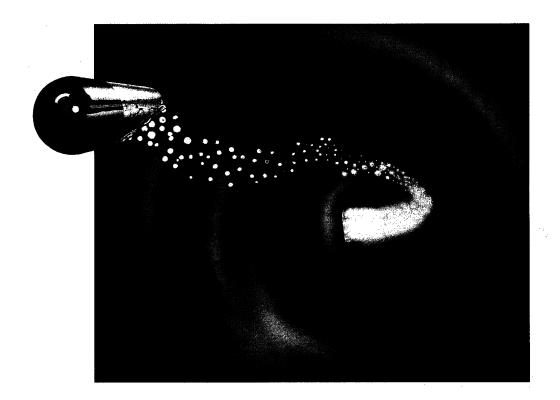
PROGRESS

In The Management Of Cystic Fibrosis





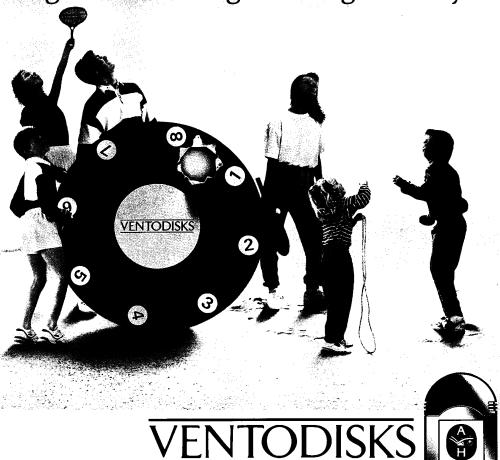
RIGHT ON TARGET - RIGHT FROM THE START

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 NH5 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. Perlanal 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



(Salbutamol BP)



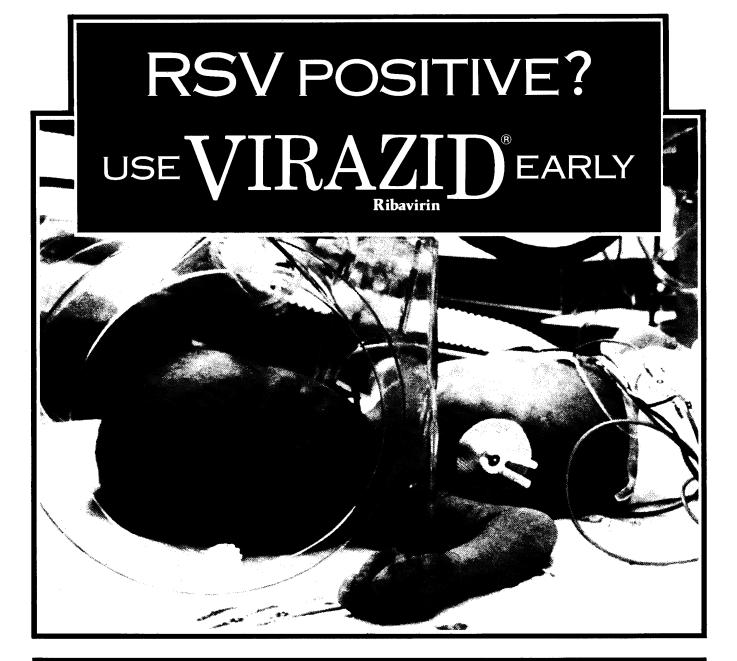
Ventodisks (Salbutamol BP) Abridged Prescribing Information: (Please refer to full Ventodisks (Salbutamol BP) Abridged Prescribing Information: (Please refer to trul data sheet before prescribing). Uses: Treatment and prophylaxis of acute and chronic bronchospasm. Dosage and administration: Adults: 400 micrograms, as a single dose or three to four times daily. Children: 200 micrograms, up to four times daily. Contraindications: 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. 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: breast milk. Effect on neonate unknown. Balance risks against denents. Side effects: Mild tremor, headache occur rarely. Very rarely – transient muscle cramps and hypersensitivity reactions. 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 Ventolin 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

Further information is available on request from: Allen & Hanburys Limited, Uxbridge, Middlesex UB11 1BT Ventodisks should only be used with a Ventolin Diskhaler. Diskhaler, Ventodisks and Ventolin are trade marks



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 acrosol 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

Precautions

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

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.

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

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: Product Licence Number

Product Licence Holder Supplied By

Viratek Inc. USA Britannia Pharmaceuticals Ltd Pharmaceure as Forum House 41-51 Brighton Road Redhill, Surrey,

1 × 6g vial £195.

4657/0004

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 Paediatric Enteral Feeding Solutions and Systems. A Report by the Joint Working Party of the Paediatric Group and the Parenteral and Enteral Nutrition Group of the British Dietetic Association, 1988.



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NUTRIZYM[®] GR

GASTRO-RESISTANT PANCREATIN THERAPY IN PANCREATIC INSUFFICIENCY



digestion of food.

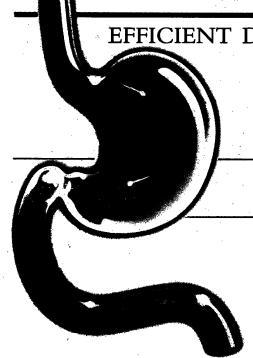
66 The size of microspheres of pancreatin should be such that they empty at least as fast as the food they are intended to digest. ?? Gelatin capsule containing enteric coated acid

intact and disperse throughout chyme.

resistant microspheres of Lipase, Amylase and Protease. Capsule dissolves in gastric fluids; microspheres remain

Enteric coating of microspheres starts to dissolve in duodenum at pH of about 5, releasing enzymes for

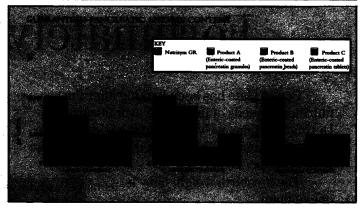
66 Recent reports on both Cystic Fibrosis and Adult Chronic Pancreatitis have demonstrated that duodenal postprandial pH . . . is frequently less than pH 5.5 . . . 993



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Its strong point is its strength

1) Pancreatin section, BNF. REFERENCES

- 2) Meyer JH et al, Gastroenterology, 1988, Vol. 94, No. 6, 1315-25.
- 3) Littlewood JM, Kelleher J, Walters MP & Johnson AW, J Paediatr. Gastroenterol. Nutr., 1988, Vol. 7, Suppl. 1, 522-529.
- 4) Dodge JA & Matthews EE (Data on file).

Further information is available on request from E. Merck Pharmaceuticals (a division of Merck Ltd) FREEPOST, Winchester Road, Four Marks, Alton Hants GU34 5HB. Telephone (0420) 64011.

NUTRIZYM GR - Prescribing Information
Each capsule contains enteric coated pellets of Pancreatin BP 300 mg with not less than the following activities:
Lipase 10,000 BPU, Protease 650 BPU, Amylase 10,000 BPU
Use: Fibrocystic disease of the pancreas, chronic pancreatitis, steatorrhoea and other particreatic deficiency states.

Dosage and Administration: Usually 1 - 2 capsules with meals.

Capsules should be swallowed whole with water or contents sprinkled on food. Pellets should not be chewed.

Contra-indications: Known hypersensitivity to porcine pancreatin.

Precautions: Hyperuricaemia and hyperuricosuria have been reported to occur in

cystic fibrosis patients; pancreatin extracts contain a very small amount of purine which might, in high dose, contribute to this condition.

Use in Pregnancy: Safety in pregnancy has not been established.

Side effects: Very rarely hypersensitivity reactions. High doses may cause buccal and perianal irritation, in rare cases amounting to inflammation.

Pharmaceutical Precautions

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Package quantities

Containers of 100 capsules (OP) PL 0493/0121; NHS Price: £12.52 at February 1990

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

lises:

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.

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Contra-indications, Precautions, Warnings etc.:

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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.

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: PL4425/0098. NHS Price: Pack of 100 tablets: £46. Date of Preparation: December 1990

You must refer to the full prescribing information before administering Sabril. Further information including full product data sheet is available from the

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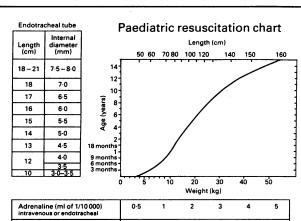
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1. Mumford JP. Br J Clin Pract 1988; 42 (Suppl 61): 7-9. 2. Browne TR, et al. Neurology 1987; 37: 184-189. 3. Tartara A, et al. Epilepsia 1986; 27: 717-723. 4. Tassinari CA, et al. Arch Neurol 1987; 44: 907-910. 5. Rimmer EM, Richens A. Lancet 1984; 1:189-190.

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Adrenaline (ml of 1/10 000) intravenous or endotracheal	0.5	1	2	3	4	5
Atropine (mg) intravenous or endotracheal	0-1	0-2	0.4	0.6	0.6	0.6
Bicarbonate (ml of 8-4%) intravenous	5	10	20	30	40	50
Calcium chloride (mmol)* intravenous	1	2	. 4	6	8	10
Diazepam (mg) intravenous per rectum	1·25 2·5	2·5 5	5 10	7.5	10	10
Glucose (ml of 50%) intravenous	10	20	40	60	80	100
Lignocaine (mg) intravenous or endotracheal	5	10	20	30	40	50
Salbutamol (µg) intravenous	25	50	100	150	200	250
Initial DC defibrillation (J)	10	20	40	60	80	100
Initial fluid infusion in hypovolaemic shock (ml)	50	100	200	300	400	500

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138. Band Heft 12 Dezember 1990 Organ der Deutschen Gesellschaft für Kinderheilkunde

Thema des Monats

HIV-Infektionen bei Kindern — Diagnostik und Betreuung

Editorial 783

- I. Grosch-Wörner, J. Eberle HIV-Diagnostik beim Kind — Methodik, rationeller Einsatz und Aussagefähigkeit 784
- C. Rosendahl,
 J. Neumann-Mager,
 E. Schroll, E. Fahrenheim,
 R. Autenrieth, U. Wintergerst,
 B. H. Belohradsky
 Psychosoziale Probleme in
 HIV-infizierten Familien —
 Möglichkeiten der Bewäl-

Pädiatrie aktuell

tigung 787

Günstiger Einfluß von Vitamin A auf den Verlauf schwerer Masern

Leukotrien-Erhöhung im Trachealsekret von Säuglingen mit bronchopulmonaler Dysplasie

Neue Kriterien zur Diagnose der Zöliakie 791

Was hat das Kind?

Trainingsprogramm für die Weiterbildung zum Kinderarzt 792

Klinik und Forschung

U. Kalker, O. Hövels, H. Kolbe-Saborowski Kurz- und mittelfristige Ergebnisse der Behandlung von Kindern mit Adipositas 793

U. Maas, E. Kattner, S. Koch, A. Schäfer, M. Obladen Pränatale Entwicklung und postnatale Morbidität bei Neugeborenen HIV-positiver Mitter 799

H. Stiening, R. Szczepanski, K. E. v. Mühlendahl, C. Kalveram Neurodermitis und Nahrungsmittelallergie. Klinische Relevanz von Testverfahren 803

Der interessante Fall

H. Hebestreit, J. Pannenbecker, A.-M. Mingers, H. Bartels Pellagra unter antikonvulsiver Behandlung 808

J. Roesler, M. Melter, A. Emmendörffer, S. Rohde, J. Brodehl Chronisch rezidivierende Stomatitis aphthosa bei einer 15jährigen Konduktorin für x-chromosomal vererbte Cytochrom b₅₅₈-negative septische Granulo-

matose 811
G. Schulz-Lell, H. Schröder,
J. Schaub
Arterielle Thrombose bei
einem Frühgeborenen 814
K. Bloch, A. Witztum,

H. G. Wieser, St. Schmid, R. Russi Obstruktives Schlaf-Apnoe-Syndrom bei einem Kind mit Trisomie 21 817

Wußten Sie schon?

Aus der Klinik für die Klinik R. Richter, U. Grumpelt, U. Mittler, U. Kluba Echokardiographische Untersuchungen zur Erkennung kardiotoxischer Nebenwirkungen der Anthrazyklintherapie im Kindesalter 823

Was hat das Kind?

Auflösung und Kommentar des Trainingsprogramms 828

Aus Gesellschaften und Berufsverband 829 Neue Bücher 829 Tagungskalender 831 Sachregister 832

Inhalt Band 138



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Helvetica Paediatrica Acta

Volume 150 No. 1 1990

The pioneers of pediatric medicine

Review

Scientifically-based strategies for nutrition of the high-risk low birth weight infant

J. Neu, C. Valentine, W. Meetze 2

Cardiology

Chest X-ray film patterns in children with isolated total anomalous pulmonary vein connection T. Genz, D. Locher, S. Genz,

T. Genz, D. Locher, S. Genz, G. Schumacher, K. Bühlmeyer

Angiotensin converting enzyme activity in children with congenital heart disease

U. Salzer-Muhar, W. Graninger, H. R. Salzer, M. Wimmer 19

Endocrinology

Sodium chloride supplement at diagnosis and during infancy in children with salt-losing 21-hydroxylase deficiency

P. E. Mullis, P. C. Hindmarsh, C. G. D. Brook 22

Does growth hormone influence the severity of phosphopenic rickets?

T. Bistritzer, S. A. Chalew, A. Hanukoglu, K. M. Armour, P. J. Haney, A. A. Kowarski **26**

Growth hormone deficiency of hypothalamic origin in septo-optic dysplasia

S. Yukizane, Y. Kimura, Y. Yamashita, T. Matsuishi, H. Horikawa, H. Ando, F. Yamashita **30** Imaging techniques

Demonstration of perivascular echogenicities in congenital cytomegalovirus infection by colour Doppler imaging

M. Ries, K.-H. Deeg, U. Heininger 34

Immunology/Allergology

Screening for delayed-hypersensitivity in Italian children: multicentric study by multitest skin testing

M. Bardare, L. Armenio, L. Businco, G. Cavagni, M. De Martino, M. Duse, M. Masi, V. Monafo, M. C. Pietrogrande, P. Tovo, M. C. Venturi 37

Immunological aspects of progeria (Hutchinson-Gilford syndrome) in a 15-month-old child

M. Harjaček, D. Batinić, V. Sarnavka, B. Užarević, D. Mardešić, M. Marušić

Infectious diseases

Reduction of peripheral blood macrophages/monocytes in Kawasaki disease by intravenous gammaglobulin

S. Furukawa, T. Matsubara, K. Jujoh, K. Sasai, S. Nakachi, T. Sugawara, K. Yabuta, H. Kato **43**

Epstein-Barr virus infection rapidly progressing to monoclonal lymphoproliferative disease in a child with selective immunodeficiency

V. Schuster, H.W. Kreth, H.K. Müller-Hermelink, H.-I. Huppertz, A.C. Feller, D. Neumann-Haefelin, H. Wiegand, N. Müller-Lantzsch 48

Medical genetics

The Marshall-Smith syndromeA. Charon, Y. Gillerot, L. Van Maldergem,
M. H. Van Schaftingen, B. de Bont,

L. Koulischer 54

Metabolic diseases

Excessive urinary oxalate excretion after combined renal and hepatic transplantation for correction of hyperoxaluria type 1

H. Ruder, G. Otto, R. B. H. Schutgens, U. Querfeld, R. J. A. Wanders, K.-H. Herzog, P. Wölfel, S. Pomer, K. Schärer, G. A. Rose **56** Neonatology

Assessment of neonatal jaundice in low birth weight infants comparing transcutaneous, capillary and arterial bilirubin levels

M. Amato, P. Huppi, D. Markus 59

Nephrology/Urology

Management of neurogenic bladder dysfunction secondary to myelomeningocele

M. Castro-Gago, I. Novo, A. Cimadevila, J. Peña, A. Rodriguez-Núñez, A. Marqués'-Queimadelos **62**

Neuropediatrics

Early-onset myasthenia gravis: clinical characteristics and response to therapy

A. P. Batocchi, A. Evoli, M.T. Palmisani, M. Lo Monaco, M. Bartoccioni, P. Tonali

Respiratory deterioration during growth hormone therapy in a case of congenital nemaline myopathy K.Logghe, J. M. Wit, F. Jennekens, J. E. H. Pruijs 69

Letters to the editors

How frequent is Capillaria hepatica infestation in Europe?

G. K. Kokai, V. N. Perisic 72

Reply by T. Berger 72

Intravenous immunoglobulin for neonatal isoimmune thrombocytopenia Ş.Özsoylu 72

Reply by P. Merlob 73

Severe methaemoglobinaemia due to para-chloraniline intoxication in premature neonates

M.M.J. van der Vorst, P. Tamminga, F. A. Wijburg, R. B. H. Schutgens **73**

Abstracts

The Summer Meeting of the Scottish Paediatric Society, Dundee, June 8, 1990 74

Indexed in Current Contents



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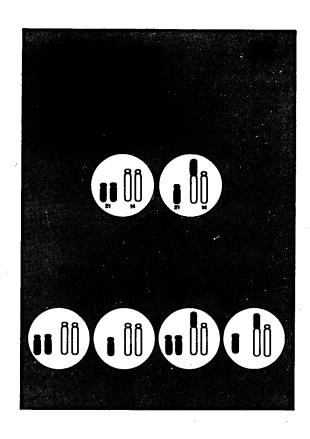
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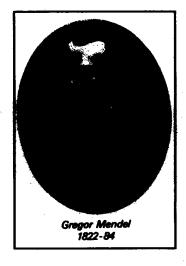
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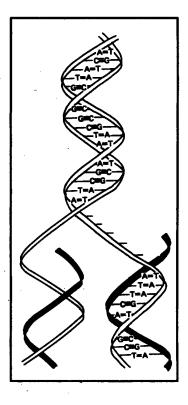
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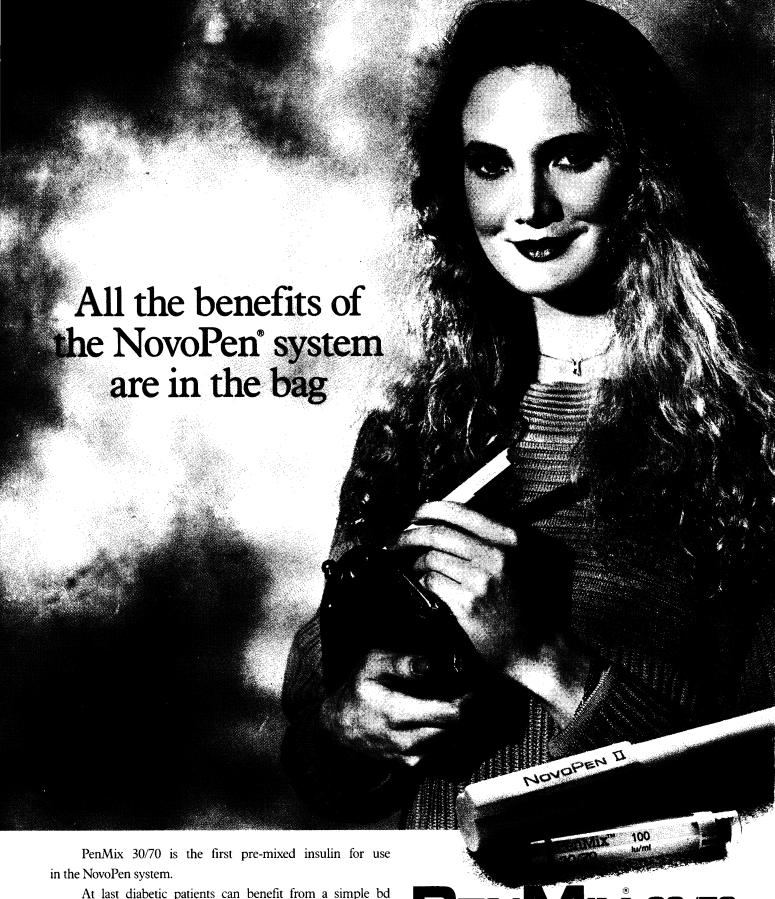


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