertension.** **Contraindications:** Hypersensitivity to Adalat and the whole period of pregnancy. There are no findings on use during lactation. Caution should be exercised in the presence of pronounced low blood pressure (severe hypotension: systolic blood pressure < 90 mmHg). Cardiovascular shock. **Side-effects:** Side-effects generally occur at the start of therapy and are often of a slight and transient nature: facial flush, heat sensation, headache. In isolated cases, particularly at higher doses: nausea, dizziness, tiredness, skin reactions, paraesthesia, hypotensive reaction, palpitations and increased pulse rate. Occasionally leg oedema due to dilatation of the blood vessels. Extremely rare: during long-term therapy, gingival hyperplasia which regresses completely once therapy is discontinued; chest pain (which may be angina pectoris-like pain) - where this occurs and a causal connection with Adalat is suspected, therapy should be discontinued. Caution should be exercised in dialysis patients with malignant hypertension and irreversible renal failure with hypovolaemia, since vasodilatation can result in a reduction in blood pressure. Treatment of

hypertension with this drug requires regular medical supervision. Individuals may react differently to this drug and some patients' ability to drive and to operate machinery may be impaired. This applies particularly at the start of treatment, when changing from one preparation to another and if alcohol is consumed. **Mode of action:** Adalat is a calcium antagonist and is classified as a coronary therapeutic agent/antihypertensive agent. **Dosage:** Treatment should be adapted to the individual as much as possible according to the severity of the disease and the patient's response to therapy. **Coronary heart disease:** Long-term therapy, generally with a daily dose of 3 x 1 capsule Adalat. In some cases the dose can be increased in stages to 60 mg (3 x 2 capsules Adalat). For coronary spasms (Prinzmetal's angina, angina at rest) the daily dose can be temporarily increased to between 80 and a maximum of 120 mg (between 4 x 2 and 6 x 2 capsules Adalat) in individual cases. **Hypertension:** Daily dose: 3 x 10 to a maximum of 3 x 20 mg (3 x 1 to 3 x 2 capsules) Adalat. If particularly rapid onset of action is required in cases of acute high blood pressure (hypertensive crisis) or impending angina pectoris attack, the individual dose is 1-2 capsules Adalat (10-20 mg) administered sublingually (the capsule should be bitten). In exceptional cases up to 3 capsules Adalat (30 mg). **Dosage interval:** Where the individual dose is 20 mg, the capsules should be taken at intervals of not less than 2 hours. **Interactions with other drugs:** Adalat/antihypertensive agents;

concomitant administration may enhance the antihypertensive effect of nifedipine. **Adalat/beta receptor blockers:** the patient must be monitored carefully during concomitant administration since severe hypotension may occur; development of heart failure has been reported occasionally. **Adalat/cimetidine:** possible enhancement of antihypertensive effect. **Presentations:** Adalat: packs with 30, 50 and 100 capsules each containing 10 mg nifedipine.

Bayer AG, Leverkusen, West-Germany.

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