

VIRAZIDTM

Ribavirin

Effective therapy
for bronchiolitis
due to RSV



Now you can treat the infection
Not just the symptoms

Prescribing Information ▼

Indications

Virazid is indicated in the treatment of infants and children with severe respiratory syncytial virus bronchiolitis.

Dosage

Treatment is carried out using a small particle aerosol generator (SPAG) for 12-18 hours per day for at least 3 and no more than 7 days. The concentration of ribavirin in the reservoir is 20mg/ml in the SPAG unit and the average concentration for a 7 hour period is 0.19mg/l of air.

Presentation

Virazid is a sterile lyophilised powder of ribavirin to be reconstituted for aerosol administration. Each 100ml glass vial contains 6g of ribavirin and, when reconstituted to the correct volume of 300ml with Water for Injections BP, will

contain 20mg/ml ribavirin at a pH of approximately 5.5.

Contra-Indications

Ribavirin is contra-indicated in females who are or may become pregnant and it should be noted that ribavirin can be detected in human blood even four weeks after oral administration has ceased.

Precautions

In infants requiring assisted ventilation, Virazid should only be used when there is constant monitoring of both patients and equipment.

Side Effects

Several serious adverse events occurred in severely ill infants with life-threatening underlying disease many of whom required

assisted ventilation. These events included worsening of respiratory status, bacterial pneumonia and pneumothorax. The role of ribavirin aerosol in these events has not been determined.

Anaemia has been reported with oral and intravenous administration but no such incidents have been reported with aerosol administration. Reticulocytosis has been reported with aerosol use.

Warnings

Precipitation of the drug in respiratory equipment and consequent accumulation of fluid in the tubing has caused difficulties for patients requiring assisted ventilation.

In infants requiring assisted ventilation Virazid should only be used when there is constant monitoring of both patients and equipment.

Directions for use during assisted ventilation are given in the SPAG manual which should be read carefully before such administration.

Full prescribing information is available upon request.

▼ Special reporting to the CSM required.

Basic NHS Price: 1 x 6g vial £195.

Product Licence Number: 4657/0004

Product Licence Holder: Viratek Inc. USA

Supplied By: Britannia Pharmaceuticals Ltd
Forum House
41-51 Brighton Road
Redhill, Surrey,
RH1 6YS

Three good reasons for



*...start for baby. Easily digested and
full of nutrition and natural protective
properties.*

Aptamil.®
*A well-digested baby milk for the baby bottle-fed
from birth, or moving on from breast milk.*

Little Experts to smile.

The first days with baby are full of new experiences and little discoveries to share. Feeding is just one of the areas that new parents often find a little bewildering. What to feed? When to feed? How much to feed?

These three babies all have different needs, but each is happily settling down to a regime of good feeding. There's Jennifer getting the very best with her mother's breast milk. And Simon and Chloe whose mothers decided to bottle-feed, are being fed Milupa baby milks – the very acceptable alternative.

Breast milk. Jennifer was breastfed from birth and soon happily settled to this ideal way of feeding, and she thrived on it. Had she been born premature, Jennifer could still have been fed on her mother's own expressed breast milk, or Milupa's new preterm formula – Milupa Prematil, specially formulated for low birthweight babies. Or a combination of both.

Aptamil. Simon was bottle-fed straight from birth. For him, Aptamil was just right. This formula is designed for babies who have never been breastfed, and those bottle-fed from an early age.

Milumil. Breastfed at birth, then bottle-fed later, Chloe needed a different nutritional balance from Aptamil. Milumil, with its higher levels of protein and carbohydrate, helped keep her smiling.

Milupa baby milks are used in hospitals throughout Great Britain and Europe.

Well digested, well accepted, and granulated for easy use, they are known by mothers for their excellent taste and certainly appreciated by their Little Experts...

Because they have the last word (even before they can say one!)

Their smiles say it all.

IMPORTANT: Breast milk is the best milk for a baby. A doctor, midwife, nurse or health visitor should be consulted for any advice needed. If a baby milk is used it is important for the baby's health that all preparation instructions are followed carefully.

milupa®

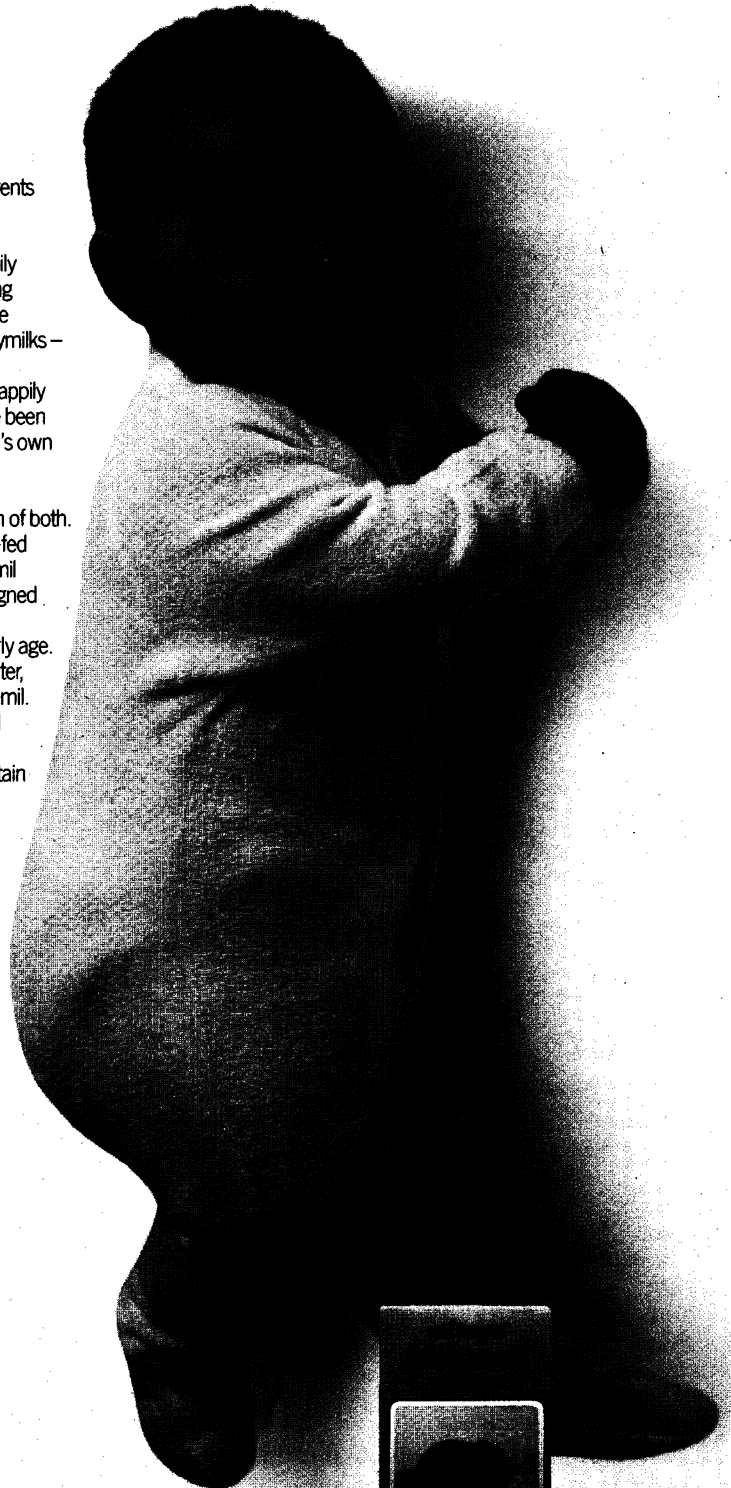
Milupa baby milks. Well digested and well accepted.

Milupa Ltd., Milupa House, Uxbridge Road, Hillingdon, Uxbridge, Middlesex UB10 0NE. Tel: 01-573 9966.

1. G. Elborn and M.M. Kerr. June 1982 Midwives Chronicle and Nursing Notes p. 210 – 211.

Milumil.®

A well-accepted baby milk¹ with higher levels of protein and carbohydrate. For continued nourishment throughout the first year.



PRESCRIBING INFORMATION

HUMAN VELOSULIN (Neutral Insulin Injection, human insulin (emp)). **HUMAN INSULATARD** (Isophane Insulin Injection (NPH), human insulin (emp)). **HUMAN MIXTARD** 30/70 (Neutral Suspension comprising 30% Neutral Insulin Injection and 70% Isophane Insulin Injection (NPH), human insulin (emp)). **HUMAN INITARD** 50/50 (Neutral Suspension comprising 50% Neutral Insulin Injection and 50% Isophane Insulin Injection (NPH), human insulin (emp)). **Presentation** HUMAN VELOSULIN, HUMAN INSULATARD, HUMAN MIXTARD 30/70 and HUMAN INITARD 50/50 are available in 10 ml. vials containing 100 iu/ml. To aid identification the metal sealing rings of the vials have tactile marks as follows: Human Velosulin — one mark; Human Insulatard — two marks; Human Mixtard 30/70 — three marks; Human Initard 50/50 — four marks. The vials are fitted with tamper-evident caps. **Uses** The treatment of insulin-requiring diabetes. **Dosage and Administration** The dosage of insulin is determined by the physician according to the needs of the patient. Human Velosulin may be given by s.c., i.m., or i.v. injection. Human Insulatard, Human Mixtard 30/70 and Human Initard 50/50 should be re-suspended by inverting the vial several times before being given by s.c. or i.m. injection (they must not be given intravenously). Intermixing does not affect the characteristics of any of these insulins. **Use in pregnancy:** Insulin requirements usually fall during the first trimester and increase during the second and third trimesters. **Use in the elderly:** Insulin may have a more prolonged action due to reduced clearance rates. **Contra-indications warnings etc. Contra-indications:** Hypoglycaemia. **Precautions:** Patients transferring from other insulins may require a dosage adjustment. Concomitant therapy with thyroxine, corticosteroids, oral contraceptives, diuretics, beta blockers and M.A.O.I.s may affect insulin requirements. **Side and Adverse Effects:** Hypoglycaemia. Local reactions, lipodystrophy and hypersensitivity reactions are rarely reported with human insulins. **Pharmaceutical Precautions** be used. **Legal Category P. Package Quantities** 10 ml. glass vials. **Basic NHS Price** Human Insulatard 3132/0034; Human Mixtard 30/70 3132/0037; Human Initard 50/50 Insulatard 0003/0212; Human Mixtard 30/70 0003/0213; Human Initard 50/50 0003/0214. House, Garland Court, Garland Road, East Grinstead, West Sussex RH19 1DN; Foundation Ltd, Crewe Hall, Crewe, Cheshire CW1 1UB. Tel: Crewe (0270) 583151.



Store between 2-8°C, protected from sunlight. Insulin which has been frozen should not be used. **Product Licence Numbers** NORDISK-UK: Human Velosulin 3132/0031; 3132/0040. THE WELLCOME FOUNDATION LTD: Human Velosulin 0003/0211; Human Further information is available on request from either: Nordisk-UK, Nordisk Tel: East Grinstead (0342) 410373, or Wellcome Medical Division, The Wellcome **Reference** I. Heine R.J. et al, Diabetologia, 1984; 27: 558-562. *Registered Trade Mark



designed for each other..

HUMAN VELOSULIN®

Human neutral soluble insulin (emp)

HUMAN INSULATARD®

Human isophane (NPH) insulin (emp)

Quick and intermediate acting insulins developed to be compatible.

No interaction when mixed.†

Predictable effect in individually titrated regimens.

THE HEINZ FELLOWSHIPS OF THE BRITISH PAEDIATRIC ASSOCIATION

H. J. Heinz Company Limited generously endows Fellowships in Paediatrics which are administered by the British Paediatric Association.

Two or three Fellowships will be offered each year, the number and type awarded in any one year depending on circumstances and the calibre of applicants available.

The types of Fellowship, which are open to men or women are

A To enable paediatricians from any part of the Commonwealth overseas to spend up to twelve weeks in the United Kingdom, meeting British Paediatricians and seeing something of their work. Preference will be given to those recently established in an academic career who can arrange their visit to allow attendance at the Annual Meeting of the British Paediatric Association in April 1990.

C To enable paediatricians from the United Kingdom of Registrar, Senior Registrar, or Consultant status, or non-medically qualified members of the Association, in the early years of professional life to make a short working visit (up to three months) to a centre in a developing country, teaching or conducting research so as to benefit both fellow and hosts.

Applications for A Fellowships must be received by the British Paediatric Association not later than 31st December 1988

Applications for C Fellowships can be accepted by 31st January 1989 or 31st July 1989.

The conditions for the Fellowships and applications forms may be obtained from the British Paediatric Association, 5 St Andrew's Place, Regent's Park, London NW1 4LB.

CRANIOFACIAL SURGERY FOR PAEDIATRIC PRACTITIONERS

**Birmingham Medical Institute,
36 Harborne Road, Birmingham 15**

**Saturday, 19th November 1988
9-30 a.m. to 4-30 p.m.**

This One-Day Course is designed to provide an update for Paediatricians, Surgeons and other colleagues who are concerned with the management of children with Craniofacial anomalies. These include premature fusion of the cranial sutures, craniofacial syndromes, e.g. Apert's and Crouzon's, and the reconstruction of all types of facial and skull deformities in infants and children.

**REGISTRATION FEE
£20 including Morning Coffee, Lunch
and Afternoon Tea.**

Registration Form and Cheque,
made payable to:

J. H. GOLDIN,
CRANIOFACIAL SURGERY ACCOUNT
to be returned to Mr. J. H. Goldin, F.R.C.S.,
Consultant Plastic Surgeon, Craniofacial
Surgery Unit, Wordsley Hospital, Wordsley,
Stourbridge, West Midlands DY8 5QX.

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(For name badge)

Registration Fee enclosed.