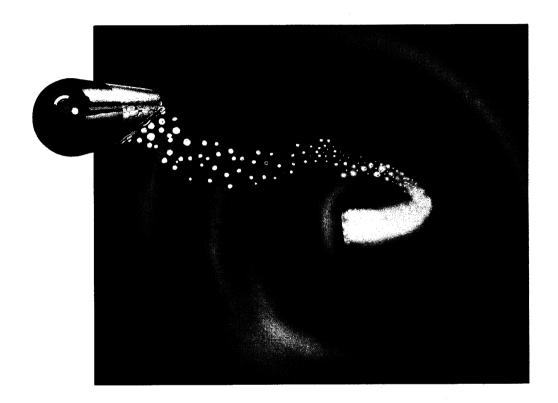
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In The Management Of Cystic Fibrosis





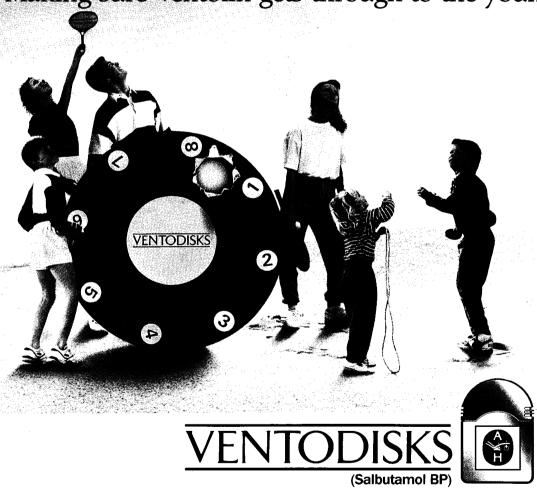
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Prescribing Information — Presentation: Brown-yellow capsules containing enteric coated granules of pancreatin equivalent to: 9,000 BP units of amylase, 8,000 BP units of lipase, 210 BP units of protease. Available in packs of 100. Basic NHS price £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.



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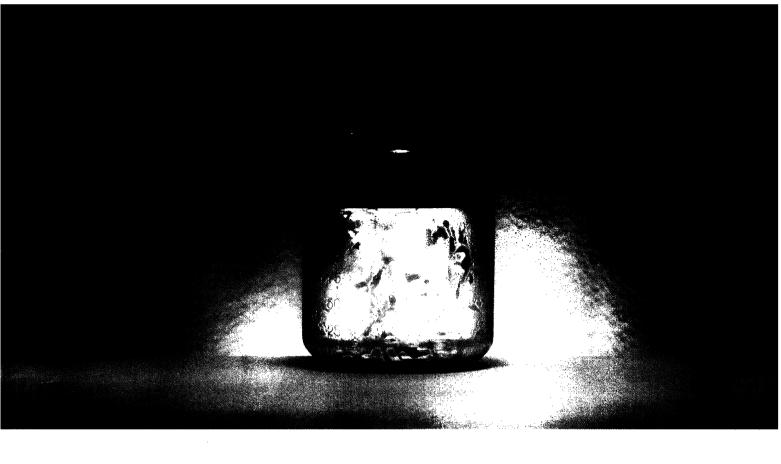


Ventodisks (Salbutamol BP). Abridged Prescribing Information (Please refer to full data sheet before prescribing.) Uses: Treatment and prophylaxis of acute and chronic bronchospasm. Dosage and administration: Adults: 400 micrograms as single dose or three to four times daily. Children: 200 micrograms 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 B₂-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 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. F12-02. Refini pack of 14 x 8 Ventodisks only. 200 micrograms, 2034, 400 micrograms F2-34, 400 micrograms 0045/0134, Ventodisks 400 micrograms 0045/0135.



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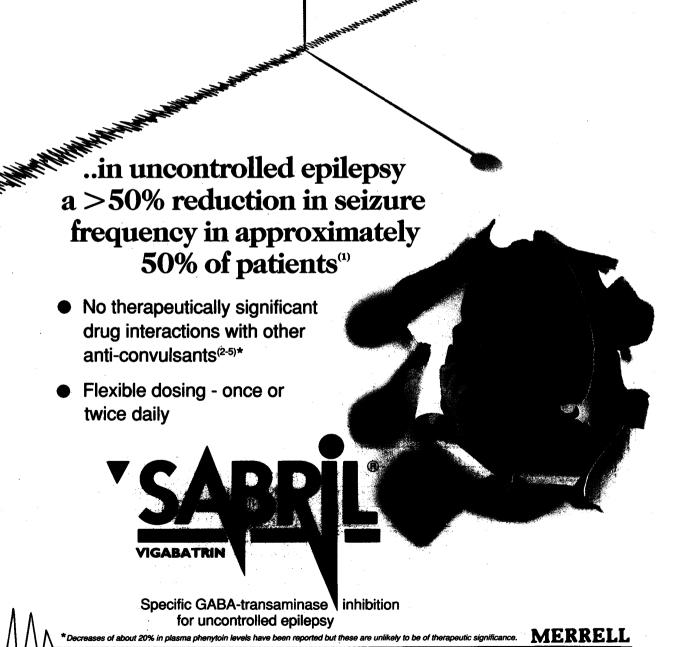


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Abridged Prescribing Information

SABRIL Tablets \

Uses:

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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.

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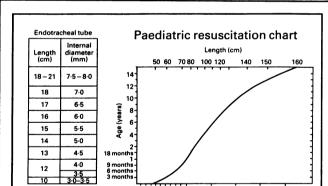
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1. Mumford JP. Br J Clin Pract 1988; 42 (Suppl 61): 7-9. 2. Browne TR, et al. Neurology 1987; 37: 184-189. 3. Tartara A, et al. Epilepsia 1986; 27: 717-723. 4. Tassinari CA, et al. Arch Neurol 1987; 44: 907-910. 5. Rimmer EM, Richens A. Lancet 1984: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



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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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Thema des Monats

Mukopolysaccharidosen Editorial 119 M. Beck Mukopolysaccharidosen: Nosologie — Klinik — Therapieansätze 120

Pädiatrie aktuell

Enterokokken als Sepsisursache bei Neuund Frühgeborenen Senkt die bereits vor der Schwangerschaft einsetzende Verbesserung der Stoffwechseleinstellung insulinabhängiger Diabetikerinnen das Risiko der Geburt fehlgebildeter Kinder?

Vergleich unterschiedlicher Immunglobulindosen bei der Behandlung des Kawasaki-Syndroms 128

Was hat das Kind?

Trainingsprogramm für die Weiterbildung zum Kinderarzt 129

Klinik und Forschung

S. Liptay, C. P. Bauer, A. Grübl, R. Franz, P. Emmrich Atopieentwicklung in der frühen Kindheit — Prädisponierende Faktoren 130 Ch. Pabelick, B. Koletzko

Ch. Pabelick, B. Koletzko Befunde bei Neugeborenen nierentransplantierter Mütter 136

W. Klapsch, Ch. Tschauner, R. Graf Kostendämpfung durch die generelle sonographische Hüftvorsorgeuntersuchung 141

H. Bode, R. Bubl Hirndurchblutung bei zerebralen Residualschäden. Eine Doppler-sonographische Studie 144

Der interessante Fall

U. Bertram, G. Hüls, W. Padberg, J. Turski, M. Altmannsberger Entzündlich fibroider Polyp des Magens als ungewöhnliche Differentialdiagnose eines Oberbauchtumors 151

I. D. Mutz, R. Stering Konnatales Neuroblastom und Plazentametastasen 154

W. Sperl, H. Fischer, J. Hager Chilaiditi's Koloninterposition bei einer Patientin mit Rett-

Syndrom 157
B. Sommer, H. L. Spohr GM₂-Gangliosidose Variante O (M. Sandhoff): Verdachts-diagnose einer Speicher-krankheit durch Ultraschall 160

Wußten Sie schon?

Aus der Klinik —
für die Klinik —
für die Klinik
G. Conrad, A. Ch. Ludwig,
F. Daschner
Sinnvolle und umweltschonende Desinfektion in
der Pädiatrie 163
G. Conrad, M. Scherrer,
F. Daschner
Vorschläge zur Abfallvermeidung und Umweltschutz in
der Kinderklinik und
kinderärztlichen Praxis 168

Was hat das Kind?

Auflösung und Kommentar des Trainingsprogramms 156

Tagesgeschichte 170 Tagungskalender 170

Abstracts der 21. Jahrestagung der Arbeitsgemeinschaft für Pädiatrische Nephrologie, 7.—9. 3. 1991 in Essen 174

Abstracts der 6. Jahrestagung der Gesellschaft für Pädiatrische Gastroenterologie und Ernährung, 1.—4. 5. 1991 in Goldegg 189



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Volume 150 No. 4 1991

Jürgen Spranger: on the occasion of his 60th birthday 219

Review

Balloon occlusion aortography T. Ino, S. Shimazaki, K. Nishimoto, K. Akimoto, M. Iwahara, K. Yabuta, M. Watanabe, A. Tanaka, Y. Hosoda 220

Hematology/Oncology

Diffuse infantile haemangiomatosis: clinicopathological features and management problems in five fatal cases

R.W. Byard, P. E. Burrows, T. Izakawa, M. M. Silver 224

Mega-dose intravenous methylprednisone for the treatment of onyalai: a case report S.Özsovlu. G.Ertürk 228

Immunology/Allergology

Lmyhocyte subsets in whole blood and isolated mononuclear leucocytes of healthy infants and children N. Remy, M. Oberreit, G. Thoenes, U. Wahn 230

IgG2 deficiency in children with human immunodeficiency virus infection P. Bartmann, I. Grosch-Wörner, V. Wahn, B. H. Belohradsky 234

Effects of short-term administration of human chorionic gonadotropin on immune functions in cryptorchid children

M. Maghnie, A. Valtorta, A. Moretta, D. Larizza, M. A. Girani, F. Severi 238

Severe pulmonary vascular occlusive disease following bone marrow transplantation in Omenn syndrome C. Brückmann, W. Lindner, R. Roos, W. Permanetter, R. J. Haas, S. G. Haworth, B. H. Belohradsky 242

Medical genetics

New observations on midline defects: Coincidence of anophthalmos, microphthalmos and cryptophthalmos with hypothalamic disorders J.R. Bierich, M. Christie, J.J. Heinrich, A.S. Martinez 246

The Floating-Harbor syndrome F. Majewski, H.-G. Lenard 250

Cystic fibrosis and Helicobacter pylori gastritis, megaloblastic anaemia, subnormal mentality and minor anomalies in two siblings: a new syndrome?

M. M. Lubani, Q. A. Al-Saleh, A. S. Teebi, A. Moosa, M. H. Kalaoui **253**

Prenatal deletion detection in a sporadic case of Duchenne muscular dystrophy without genotype information from the affected individual

F. Peinemann, M. Wagner, U. Franke, M. Kulle, J. Reiss **256**

Metabolic diseases

Renal tubular dysfunction in methylmalonic acidaemia C.T. D'Angio, M.J. Dillon, J.V. Leonard 250

Cystic fibrosis presenting with recurrent vomiting and metabolic alkalosis

P. M. Mathew, J. A. Hamdan, H. Nazer

Neonatology

Breast mild jaundice: natural history, familial incidence and late neurodevelopmental outcome of the infant

E. Grunebaum, J. Amir, P. Merlob, M. Mimouni, I. Varsano **267**

First day serum creatine kinase BB isoenzyme in high-risk infants R.A. Primhak, E. Simmonds 271

Clinical usefulness of high intensity green light phototherapy in the treatment of neonatal jaundice M. Amato, D. Inaebnit 274

Early onset neonatal sepsis with Campylobacter jejuni: a case report R. Krishnaswamy, P. Sasidharan, A. Rejjal, Y. Abu Osba 277

Nephrology

Haemolytic uraemic syndrome in the defined population of Northeast of Scotland

I. A. Abu-Arafeh, P. J. Smail, G. G. Youngson, I. A. Auchterlonie **279**

Neuropediatrics

Brain abscess in childhood – long-term experiences C. Aebi, F. Kaufmann, U. B. Schaad 282

Low arylsulphatase A activity and choreoathetotic syndrome in three siblings: differentiation of pseudodeficiency from metachromatic leukodystrophy

J. Kappler, R.W. E. Watts, E. Conzelmann, D. A. Gibbs, P. Propping, V. Gieselmann 287

Letter to the editors

The first prenatal diagnosis of dihydropyrimidine dehydrogenase deficiency

C.Jakobs, F. Stellaard, L. M. E. Smit, J. M. G. van Vugt, M. Duran, R. Berger, P. Rovers **291**

Abstracts

27th Workshop for Pediatric Research held at the Kinderklinik of the Georg-August-University Göttingen, 28 February-1 March 1991 292

Indexed in Current Contents



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Volume 149 (12 issues) will appear in 1990. Information about obtaining back volumes and microform editions available upon request.

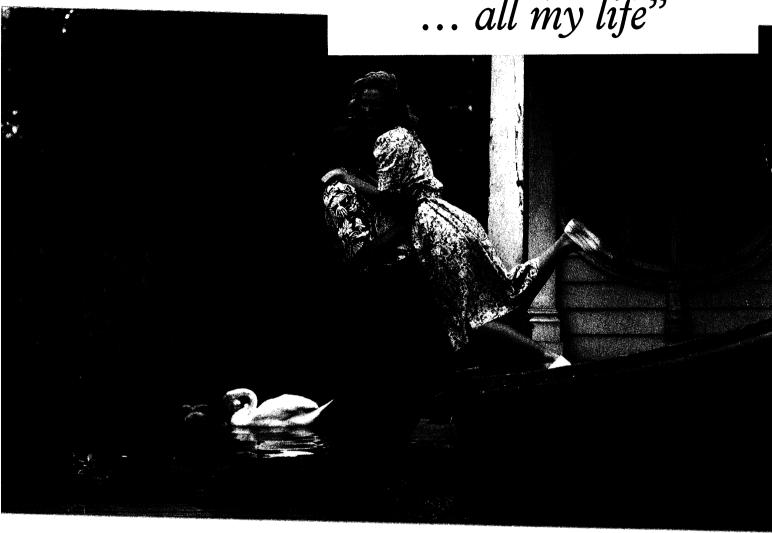
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