



FIGHT FROM THE INSIDE OUT

Sporanox®*

itraconazole 100 mg

One of the notorious problems with fungal infections of the skin or the vagina is that the organism may penetrate the deeper layers of the epithelium, out of reach of topical medication. And besides, when treating fungal skin lesions locally, the infection is often already subclinically present at other sites of the body, waiting for a chance to start the trouble all over again.

Because Sporanox works orally, i.e. "from the inside out", it will destroy even the best hidden fungal cells. All the more so, because Sporanox has a strong affinity for epidermal and mucosal tissues as well as for the fungal cell wall itself where it must exert its fungicidal activity.

SHORT AND SIMPLE ORAL THERAPY

Standard dose in Dermatology: 1 capsule (100 mg) once daily for 15 days
(Sporanox will remain active in the stratum corneum for another 3-4 weeks)

Standard dose in Gynaecology: 2 x 2 capsules (400 mg) for 1 day only
(Sporanox will remain active in the vaginal epithelium for another 3 to 4 days)

This product is not yet available in all countries.

* Trademarks: SPORANOX, SEMPERA,
TRISPORAL, SPORAL.

Properties: Sporanox (itraconazole), a triazole derivative, is orally active against infections with dermatophytes (*Trichophyton* spp., *Microsporum* spp., *Epidermophyton floccosum*), yeasts (*Candida* spp., *Phycomyces* spp.), Aspergillus spp. and various other yeasts and fungi. Sporanox is also active against the intestinal protozoa Giardia lamblia and Cryptosporidium parvum.

sules (200 mg) morning and evening for 1 day. Pityriasis versicolor: 2 capsules (200 mg) once daily for 7 days.

Tinea corporis, tinea cruris, tinea pedis, tinea manus: 1 capsule (100 mg) daily for 15 days; highly keratinized regions, as in plantar tinea pedis and palmar tinea manus, require 1 capsule (100 mg) daily for 30 days.

Oral candidosis: 1 capsule (100 mg) daily for 15 days.

Cutaneous candidosis: 2 capsules (200 mg) once daily for

1 day. Cutaneous aspergillosis: 2 capsules (200 mg) once daily for 15 days. Giardiasis: 2 capsules (200 mg) once daily for 15 days. Cryptosporidiosis: 2 capsules (200 mg) once daily for 15 days.

advisable not to give this drug to patients with a known history of liver disease. **Nursing mothers:** It is recommended not to breast feed whilst taking Sporanox (itraconazole). **Drug interactions:** Sporanox (itraconazole) should not be given concomitantly with dexamethasone.

Full prescribing information is available on request.



gastric distress & oesophagitis hyperacidity or dysmotility?

Most complaints of gastric distress, as well as oesophagitis, are conventionally attributed to hyperacidity in the stomach. However, the contemporary view in gastroenterology holds that most upper G.I. problems, including heartburn, postprandial fullness, early satiety, abdominal distension and epigastric discomfort, are commonly motility related.¹⁻³ And this stands to reason. After all, proper peristalsis is a physiological necessity for our digestive process.

Prepulsid, the novel G.I. prokinetic, uniquely restores healthy peristalsis to efficiently clear the oesophagus and empty the stomach.⁴⁻⁶



TRADEMARK **Prepulsid** CISAPRIDE



restores upper G.I. motility like no other agent.

JANSSEN
PHARMACEUTICA
B-2340 Beerse, Belgium

expertise in digestive motility