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Human Insulin (emp) (Isophane Insulin Injection)
Indications The treatment of insulin-requiring diabetic

Human Actrapid is indicated for diabetics who require a quick and intense-acting insulin, particularly in emergencies such as diabetic hyperglycaemic coma during surgery and severe infections in diabetics, and in thring surgery and severe infections in diabetics, and it the management of pregnant diabetics. Human Monocomponent insulin may be advantageous in the treatment of insulin-induced fat strophy, insulin allergy, insulin resistance and when intermittent short-term therapy is required.

Dosage and Administration The dosage of Human Actrapid, Human Monotard and Human Prosaphane is determined by the physician according to the needs of

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admixed with Human Monosterd or Human Protaphane in the syringe and nineted immediately. Ul00 intaulins must only be used with Ul00 syringes. Peristaltic pumps froller pumps are not suitable for use with Human Actrapid due to the risk of precipitation. Human Actrapid due to the risk of precipitation. Human Monostard and Human Protaphane must not be used in insulin infusion pumps.

Contra-Indications, Warnings and Adverse Effects Insulin is contra-indicated in hypoglycaemia. In the event of an overdose, glucose should be given orally if the patient is conscious. The unconscious patient should be treated with glucose intravenously and glucogo may be administered intramuscularly or subcutaneously. On transfer from porcine monocomponent insulins or other highly purified porcine insulins to Human Monocomponent insulin. Monocomponent insulin, no change in dosage is anticipated other than the routine adjustments made in order to maintain stable diabetic control. However, anticipated other than the routine applications insuce in order to maintain stable diabetic control. However, patients transferred from conventional (predominantly bovine) insulins may requite a dosage adjustment. The addition of corticosteroids, oral contraceptives or thyritometer control of the control

Pack Size and Basic NHS Price (LIK only)

10ml vials C7.88
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References:

Bernstein, L. et al., *J.Allergy Clin.Immunol.*, (1972), **50**, 4, 235-245.
 Rubin, A. E., Alroy, G. & Spitzer, S., *Curr.Med.Res.Opin.*, (1983), **8**, 553.
 Toogood, J. H. et al., *J.Allergy Clin.Immunol.*, (1973), **52**, 6, 334-345.
 Diaz, P. et al., *Thorax*, (1983), **38**, 9, 702-703.

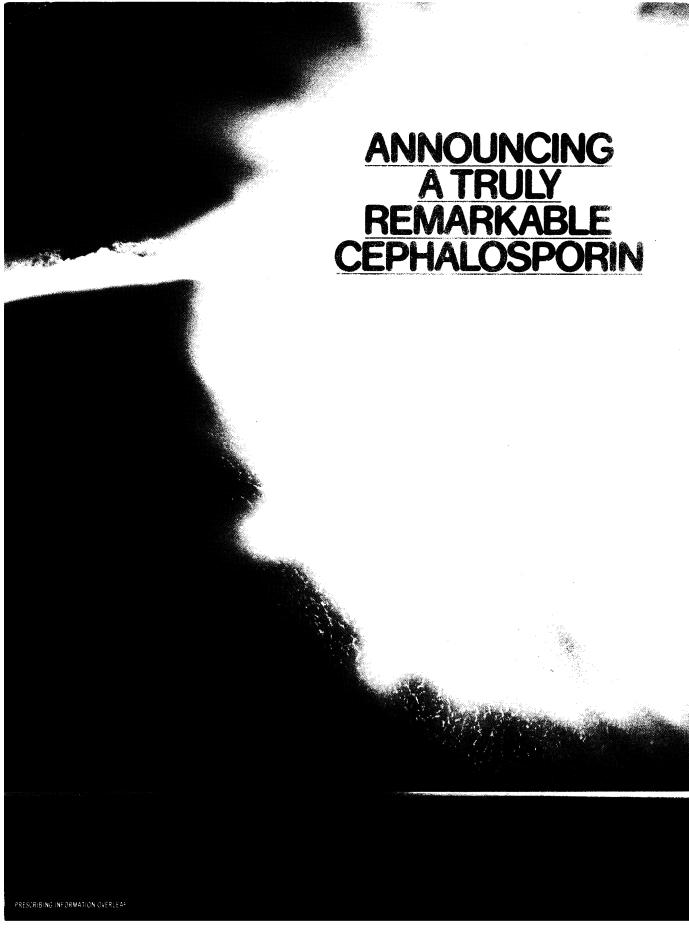
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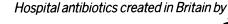
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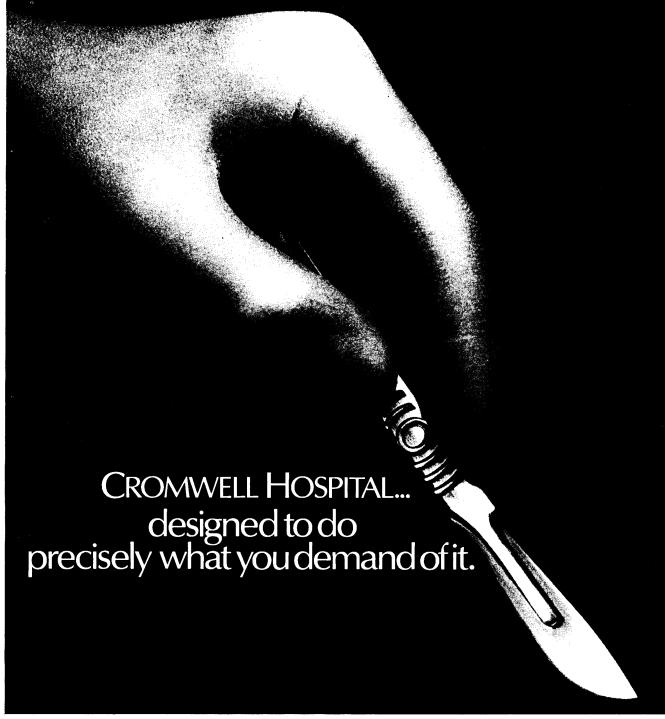
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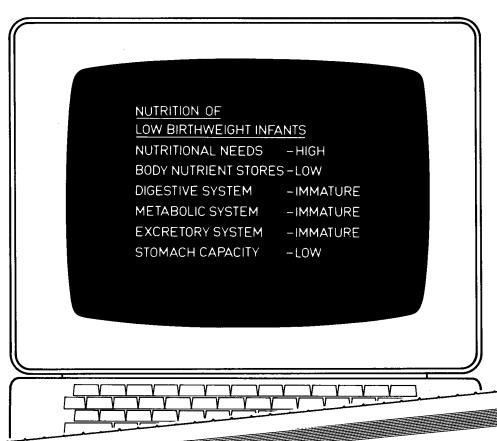
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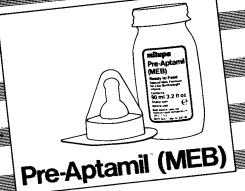


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- 1 Brooke, O. G., Wood, C., Barley, J. Arch. Dis. Child 1982, **57,** 898–904.

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B. MACKLER, R. GRACE, AND C. A. FINCH (Seattle, Washington)

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Hypoxanthine and Oxygen Induced Lung Injury: A Possible Basic Mechanism of Tissue Damage?

O. D. SAUGSTAD, M. HALLMAN, J. L. ABRAHAM, B. EPSTEIN, C. COCHRANE, AND L. GLUCK (La Jolla, California)

The authors report that the combination of hypoxanthine and high levels of oxygen causes lung injury, possibly via free oxygen radicals.

Kinetics of Uptake of L-Leucine and Glycylsarcosine into Normal and Protein Malnourished Young Rat Jejunum

P. M. MILLER, D. BURSTON, M. J. BRUETON, AND D. M. MATTHEWS (London, England)

There is a 3-fold increase in both peptide and amino acid uptake in protein malnourished rats compared with the controls.

The Identification and the Excretion Pattern of Isovaleryl Glucuronide in the Urine of Patients with Isovaleric Acidemia

D. G. HINE AND K. TANAKA (New Haven, Connecticut)

Using gas chromatography, mass spectrometry, and enzymatic methods, the authors identify isovaleryl glucuronide in the urine of four patients with isovaleric acidemia. Isovaleryl glucuronide is more likely to be excreted when high amounts of 3-hydroxyisovaleric acid are excreted.

Colostrum-Induced Enteric Mucosal Growth in Beagle Puppies

W. C. HEIRD, S. M. SCHWARZ, AND I. H. HANSEN (New York, New York)

Enteric mucosa of naturally fed, but not artificially fed beagle puppies, undergoes marked growth over the first 24 h of life.

The Effect of Chloral Hydrate on Genioglossus and Diaphragmatic Activity.

M. HERSHENSON, R. T. BROUILLETTE, E. OLSEN, AND C. E. HUNT (Chicago, Illinois)

Chloral hydrate depresses genioglossus but not diaphragmatic activity

Urinary Excretion Rates of 6-Keto-PGF $_{1\alpha}$ in Preterm Infants Recovering from Respiratory Distress with and without Patent Ductus Arteriosus

H. W. SEYBERTH, H. MÜLLER, H. E. ULMER, AND L. WILLE (Heidelberg, West Germany)

This study provides evidence that increased systemic prostanoid production may be involved in the pathogenesis of persistent patent ductus arteriosus.

Body Water Measurements in Premature and Older Infants Using H₂ ¹⁸O Isotopic Determinations

F. L. TROWBRIDGE, G. G. GRAHAM, W. W. WONG, E. D. MELLITS, J. D. RABOLD, L. S. LEE, M. P. CABRERA, AND P. D. KLEIN (Baltimore, Maryland and Houston, Texas)

Reliable total body water estimates can be obtained from sample volumes as small as 50 μ l of urine or plasma using a gas-isotope-ratio mass spectrometer equipped with an automated purification inlet system.

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