

itraconazole 100 mg

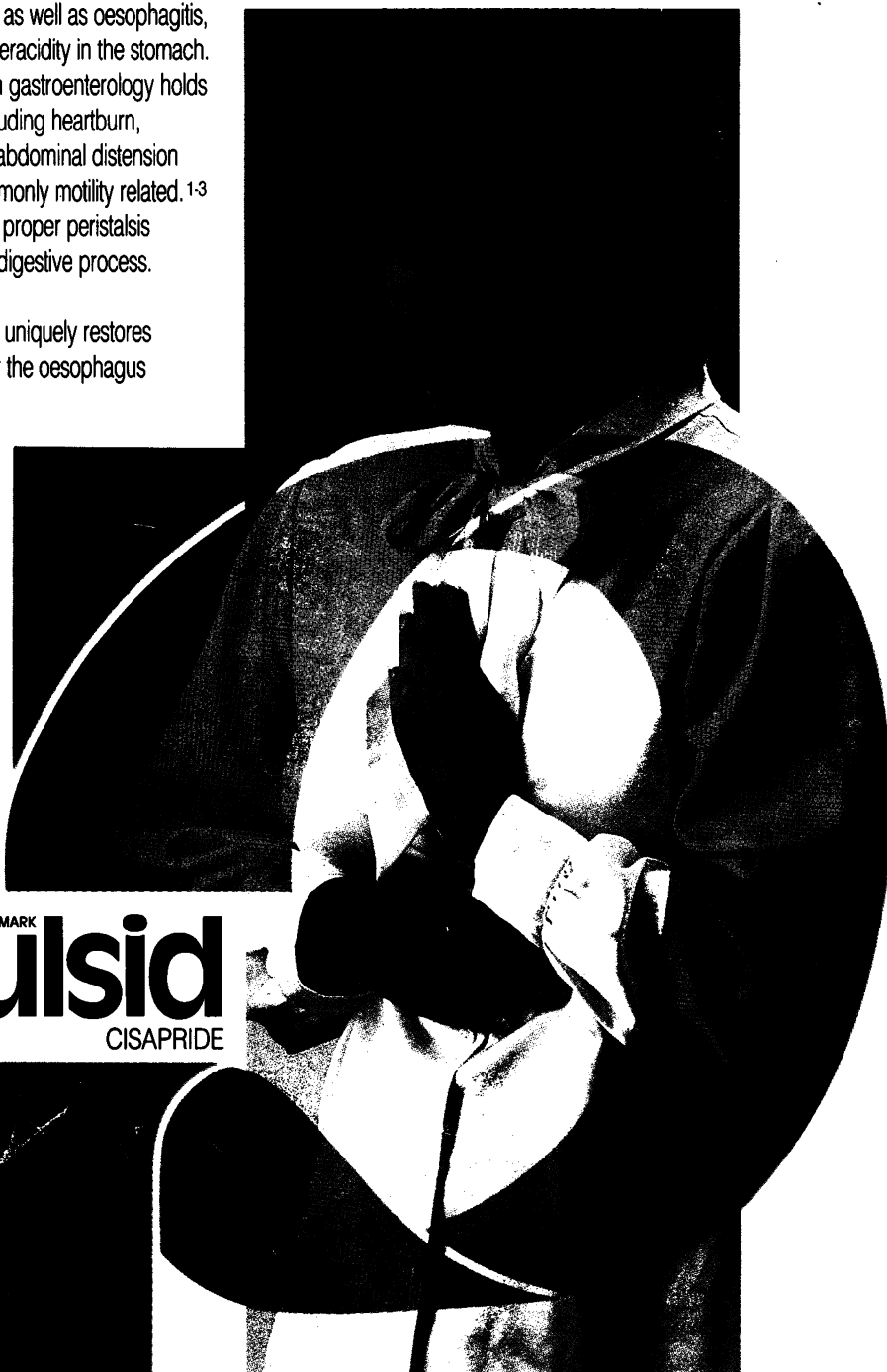
Because Sporanox works **orally**, i.e. "from the inside out", it will destroy even the best hidden fungal cells. All the more so, because Sporanox has a strong affinity for epidermal and mucosal tissues as well as for the fungal cell wall itself where it must exert its fungicidal activity.

JANSSEN
PHARMACEUTICA
LABORATOIRES BOEYER

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

Prescribing Information: Prepulsid (cisapride) is a gastro-intestinal prokinetic agent. Prepulsid enhances and co-ordinates gastro-intestinal propulsive motility, thereby preventing stasis and reflux. Therapeutic Indications: 1. Gastroesophageal reflux disorders, including oesophagitis. 2. Symptoms of X-ray or endoscopy negative upper digestive discomfort. 3. Gastroesophageal reflux disorders, including oesophagitis. 4. Intestinal pseudo-obstruction. Contraindications: No absolute contraindications are known. Precautions: Pregnancy: Although there is no effect on primary fertility, no primary embryotoxic and no teratogenic effect, the anticipated therapeutic benefits should be weighed against the potential hazard before Prepulsid is given during pregnancy, especially during the first trimester. Nursing mothers: Although the excretion in breast milk is minimal, nursing mothers are advised not to breast feed while taking Prepulsid. Driving and machine-operating ability: Prepulsid does not affect psychomotor function and does not induce sedation or drowsiness. Side effects: The most commonly reported side effects are dry mouth, constipation, headache, dizziness, and fatigue. These side effects are usually mild and transient. In severe cases, it is advisable to check the coagulation time one week after the start of Prepulsid treatment to adjust the anticoagulant dose if necessary. The effects of Prepulsid on gastro-intestinal motility are, for the most part, antagonized by anticholinergic drugs. In hepatic and renal insufficiency, it is recommended to halve the initial daily dose. Subsequently, the dose can be adapted, depending on the therapeutic effects or possible side-effects. In the elderly, steady-state plasma levels are generally higher, due to a moderate prolongation of the elimination half-life. Therapeutic doses, however, are similar to those used in younger patients. In the case of drugs that require individual titration, it may be useful to monitor plasma levels of such drugs when Prepulsid is associated. Adverse reactions: In line with the pharmacological activity of Prepulsid, transient abdominal cramping, borborygmi and diarrhoea may occur. Mild and transient headache or lightheadedness have been reported occasionally. When diarrhoea occurs in babies or infants, the dose should be reduced. There have been isolated reports of convulsive seizures without clearcut relationship to Prepulsid. Dosage: - Adults: according to the severity of the condition, 5 or 10 mg of Prepulsid, 2 to 4 times daily, to be taken as tablets or as oral suspension (the full plastic 5-ml spoon contains 5 mg). As a rule the following doses have proven adequate: * less severe conditions: 5 mg t.i.d. (dose can be doubled); * severe conditions (gastro paresis, oesophagitis, refractory constipation): 10 mg t.i.d. to 10 mg q.i.d. (before the 3 main meals and before evening). - Infants and children: on the average 0.2 mg/kg per intake, 3 to 4 times daily. For the suspension, intakes are indicated on the dosing pipet as a function of body weight. Full prescribing information available on request.

References: 1. Knijnik J.E. et al. Dig. Dis. Sci. 20: 134-136; 2. Kalmus J.F. et al. Gastroenterology, 91: 297-1996; 3. Malagelada J.R. et al. Gastroenterology, 88: 1223-1985; 4. Coccaelli P. et al. Gut 22: 631-1988; 5. Collins B.J. et al. Hepato-Gastroenterol. 34: 113-1987; 6. van H. et al. Dig. Dis. Sci. 34: 657-1989.

Note: Prepulsid (cisapride) is not yet available in all countries and not all indications have been approved everywhere.