


In vaginal candidosis:



ketoconazole

ketoconazole

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once daily for **5** days
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to cure vaginal candidosis

of ketoconazole, which reduce gastric acidity, should be taken not less than 2 h before or after administration of ketoconazole. Increased blood levels of cyclosporin A. It is recommended that cyclosporin A and ketoconazole are given concomitantly. **Side-effects:** nausea, skin rash, and abnormal liver function tests have occurred in patients on ketoconazole; however, a severe rash has been reported with an incidence of about 1 per 10,000 patients. Some of these reactions to the drug. This should be borne in mind in patients on long-term therapy. In patients with symptoms suggestive of hepatitis, treatment with ketoconazole should be stopped. Mild side-effects, on the other hand, do not necessitate discontinuation of the treatment.

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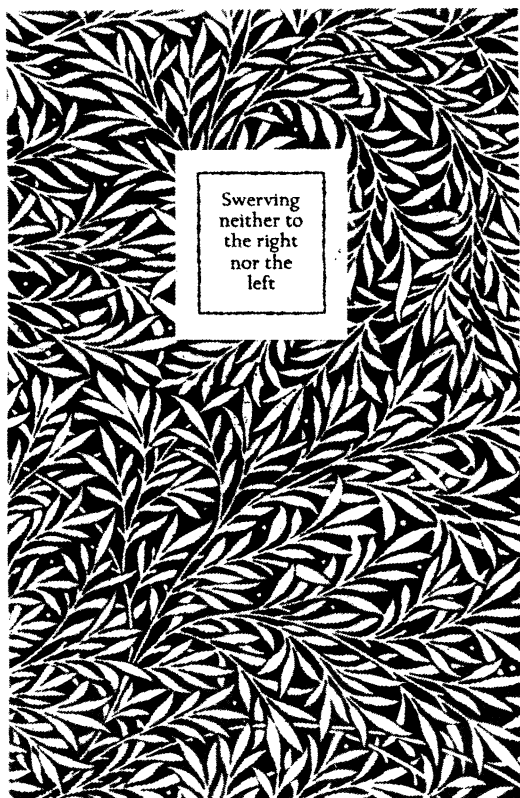
Tooley, *et al.*: The Practitioner **229**, 655 (1985)
Benussi, *et al.*: Curr. Ther. Res. **31**(4), 511 (1982)



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Essays to honour Ian Munro

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Taken on to the editorial staff because his epistolary style impressed the then editor, Sir Theodore Fox, Munro became the longest serving medical staff member of a medical journal.

He has recently retired, and to mark the occasion friends and colleagues at home and abroad have produced a

literary substitute for the traditional carriage clock. In it they pay tribute to Munro's qualities as editor, cricketer, liberal campaigner, and soother of hurt authors' feelings.

Contributors include the editors of the *Norwegian Medical Journal*, the *New Zealand Medical Journal*, and the *BMJ* as well as the deputy editors of the *Lancet*. You don't have to be Ian Munro to read and enjoy this book: a limited edition of 100 copies is now published by the Keynes Press.

Designed and printed by Sebastian Carter at the Rampart Lions Press, Cambridge, on Zerkall laid mould made paper.

The text is set in Monotype Perpetua by Monoset Ltd, and the displayed matter in Golden Cockerel roman, both designed by Eric Gill. Thread sewn in a soft cover.

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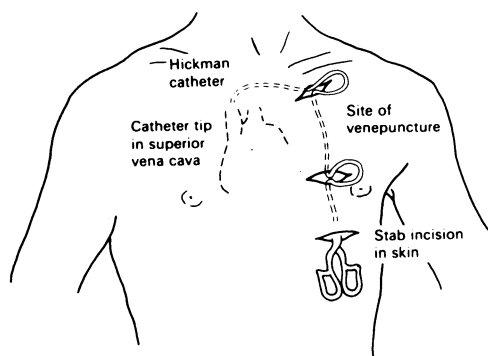


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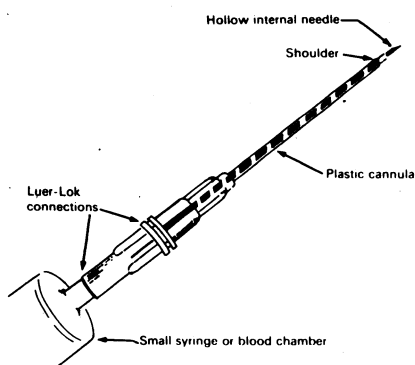
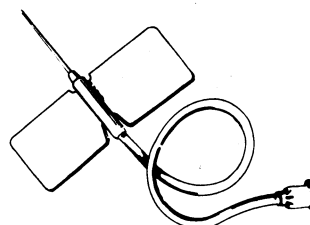
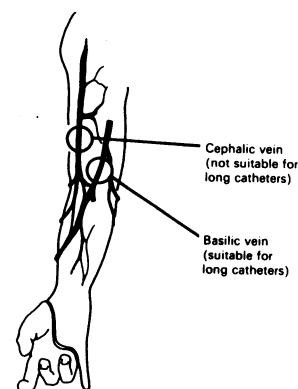
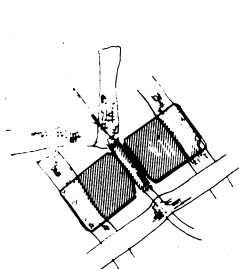
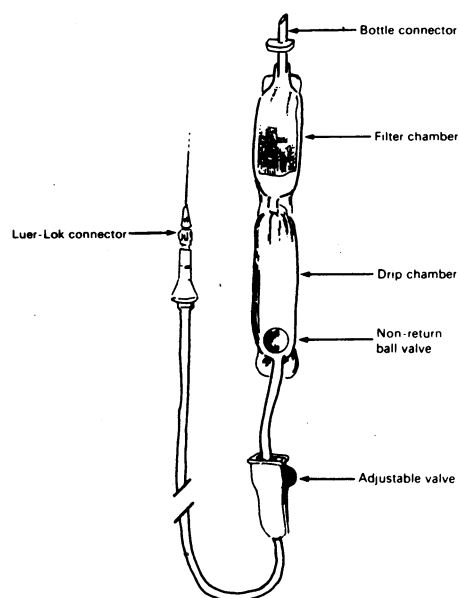
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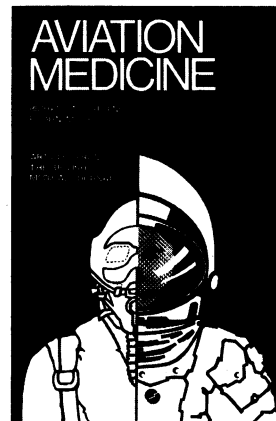
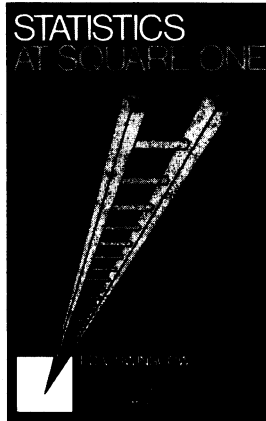
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J R Coll Gen Pract 1985; 35: 261

The statistical testing of data is indispensable in many types of medical investigation and a help on countless occasions in clinical practice. This book provides step by step instruction. Subjects covered include standard deviation, χ^2 tests, t tests, non-parametric tests, and correlation. The book includes sections on Fisher's exact probability test and rank correlation not published in the original *BMJ* series. Methods specially adapted to pocket calculators.

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SA Med J 1984; 65: 786

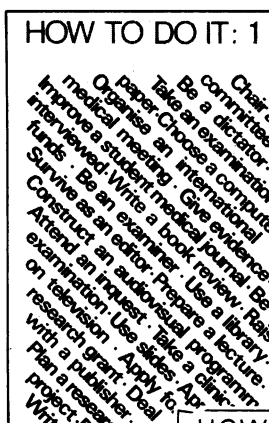
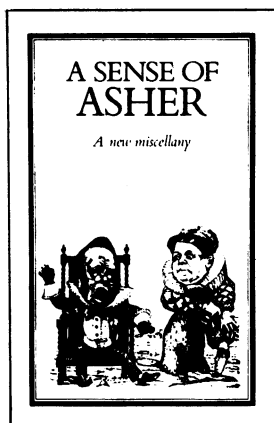
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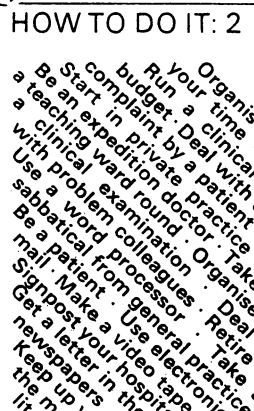
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and



Why are medical journals so dull? Richard Asher, who asked the question, was never dull: good sense, pungent wit, and lively humour were his hallmarks, while his writings on clinical matters, with their combination of lucidity, sympathy, and insight, remain models for all aspiring medical authors. *A Sense of Asher*, a selection of his writings, was first published in a Keynes Press limited edition and quickly sold out. This paperback version, now in its fourth reprinting, contains the complete text of the original – commended by critics as a marvellous gift for a doctor's bedside table and enjoyable light reading for anyone in medicine.

Expert advice on those things a doctor needs to know but is rarely taught.

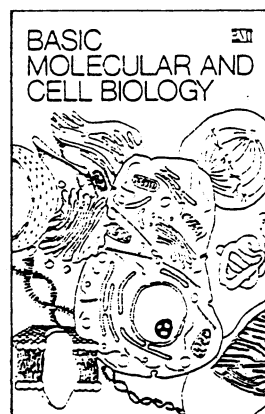
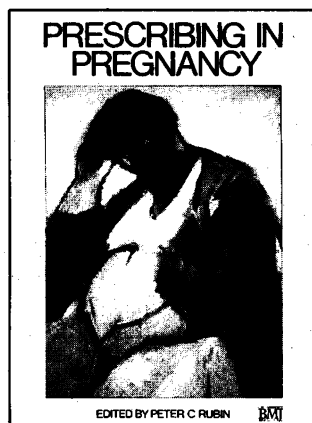
This second, revised edition of *Medicine in Old Age* brings the general medical reader up to date on recent advances in geriatrics. It includes accounts of the management of dementia, gastrointestinal problems, anaemia, and urinary tract disease as well as guidance on drug treatment and the specific problems of interpreting laboratory findings in the old. Chapters on rehabilitation and the role of the general practitioner and day hospitals – which have helped to convert mere existence into a full life for many elderly patients – complete a useful introduction to this important subject.

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"... concise, easy to read, contemporary and well referenced ... should be required reading for residents and practising physicians in obstetrics."

Can Med Assoc J 1988; 138: 931

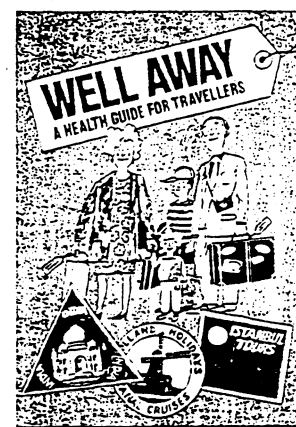
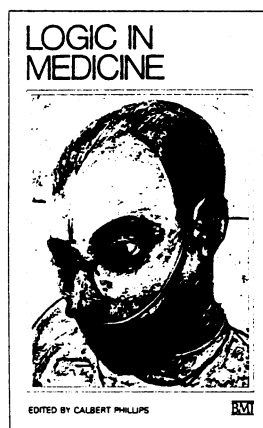
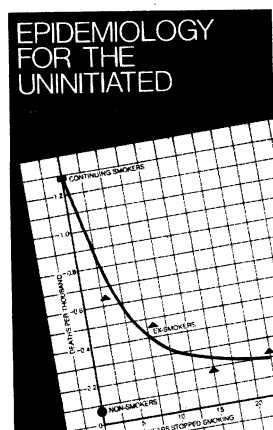
The extraordinary technical developments in molecular biology over the past few years, and the equally rapid advances in understanding of cell biology, will almost certainly result in far reaching changes in medical research and practice. In this collection of articles experts in molecular and cell biology provide the background information to give clinicians an insight into the way in which the medical sciences may be moving over the next few years and into the exciting possibilities opening up for the treatment of genetic disorders, cancer, and the common illnesses of Western society such as degenerative vascular disease and diabetes.

Newly graduated clinicians have to acquire the practical skills of their specialty – few doctors can remember every step of a procedure after seeing a single demonstration. A step by step guide for those making their first attempts, *Procedures in Practice* has now been completely updated and expanded to cover everything from arterial puncture to vaginal examination. Extensively illustrated, it has been produced in a new pocket size format, so you can always keep it with you.

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Reviews of the first edition

"... all physicians [should] ensure that their hospital library has this book, and that they themselves read it."

Med J Aust 1981; 1: 665

"A reading of this book ... should provide a sound basis in epidemiological techniques for any intending researcher."

NZ Med J 1980; 91: 73

The second edition of this popular *BMJ* handbook has been revised to include further details of epidemiological methods and some of their more dramatic applications, such as the investigations on the Spanish cooking oil epidemic, and AIDS.

Medical students and practitioners are often concerned with examples of diagnostic logic, but seldom consider them in the context of a general philosophy. Is diagnostic logic out on a limb, or is it based on the same principles as logic in general? In *Logic in Medicine* doctors and philosophers combine to provide a coherent system of diagnostic logic with a broader view of the science and art of reasoning. The abstract theory of theories has highly practical applications, and the authors explore the uses of computer technology and artificial intelligence systems as well as "fuzzy logic", "relevant logic", and the logic of economics and ethics. A book for all who wish to clear their minds of cant.

The British have been travelling overseas for centuries, but never in such enormous numbers as now. Holidaymakers from Britain between them take about 15 million trips abroad each year, and thousands more go to work, either for firms or voluntary organisations. Strange climate, customs, food, and diseases can all cause illness. *Well Away* advises non-medical readers on how to avoid this. Adapted by Eric Walker and Glyn Williams from their *ABC of Healthy Travel* it gives straightforward practical advice on everything from immunisations and insurance before departure to first aid while abroad. This is one guidebook no traveller can afford to be without.

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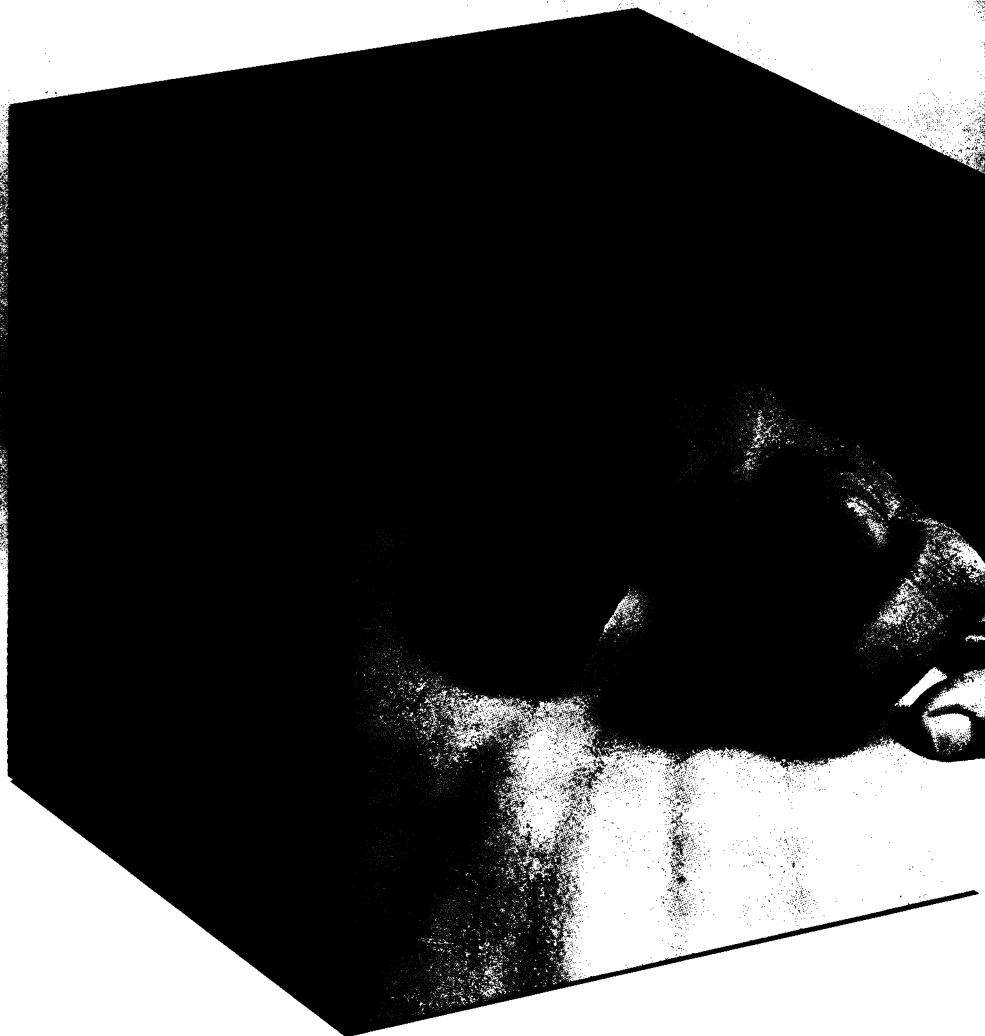
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