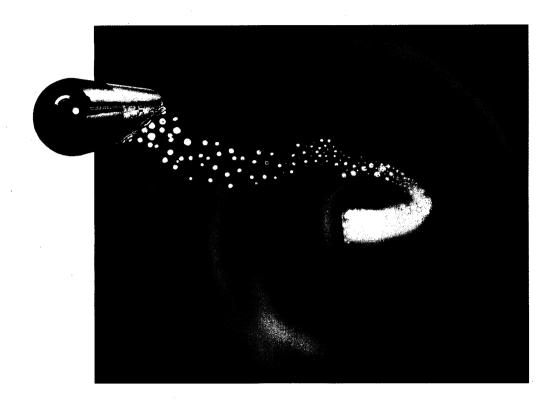
## **PROGRESS**

### In The Management Of Cystic Fibrosis





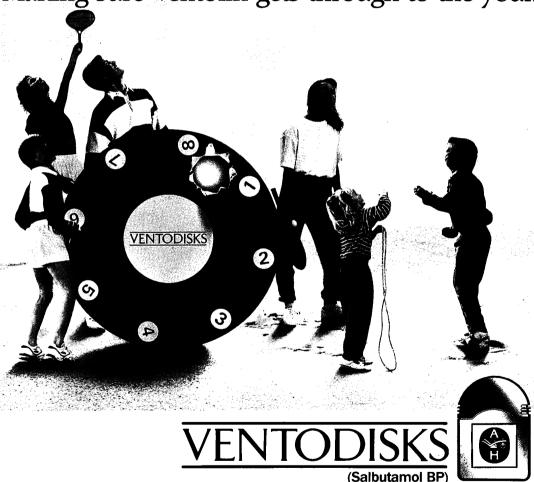
#### RIGHT ON TARGET - RIGHT FROM THE START

Prescribing Information — Presentation: Brown-yellow capsules containing enteric coated granules of pancreatin equivalent to: 9,000 BP units of amylase, 8,000 BP units of lipase, 210 BP units of protease. Available in packs of 100. Basic NHS price £13.33. Indication: Pancreatic exocrine insufficiency. Dosage and administration: Adults and children: Initially one or two capsules with meals, then adjust according to response. The capsules can be swallowed whole, or for ease of administration they may be opened and the granules taken with fluid or soft food, but without chewing. If the granules are mixed with food, it is important that they are taken immediately, otherwise dissolution of the enteric coating may result.

Contra-indications, Warnings, etc: Contra-indications: Substitution with pancreatic enzymes is contra-indicated in the early stages of acute pancreatitis. Warnings: Use in pregnancy: There is inadequate evidence of safety in use during pregnancy. The product is of porcine origin. Rarely cases of hyper-uricosuria and hyper-uricaemia have been reported with high doses of pancreatin. Overdosage could precipitate meconium ileus equivalent. Perianal irritation could occur, and, rarely, inflammation when large doses are used. Product Licence Number: 5727/0001. Name and address of Licence Holder: Kali Chemie Pharma GmbH, Postfach 220, D-3000, Hannover 1, West Germany.



Making sure Ventolin gets through to the younger generation



Ventodisks (Salbutamol BP). Abridged Prescribing Information (Please refer to full data sheet before prescribing.) Uses: Treatment and prophylaxis of acute and chronic bronchospasm. Dosage and administration: Adults: 400 micrograms as single dose or three to four times daily. Children: 200 micrograms as single dose or three to four times daily. Contra-indications: Threatened abortion during first or second trimester. Hypersensitivity. Precautions: If previously effective dose lasts less than three hours, seek medical advice. Caution in patients with thyrotoxicosis. Avoid use with non-selective beta-blockers. Hypokalaemia may occur, particularly in acute severe asthma. It may be potentiated by xanthine derivatives, steroids, diuretics and hypoxia. Serum potassium levels should be monitored in such situations. Pregnancy: Avoid unnecessary use during early pregnancy. Only consider if expected benefit outweighs possible risks. Lactation: Salbutamol likely to

be secreted in breast milk. Effect on neonate unknown. Balance risks against benefits. Side effects: Mild tremor, headache occur rarely. Very rarely — transient muscle cramps and hypersensitivity reactions. Potentially serious hypokalaemia may result from  $B_2$ -agonist therapy. Paradoxical bronchospasm could occur – substitute alternative therapy. Presentation and Basic NHS cost: Pack of 14 Ventodisks each containing 8 x 200 micrograms Salbutamol BP (as sulphate) — light blue or 8 x 400 micrograms Salbutamol BP (as sulphate) — dark blue, together with a Ventodin Diskhaler. For inhalation. £7·11 and £12·02. Refill pack of 14 x 8 Ventodisks only. 200 micrograms, £6·54; 400 micrograms, £11·45.

Product licence numbers: Ventodisks 200 micrograms 0045/0134, Ventodisks 400 micrograms 0045/0135.

ALLEN & HANBURYS

PRESCRIBING INFORMATION Presentation TILADE Mint is a metered dose pressurised aerosol inhaler which delivers 56 puffs, each containing 2mg Nedocromil sodium. <u>Indications. TILADE Mint</u> is indicated for the preventive treatment of reversible obstructive airways disease, including asthma and asthmatic bronchitis. <u>Dosage and Administration.</u> Adults and children over 12 years of age: 2 puffs (4mg Nedocromil sodium) to be inhaled twice daily. If necessary, dosage may be increased to 2 puffs four times daily.

Children under 12 years of age: it is recommended that TILADE Mint should not be used since it is still under investigation in this age group. TILADE Mint is intended for regular daily usage and should not be used for relief of symptoms in an acute attack. Side effects, precautions and contra-indications few side effects have been reported, principally headache and nausea. The mint flavour has been added to mask any bitter taste of the drug. Caution should be exercised in the use of TILADE Mint in pregnant or lactating

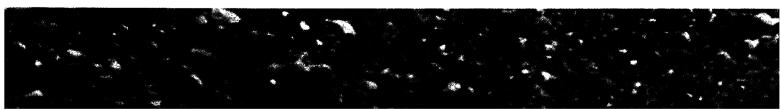
women. There are no specific contraindications <u>Basic NHS Cost</u> 2 x 56 actuations £17.76. <u>PL Number</u>: 0113/0140. Further information is available on request. ® Registered Trade Mark of the Manufacturer. Fisons plc - Pharmaceutical Division, 12 Derby Road, Loughborough, leicestershire LE11 OBB

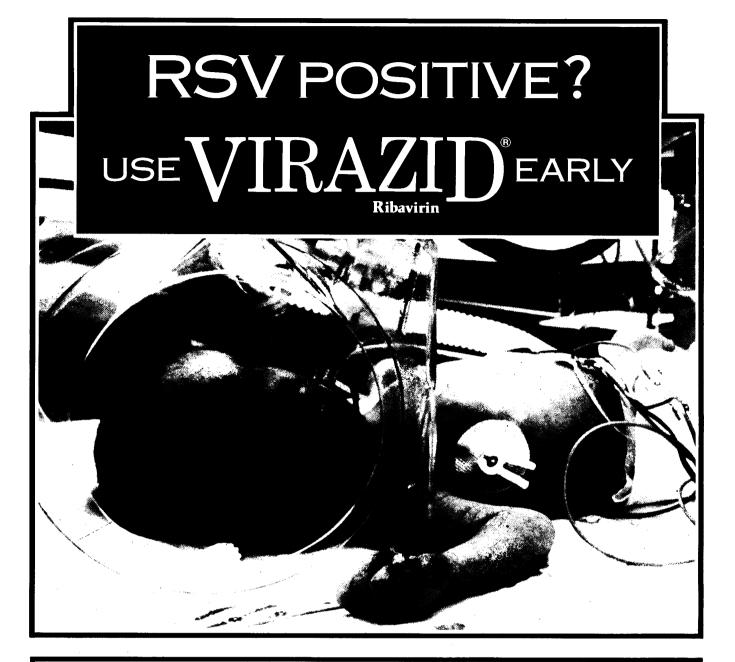
Pharmaceuticals











#### YOU CAN TREAT THE INFECTION NOT JUST THE SYMPTOMS

#### Prescribing Information ▼

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

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/1

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

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 acrosol 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 × 6g vial £195.

Product Licence Number Product Licence Holder Supplied By

4657/0004 Viratek Inc. USA

Britannia Pharmaceuticals Ltd Forum House 41-51 Brighton Road Redhill, Surrey,



# Controlling seizures, changing lives

Established Efficacy - In Adults and Children
Over 16 thousand patient years to date. (1)

In uncontrolled epilepsy > 50% reduction of seizures in approximately 50% of patients with some becoming seizure free. (2)

#### Serum Monitoring not required

Therapeutically significant interactions with other antiepilepsy drugs are unlikely. (3,4,5)

Defined mode of action



Specific GABA-transaminase inhibition for uncontrolled epilepsy

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Marion Merrell Dow Limited, Lakeside House, Stockley Park, Uxbridge, Middlesex UB11 1BE Trademarks: Merion, Merrell, Dow, Sabril.

#### Abridged Prescribing Information SABRILTablets

Presentation: White, tablets with a breakline marked SABRIL, each containing 500mg vigabatrin.

Uses: Indications: Treatment of epilepsy not controlled by other antiepileptic drugs.

Dosage and Administration: Oral administration once or twice daily added to the patient's current therapeutic regimen.

Adults: Recommended starting dose 2g/day. Increased or decreased in 0.5g or 1.0g increments depending upon clinical response and tolerability. Maximum 4g/day. There is no direct correlation between plasma concentration and efficacy. Children: Recommended starting dose 1g/day in ages 3-9 years and 2g/day if older.

Elderly: Consider dose reduction in patients with impaired renal function.

Contra-indications, Precautions, Warnings etc.

Use in pregnancy and lactation: Contra-indicated.

Precautions: Abrupt withdrawal may lead to rebound seizures. Caution in patients with history of psychosis or behavioural problems. Caution in elderly patients, particularly creatinine clearance below 60ml/min. Reduce dose and monitor closely for adverse events.

clearance below 60ml/min. Reduce dose and monitor closely for adverse events.

Warnings: Vigabatrin causes intramyelinic oedema in the brain white matter tracts of animals but there is no evidence of this in man. However, monitor patients for neurological changes. See the full product data sheet.

Effects on driving ability: Drowsiness has been seen and patients should be warned.

Side effects: Are mainly CNS related. Aggression and psychosis have been reported and a previous history of psychosis or a behavioural problem appears to be a predisposing factor. Other reported events: drowsiness and fatigue, dizziness, nervousness, irritability, depression, headache and less commonly confusion, memory disturbance and vision complaints; also weight gain and minor gastrointestinal side-effects. Also in children excitation and agitation. Some patients may experience an increase in seizure frequency with vigabatrin, particularly those with myoclonic seizures. Tests have not revealed evidence of neurotoxicity in humans. Lab data do not indicate renal or hepatic toxicity. Decreases in SGOT and SGPT have been observed. Chronic treatment may lead to a slight decrease in haemoglobin.

Drug Interactions: Are unlikely. A gradual reduction of about 20% in plasma phenytoin concentration has been observed.

No clinically significant interactions with carbamazepine, phenobarbitone or sodium valproate.

Legal Category: POM

Package Quantities: Blister strips of 10 in cartons of 100.

Product Licence Number: PL 4425/0098 NHS Price: £46.00

Date of Preparation: January 1992.

You must refer to the full prescribing information before administering Sabril. Further information including full product data sheet is available from the Licence Holder: Marion Merrell Dow Ltd., Lakeside House, Stockley Park, Uxbridge, Middlesex. UB11 1BE.

#### References:

- 1. Worldwide Sales Data
- 2. Mumford JP.Br J Clin Pract 1988; 42 (Suppl 61): 7-9
- 3. Tartara A. et al. Epilepsia 1986:27:717-723
- 4. Tassinari CA et al, Arch Neurol 1987:44:907-910
- 5. Rimmer EM, Richens A. Lancet 1984I1:189-190

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#### Alvedon™ Suppositories 125mg

PRESENTATION: White to yellowish white suppositories containing 125mg paracetamol.

**USES:** For treatment of mild to moderate pain and pyrexia in children. Alvedon suppositories may be especially useful in patients unable to take oral forms of paracetamol eg. post-operatively or with nausea and vomiting.

#### DOSAGE AND ADMINISTRATION: Children: 1-5 years, 1-2 suppositories.

The dosage should be based on age and weight ie.

1 year (10kg) 1 suppository

5 years (20kg) 2 suppositories

These doses may be repeated up to 4 times daily.

#### **CONTRA-INDICATIONS, WARNINGS, ETC:**

#### Contra-indications:

Hypersensitivity to paracetamol.

#### **Precautions:**

Paracetamol should be given with care to patients with impaired kidney or liver function.

#### Interactions:

Drugs which induce hepatic microsomal enzymes such as alcohol, barbiturates and other anticonvulsants may increase the hepatotoxicity of paracetamol particularly after overdosage.

#### Side-effects

Side-effects at therapeutic doses are rare. Isolated cases of liver damage and allergic reactions such as skin rash have been reported.

Redness of the mucous membrane of the rectum and minor local vascular changes have been reported after the use of Alvedon suppositories. Hepatic necrosis may occur after overdosage. (See below).

#### **Pregnancy and Lactation:**

Not applicable.

#### PHARMACEUTICAL PRECAUTIONS: Store below 25°C.

**LEGAL CATEGORY:** P

**PACKAGE QUANTITIES:** 10 strips each containing 5 suppositories or 2 strips each containing 5 suppositories.

**FURTHER INFORMATION:** Treatment of overdosage: Clinical symptoms of liver damage are manifested usually after 48 hours. Overdosage results in saturation of the conjugation capacity of the liver and irreversible binding of a reactive intermediate metabolite in the hepatocytes. N-acetylcysteine intravenously or L-methionine orally protects the liver if adminstered within 10-12 hours of ingesting an overdose

PRODUCT LICENCE NO: 0017/0250.

PRODUCT LICENCE HOLDER: Astra Pharmaceuticals Ltd., Home Park, Kings Langley, Herts

ND4 8DH.

**DATE OF PREPARATION:** June 1991.

Alvedon suppositories are marketed and distributed by NOVEX PHARMA, a division of NOVEX PHARMA LTD., Henley-on-Thames, Oxon, RG9 1EL

\*Alvedon trademark applied for by AB Astra.

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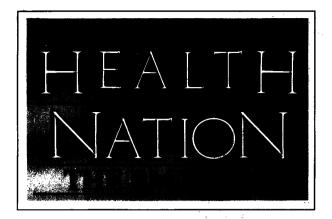




Prescribing information: Uses Nausea and vomiting due to chemotherapy or radiotherapy. Dosage Emetogenic chemotherapy and radiotherapy: Either, 8mg i.v. as a slow injection immediately before treatment, or 8mg orally 1 to 2 hours before treatment, followed by 8mg orally twelve-hourly. To protect against delayed emesis, Zofran should be continued orally, 8mg twice daily for up to 5 days. Highly emetogenic chemotherapy: A single dose of 8mg i.v. as a slow injection immediately before chemotherapy, followed by 8mg orally twice daily for up to 5 days to protect against delayed emesis. The efficacy of Zofran over the first 24 hours of highly emetogenic chemotherapy may be enhanced by the addition of a single i.v. dose of 20mg dexamethasone immediately before treatment. Alternatively, higher doses of Zofran may be beneficial, up to 32mg depending on the severity of the emetogenic challenge. Children: A single i.v. dose of 5mg/m² immediately before chemotherapy, followed by 4mg orally twelve-hourly for up to 5 days. Elderly and patients with renal impairment: No alteration of dosage, dosing frequency or route of administration is required over 65 years or with renal impairment. Patients with hepatic impairment: In patients with moderate or severe hepatic impairment, a total daily dosage of 8mg should not be exceeded. Contra-

indications Hypersensitivity to components. Precautions Pregnancy or lactation. Side effects Headache, constipation, a warm or flushing sensation in the head or epigastrium. Occasional transient rises in aminotransferases. Rare, immediate hypersensitivity reactions (see data sheet). Presentations Zofran Injection ampoules containing 4mg andansetron in 2ml aqueous solution or 8mg andansetron in 4ml aqueous solution (Product licence number 0004/0375, 4mg x 5 ampoules \$25-50; 8mg x 5 ampoules \$75). Zofran 4mg Tablets each containing 4mg andansetron (Product licence number 0004/0376, 4mg x 30 tablets \$187-50). Zofran 8mg Tablets each containing 8mg andansetron (Product licence number 0004/0377, 8mg x 10 tablets \$90). Product licence holder Glaxo Operations U.K. Limited, Greenford, Middlesex UB6 OHE. Zofran is a Glaxo trade mark. Further information is available on request from: Glaxo Laboratories Limited, Stockley Park West, Uxbridge, Middlesex UB11 IB1. Tel: 081-990 9444.





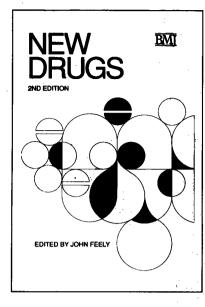
#### Edited by Richard Smith, Editor of the BMJ

"...a strategy imposed by the government which takes no heed of the views of those who will have to implement it...is valueless". So writes William Waldegrave, Secretary of State for Health, in his introduction to *The Health of the Nation*, the government's consultative document that sets out a strategy for improving the health of the English. Taking Mr Waldegrave at his word on wanting to listen to everybody, the BM7 commissioned a series of articles that explain the views of some of those most concerned. Contributors discuss each of the 16 key areas defined in the strategy and suggest other subjects that might qualify as key areas. One article, from the Radical Statistics Health Group, is strongly critical of the strategy; others are critical of various aspects of it, but almost all of the contributors support the idea of setting targets for improving health. Originally published in the BMJ, this collection of articles is an important contribution to the debate on how to achieve health for the nation. Furthermore, the articles will be useful beyond the borders of England because most developed countries are now setting strategies to improve health.

#### **Published 27 November 1991**

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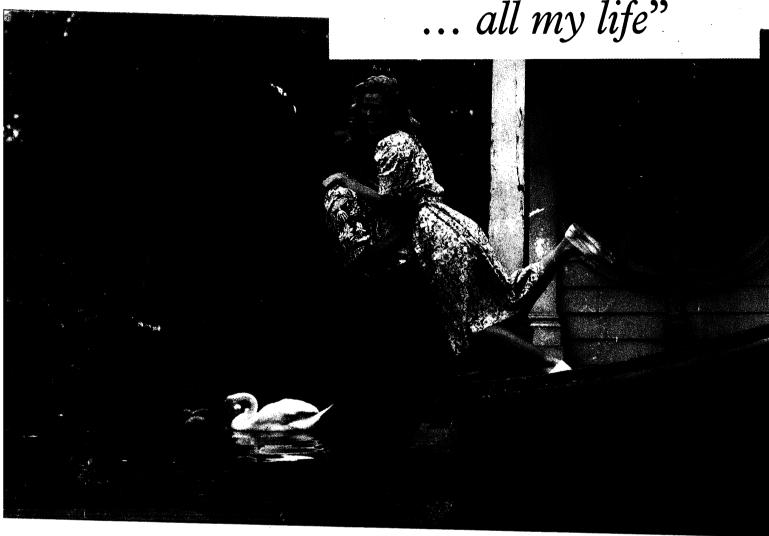
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