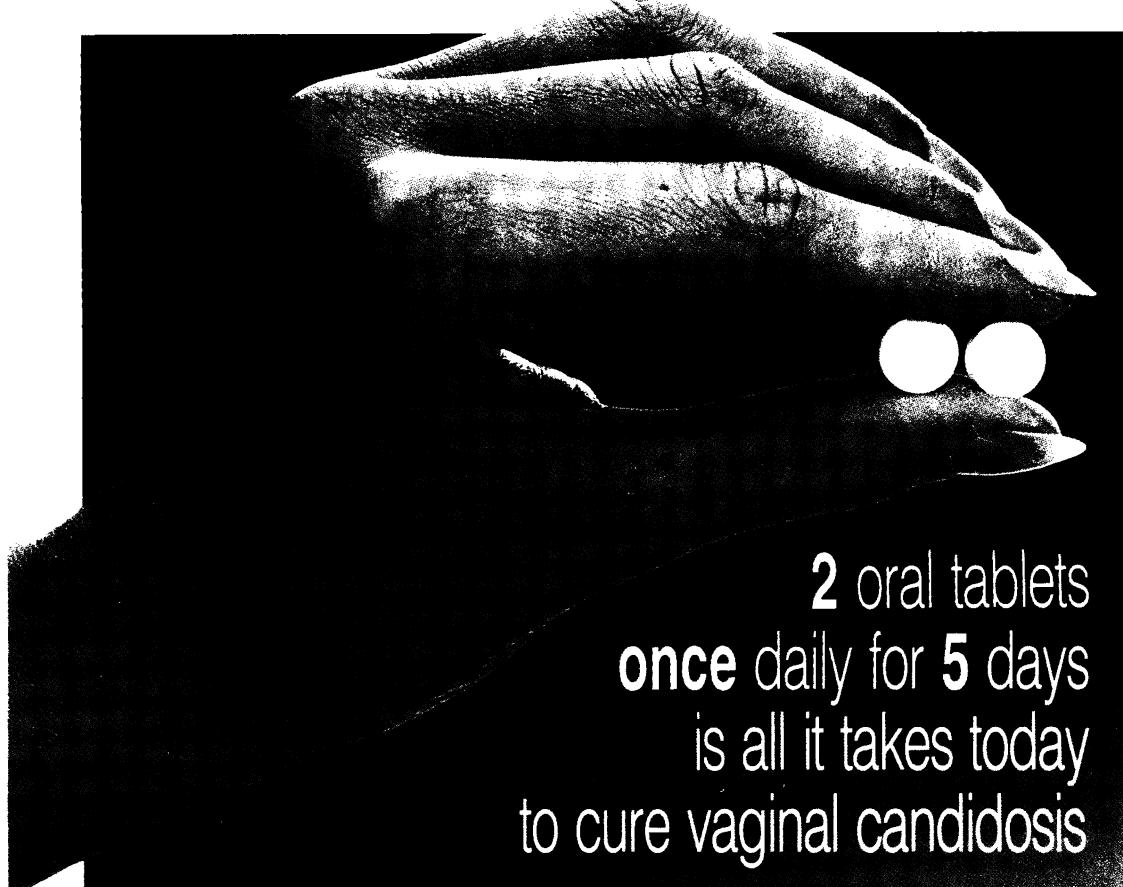


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Tooley, et al.: The Practitioner 229, 655 (1985)
Renussi, et al.: Curr Ther Res 31(4) 511 (1982)



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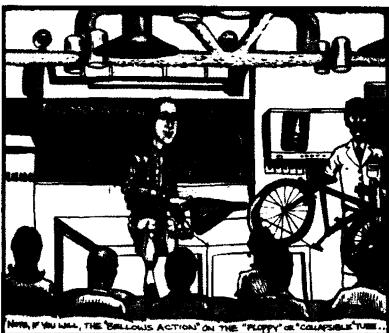
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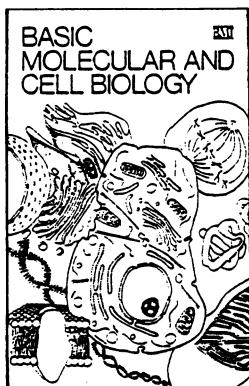
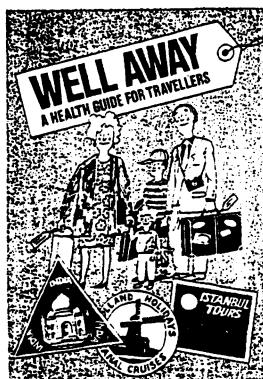
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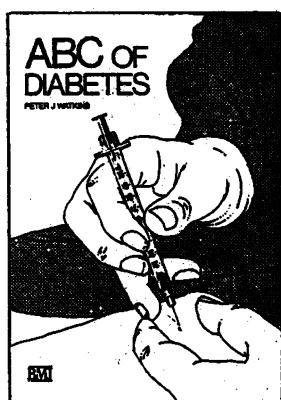
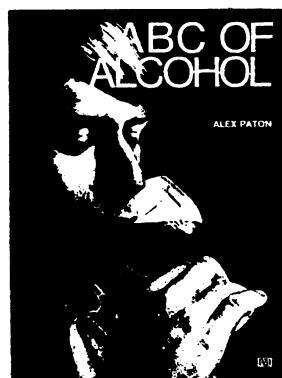


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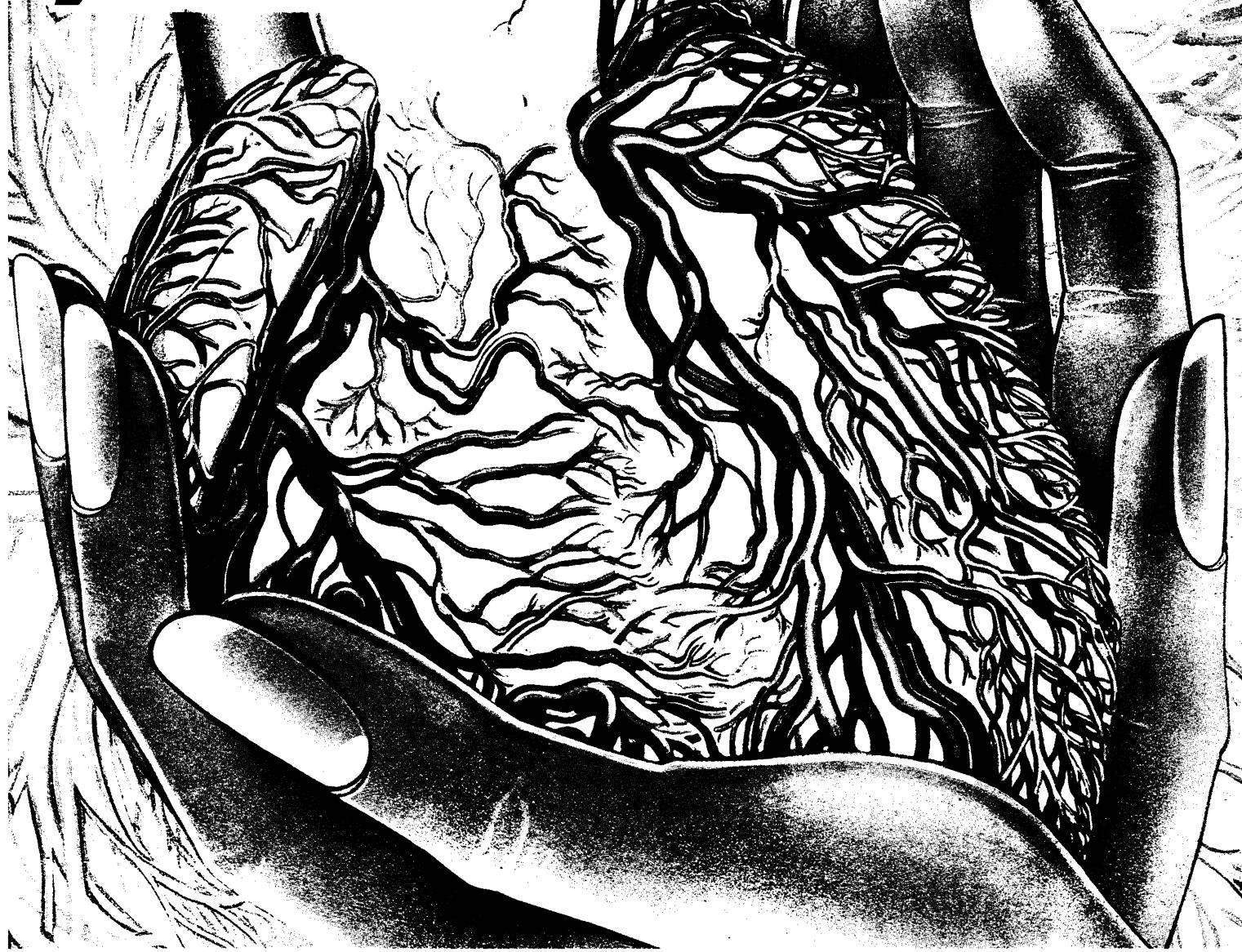
Many advances in the treatment of diabetes have been made in the past decade: self measurement of blood glucose, intravenous infusions and intramuscular insulin treatment for diabetic emergencies, continuous subcutaneous insulin infusion techniques, and new tests for autonomic function. The outlook for diabetic pregnancy has been transformed; photocoagulation for retinopathy is reducing blindness; and at last diabetic renal disease is receiving some attention. Dr Peter Watkins's articles set these advances in their clinical context, providing a practical guide to the management of diabetes for non-specialist doctors and nurses. There have recently been several more developments both in understanding the causes of diabetes and improving its management, and this second, revised, edition incorporates the most important of these latest innovations.

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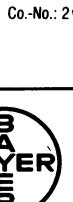
Composition: 1 Adalat capsule contains 10 mg nifedipine. **Indications:** 1. Coronary heart disease: Chronic stable angina pectoris, angina at rest, including vasospastic angina (Prinzmetal's angina, variant angina) and unstable angina (crescendo preinfarction angina), angina pectoris following myocardial 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. 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

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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.

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