

# 25000 lipase units

# in just one capsule

This high lipase formulation of Creon should allow Cystic Fibrosis patients to substantially reduce their daily capsule intake and achieve better compliance.

*New*  
**creon**<sup>®</sup>  
pancreatin  
25000



## HIGHER DOSE, FEWER CAPSULES, HAPPIER PATIENTS

### Prescribing Information

**Presentation:** Opaque orange yellow hard gelatin capsules containing brownish coloured enteric coated pellets of pancreatin, equivalent to:

25,000 BP units of lipase

18,000 BP units of amylase

467 BP units of protease

Available in packs of 50. Basic NHS price £19.50

**Indication:** Pancreatic exocrine insufficiency.

**Dosage and Administration:** Adults (including elderly) and children: Initially one capsule 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-uricaemia and hyper-uricaemia have been reported with very high doses of pancreatin.

Overdosage although not experienced until now, could precipitate meconium ileus equivalent. Perianal irritation, and rarely, inflammation, could occur when large doses are used.

**Product Licence Number:** 5727 0006

**Name and Address of Licence Holder**

Kali Chemie Pharma GmbH, Hans-Böckler-Allee 20, 3000, Hannover 1, Germany.

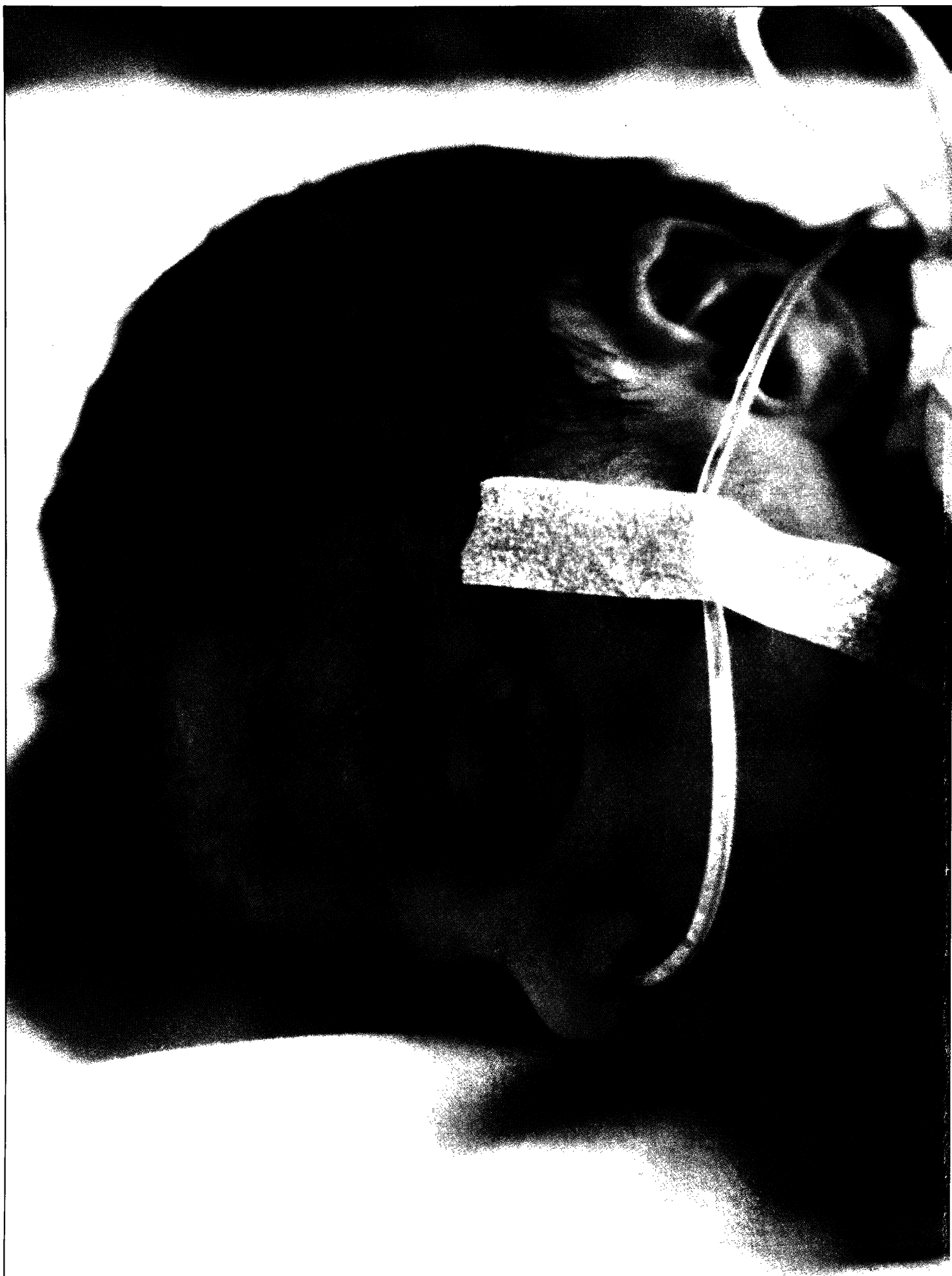
Further information is available from: Duphar Laboratories Limited, Gaters Hill, West End,

Southampton SO3 3JD. Tel: (0703) 472281

® Registered Trade Mark

**duphar**

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## *In sickness & in health*

Breastmilk is the best milk for babies so we fully advocate breastfeeding as the first choice. It provides a healthy balance of essential nutrients and natural protective properties. So we recommend breastmilk for babies in good health.

And for babies with special needs we can provide a first rate alternative to breastmilk, for example Low Birth Weight Formula or a special dietary formula such as Nutrilon Soya (previously Formula 'S'), for milk intolerant infants.

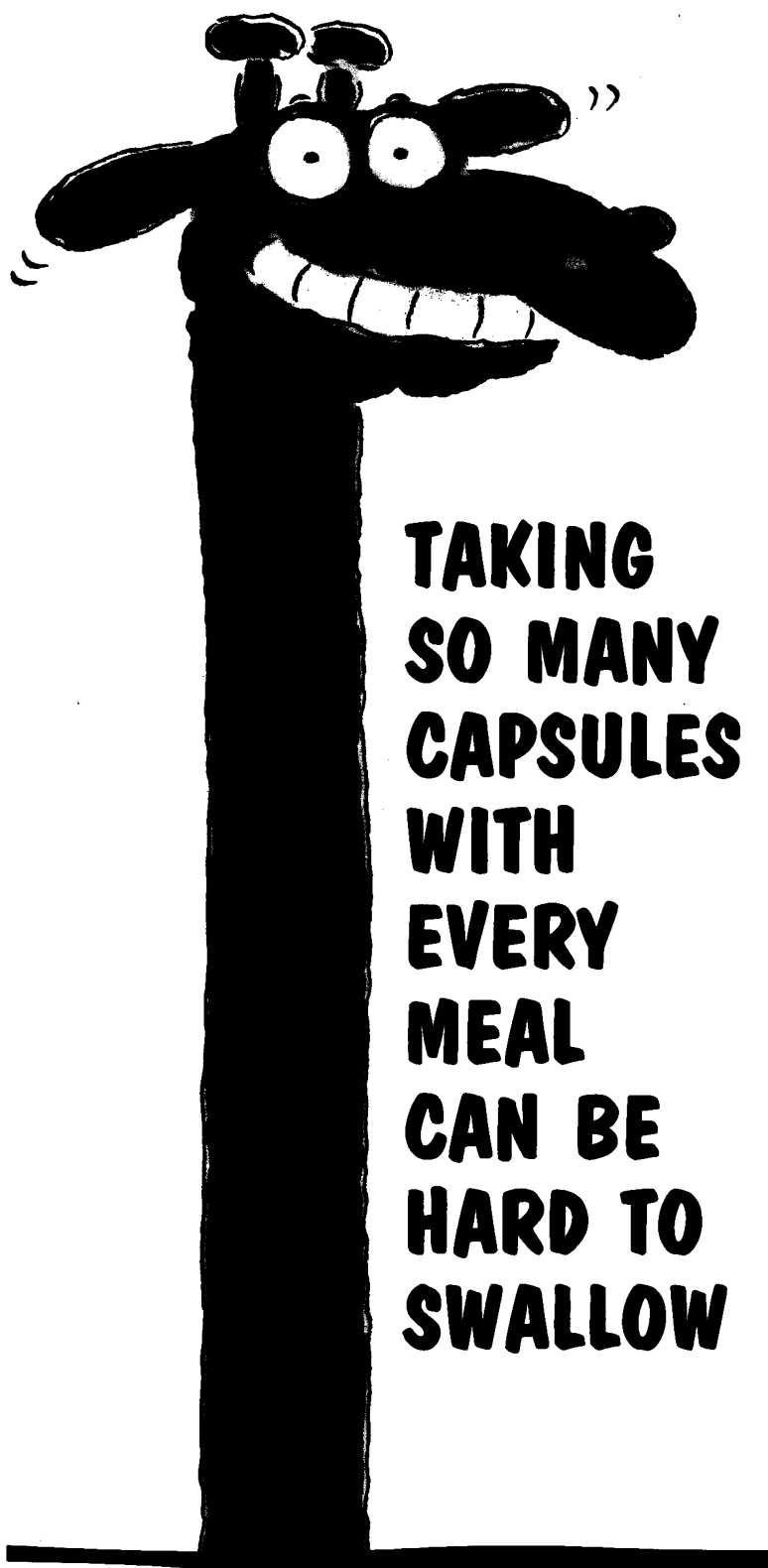
Cow & Gate have the widest range of infant feeds available today so you can rely on us to take care of their needs.



**The Babyfeeding Specialists**

**Breastmilk is the best food for babies. The purpose of infant milk formula is to replace or supplement breastmilk when a mother cannot, or chooses not to, breastfeed. The cost of infant milk formula should be considered before deciding how to feed a baby.**

**This advertisement has been prepared for the information of the Health Care Professional only.**



**NEW**  
**PANCREASE\*HL**  
(Pancreatin BP)  
**SO LITTLE TO TAKE**

Further information is available from Cilag Ltd., Saunderton, High Wycombe, Bucks HP14 4HJ

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## BRITISH PAEDIATRIC ASSOCIATION

### DONALD PATERSON PRIZE

The British Paediatric Association invites medical practitioners registered in the United Kingdom working in pre-consultant grades in the United Kingdom and who are under thirty-five years of age on 30 November 1992 to compete for this prize. It will be awarded to the author of the best article on any subject related to paediatrics which has either been published, or accepted for publication, within two years of the closing date. The article will be judged with respect to scientific content, clinical contribution and presentation. The prize may be awarded jointly.

Applicants should send three reprints or copies of the paper directly to the British Paediatric Association, 5 St Andrew's Place, Regents Park, London NW1 4LB and should include details of name, address, date of birth, medical school and date of qualification, date of registration in the United Kingdom and, in the case of joint authorship, an assessment of the contribution of the various authors both to the study itself and to the writing of the paper. The latest date for receiving applications is 30 November 1992.

The winner will receive a cash sum of £200 and an invitation to attend the British Paediatric Association's Annual Meeting, to be held 20-23 April 1993 at the University of Warwick. Subsistence costs for the meeting will be paid by the British Paediatric Association, and travel expenses met from a bequest to the Association by Dr Wilfrid Payne.

# EVOLUTION

25  
50  
100



New presentation Epanutin 300mg is the latest addition to the only branded range of phenytoin.

Epanutin 300mg demonstrates equal bioavailability with 3x100mg capsules.<sup>1</sup>

## Epanutin\* 300

**PHENYTOIN B.P.**

### QUALITY CONTROL OF EPILEPSY

**Prescribing Information Presentation:** Epanutin Capsules, 25mg, 50mg, 100mg or 300mg phenytoin sodium Ph Eur. Epanutin Suspension 30mg/5ml phenytoin BP. Epanutin Infatabs, 50mg phenytoin BP. **Indications:** Grand mal epilepsy, temporal lobe seizures and certain other convulsive states. **Dosage:** Usual maintenance dosages: Infants and children: 4-8mg/kg, up to a maximum of 300mg daily. Adults: 200-500mg daily in single or divided doses. Exceptionally, a daily dose outside this range may be indicated. Dosage recommendations are only guidelines and should be titrated for individual patients. Chew Infatabs. Titrate dosage gradually. Plasma level monitoring is advisable. Equal doses of Infatabs and capsules may not give equivalent blood levels. **Contra-indications and precautions:** Hypersensitivity to hydantoins. Use in pregnancy and lactation. Liver dysfunction. Replacement of or with other anticonvulsant therapy should be gradual. Plasma levels may be altered by other drugs - see literature. **Side-effects:** Transient GI and CNS disturbances subsiding with continued use. Allergic phenomena (e.g. rash, lupus erythematosus, hepatitis, lymphadenopathy) may occur. Haematological disorders, gingival hypertrophy, hirsutism and excessive motor activity have been reported. Nystagmus

with diplopia and ataxia indicates that dosage should be reduced. **Legal category:** POM. **Product Licence Numbers:** Capsules, 25, 50, 100mg/18/0112, 18/5079, 18/5080, 300mg, 18/0158. Suspension 18/5106. Infatabs 18/0069. **Basic NHS cost:** Capsules, 25mg 500 £9.82; 50mg 500 £10.02; 100mg 500 £12.77; 1000 £24.15; 300mg 100 £7.66; Infatabs 100 £5.49. Suspension 500ml £3.56. Further information is available from Parke-Davis Research Laboratories, Lambert Court, Chestnut Avenue, Eastleigh, Hampshire SO5 3ZQ. Telephone: (0703) 620500.

**References:**

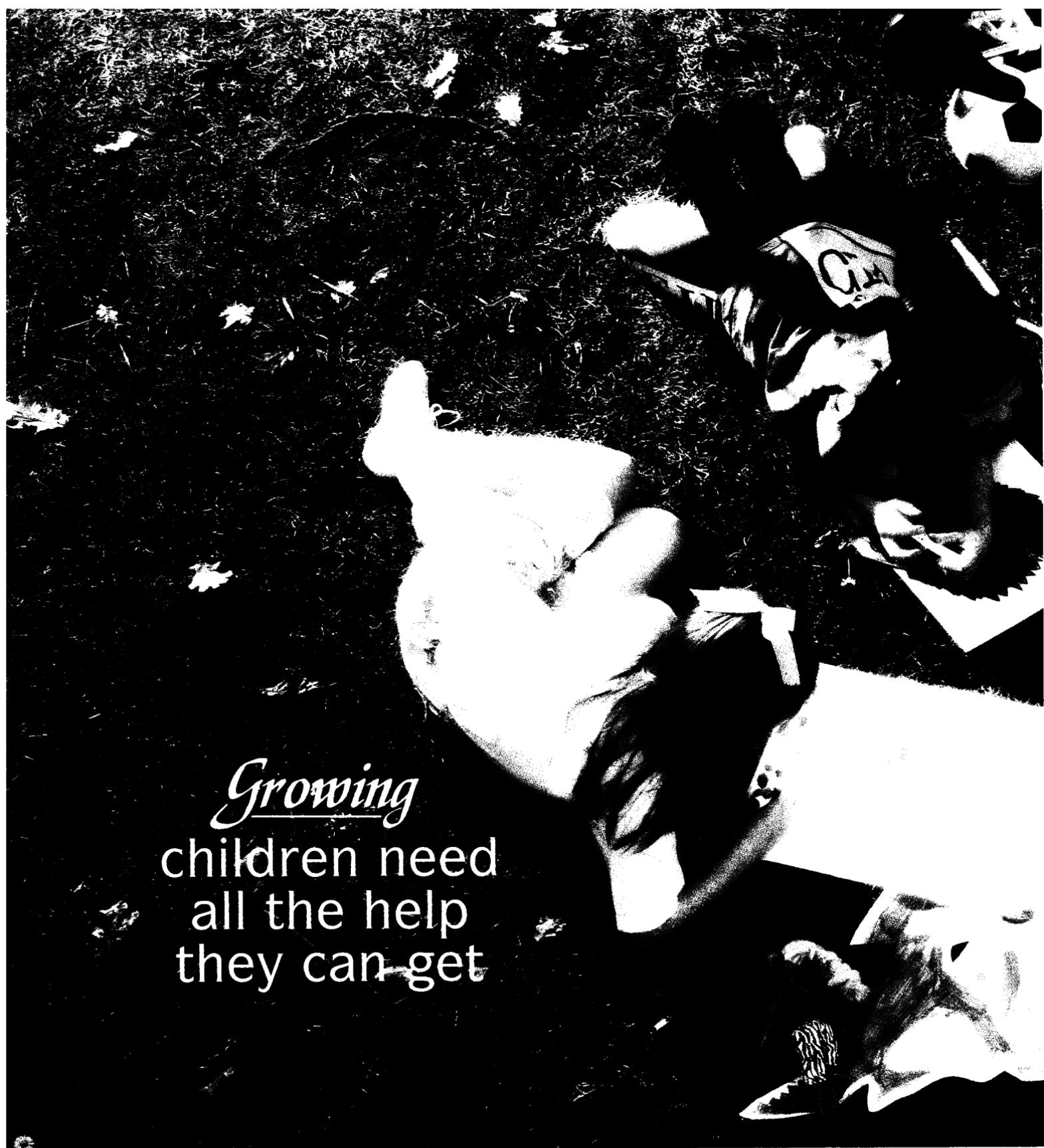
1. Data on file, Parke-Davis Research Laboratories.

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A118-UK-Mar92

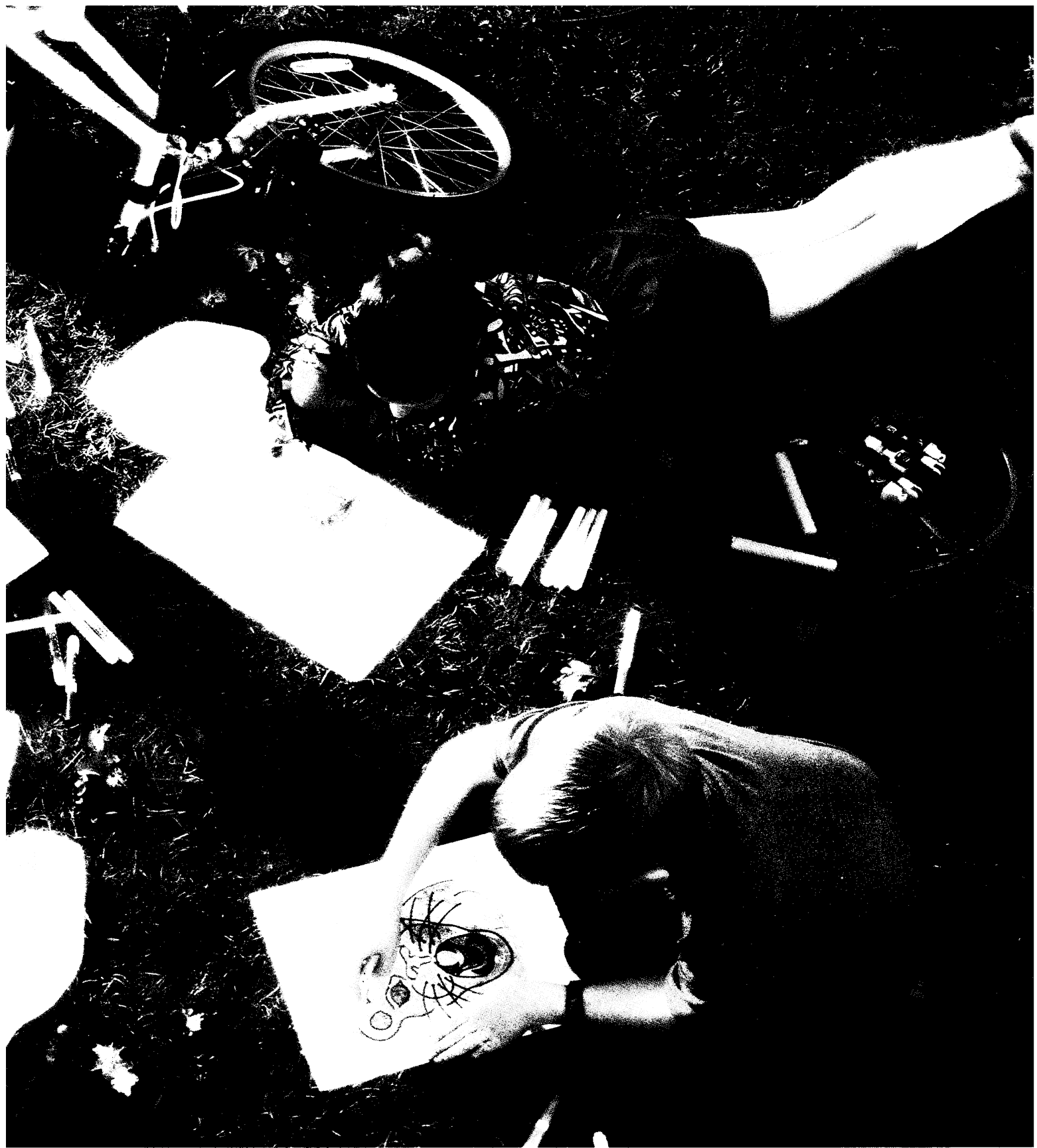


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children need  
all the help  
they can get

Children with growth failure need the best care you can provide. And sometimes more.

The Lilly Growth Initiative is a new support programme aimed at everyone involved in the management of growth failure. The programme looks beyond the role of growth hormone therapy, to help create the right environment for growth.

It involves communicating with children at their own level, providing advice and reassurance in terms they can easily relate to. Helping parents to understand and deal with the challenges their children face. Offering practical assistance and material support to Growth Centres. Helping clinicians through educational support, growth data management, and information services.



Discover how the Lilly Growth Initiative can help you succeed in the management of growth failure. Write to: The Lilly Growth Initiative, Eli Lilly & Company Ltd., Dextra Court, Chapel Hill, Basingstoke, Hampshire RG21 2SY

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*A growing involvement in child development.*



**Growth**

NEW



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New Vaminolact® is formulated to closely resemble the natural source of protein for premature and older infants — human milk protein. So it's only natural that it should contain the right balance of essential and non-essential amino acids, like low phenylalanine and added taurine.

New sulphite-free Vaminolact® specifically for use in paediatric parenteral regimens — when all that matters are the little things.

**FIRST LINE AMINO ACIDS FOR NEONATES AND INFANTS**

  
**Kabi Pharmacia**

### ABBREVIATED PRESCRIBING INFORMATION

**PRESENTATION:** A solution for intravenous nutrition, specifically formulated for paediatric use.

L-Alanine	6.3g
L-Arginine	4.1g
L-Aspartic acid	4.1g
L-Cysteinylcystine	1.0g
L-Glutamic acid	7.1g
Glycine	2.1g
L-Histidine	2.1g
L-Isoleucine	3.1g
L-Leucine	7.0g
L-Lysine	5.6g
L-Methionine	1.3g
L-Phenylalanine	2.7g
L-Proline	5.6g
L-Serine	3.8g
Taurine	0.3g
L-Threonine	3.6g
L-Tryptophan	1.4g
L-Tyrosine	0.5g
L-Valine	3.6g
In each 1000ml	65.3g

**Osmolality:** 510mosmol per kg water.

**Nitrogen per litre:** 9.3g corresponding to 58g of protein.

**Energy content per litre:** 240kcal (1.0MJ).

**Indications:** Vaminolact should be used for the prophylaxis and therapeutic treatment of protein depletion in neonates and infants where sufficient enteral nutrition is impossible or impracticable.

#### DOSAGE AND ADMINISTRATION:

**Recommended dosage for infants:** the dosage should be increased gradually during the first week of administration to a final daily dose of up to 35ml Vaminolact per kg body weight given as a continuous infusion over 24 hours. The duration of infusion should be at least 8 hours.

**Recommended dosage for children:** The dosage should be increased gradually during the first week of administration to the final dosage ranges indicated below and should be infused over 24 hours.

Weight (kg)	Dosage* (ml per kg bodyweight per 24 hours)
10	24.0
20	18.5
30	16.0
40	14.5

\*The duration of infusion should be at least 8 hours.

**Caution:** The recommended infusion rate should not be exceeded.

#### Contra-indications, warnings etc.

Vaminolact is contra-indicated in patients with irreversible liver damage and in severe uraemia when dialysis facilities are not available. Care must be exercised in the administration of large volume infusion fluids to patients with cardiac insufficiency. Amino acid infusions must also be administered with caution to patients with disturbances in protein metabolism.

**Precautions:** Hyperkalaemia, hypernatraemia, and acidosis should be corrected prior to commencement of intravenous nutrition. Serum electrolytes, blood glucose levels and acid-base balance should be regularly monitored. Fluid balance should also be monitored since hypertonic dehydration may occur. Amino acid solutions may precipitate acute folate deficiency and folic acid should be given daily.

**Side-effects:** Vaminolact is well tolerated. Rarely, nausea may occur. As with all hypertonic solutions, thrombophlebitis may occur when peripheral veins are used. Abnormal liver function tests have been observed during intravenous nutrition.

**Legal category:** POM.

**Package quantities:** Bottles of 100ml and 500ml.

**Further information:** The manufacturer can be consulted for full information on complete and balanced intravenous nutrition regimens.

**Product Licence number:** 0022/0092.

**Product authorisation numbers:** 100ml 187/35/1. 500ml 187/35/2.

**Product Licence/Authorisation holder:**

Kabi Pharmacia Limited, Davy Avenue, Knowlhill, Milton Keynes, MK5 8PH. Distributed by Cahill May Roberts Limited for Kabi Pharmacia (Ireland), Pharmapark, Chapelizod, Dublin 20.  
**Cost:** Vaminolact 100ml £3.80. Vaminolact 500ml £8.70.



# A world of difference

More and more patients with uncontrolled epilepsy are able to face the world thanks to the efficacy of SABRIL.

Many have become seizure free for the first time and approximately half can benefit from a > 50% reduction in their seizures.<sup>1</sup>

**SABRIL<sup>®</sup>**  
VIGABATRIN



**Controlling seizures, changing lives**

Abridged prescribing Information and reference appear on the following page

#### Abridged Prescribing Information

##### SABRIL Tablets

**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:** The recommended starting dose in children is 40mg/kg/day increasing to 80-100mg/kg/day depending on response. Convenient recommendations in relation to bodyweight are:

Bodyweight:	10-15kg	0.5 to 1g/day
	15-30kg	1.0-1.5g/day
	30-50kg	1.5-3g/day
	>50kg	2-4g/day

Infants with West syndrome may require doses of 100mg/kg/day or higher.

**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 intramyelinated 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

**MMS 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.

#### Reference:

1. Mumford JP. Br J Clin Pract 1988; 42 (Suppl 61): 7-9



MARION MERRELL DOW LTD.



Trademarks: Marion, Merrell, Dow, Sabril. SAB/AD/0492

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# While you're trying to make it better, make it bearable.



Cancer patients have enough to cope with without the nausea and vomiting caused by therapy. Zofran, the 5-HT<sub>3</sub> receptor antagonist from Glaxo, allows you to control emesis without adding to the problem of unpleasant side effects.

Zofran is available in both oral and i.v. presentations, and provides effective monotherapy in all treatment-induced nausea and vomiting, from radiotherapy to cisplatin chemotherapy.<sup>1,2,3</sup>

Yet, there is no evidence of extra-pyramidal reactions,<sup>2,3,4</sup> little risk of unwanted sedation<sup>3,4</sup> and no reported drug interactions.<sup>4</sup>

At a time when patients need all the help they can get, Zofran will help make the treatment easier to bear.

# Zofran<sup>®</sup>

ondansetron

**Prescribing Information:** **Uses:** Nausea and vomiting due to chemotherapy or radiotherapy, and postoperative nausea and vomiting. **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/m<sup>2</sup> 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. *Postoperative nausea and vomiting:* For prevention in adults: Either a single dose of 4mg i.v. as slow injection at induction, or 8mg orally 1 hour prior to anaesthesia followed by two further 8mg doses at eight-hourly intervals. For treatment in adults: A single dose of 4mg i.v. as a slow injection. There is no experience in postoperative nausea and vomiting in children and limited experience in the elderly. The role of ondansetron in opiate-induced emesis is not yet established. **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 ondansetron

in 2ml aqueous solution or 8mg ondansetron in 4ml aqueous solution (Product licence number 0004/0375, 4mg x 5 ampoules £52.50; 8mg x 5 ampoules £75). Zofran 4mg Tablets each containing 4mg ondansetron (Product licence number 0004/0376, 4mg x 30 tablets £187.50), Zofran 8mg Tablets each containing 8mg ondansetron (Product licence number 0004/0377, 8mg x 10 tablets £90). **Product licence holder:** Glaxo Operations UK Limited, Greenford, Middlesex UB8 0HE. Zofran is a Glaxo trade mark. Further information is available on request from: Glaxo Laboratories Limited, Stockley Park West, Uxbridge, Middlesex UB11 1BT. Tel: 081-990 9444.

**References:**  
1. Priestman TJ. *Eur J Cancer Clin Oncol* 1989; 25(Suppl. 1): S29-S33. 2. Schmoll H-J. *Eur J Cancer Clin Oncol* 1989; 25(Suppl. 1): S35-S39. 3. Marty M. *Eur J Cancer Clin Oncol* 1989; 25(Suppl. 1): S41-S45. 4. Smith RN. *Eur J Cancer Clin Oncol* 1989; 25(Suppl. 1): S47-S50.



## THE UNIVERSITY OF AUCKLAND

New Zealand

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The Chair carries with it the Headship of the Department for an initial period of five years, further tenure of the headship normally being reviewed at the end of that time. The Professor of Paediatrics will be responsible for all aspects of the promotion and leadership of academic Paediatrics, including clinical Paediatrics, research and teaching at all levels. A maximum of 5/10ths clinical service with a component/components of the Northern Regional Health Authority under the terms of a joint agreement with the University may be negotiated.

Applicants must hold a medical qualification registrable in New Zealand and a recognised postgraduate qualification in Paediatrics, and have a strong research record in that field.

Commencing salary will be established within the range NZ\$102,960—NZ\$112,840 per annum.

Further information, Conditions of Appointment and Method of Application are available from Appointments (40902), Association of Commonwealth Universities, 36 Gordon Square, London WC1H 0PF; or from the Assistant Registrar (Academic Appointments), University of Auckland, Private Bag 92019, Auckland, New Zealand (tel. (64 9) 373 7999; fax (64 9) 373 7454). Three copies of applications should be forwarded to reach the Registrar, University of Auckland by 16 October 1992.

Please quote *Vacancy Number UAC.202* in all correspondence

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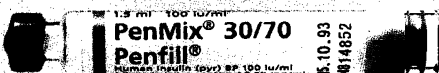
## NovoPen® II

Already a design award winner,<sup>1</sup> NovoPen II has recently received even more attention to detail. The latest model incorporates an easy grip on the dosage dial and a smoother action on the locking ring - a safety feature unique to NovoPen II. The stylish new appearance completes the latest design improvements making NovoPen II even better than before.

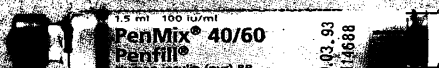
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The first premixed insulin in a Penfill was PenMix 30/70 Penfill, in a ratio well suited to the majority of diabetics using premixed insulins.



The introduction of four additional mixtures makes PenMix® Penfill® the widest range of premixed insulins available in cartridges, and means that even more diabetics could be using NovoPen II.



## New NovoFine® needles

The new NovoFine needles for NovoPen II are very fine 28-gauge needles for a virtually painless injection.<sup>2</sup>

**NovoPEN® II**  
FOR MIXTURES TOO

NOVO NORDISK A/S  
Copenhagen, Denmark

Further information is available from:  
**NOVO NORDISK PHARMACEUTICALS LTD**  
Novo Nordisk House, Broadfield Park,  
Brighton Road, Pease Pottage, Crawley,  
West Sussex RH11 9RT.  
Telephone: (0293) 613555.

Free supplies of NovoPen available on request.  
Dial 100 and ask for Freephone Novo Nordisk insulin.

**Abstracted Pharmacia Information:** Penfill® 10/90 Penfill® 20/80 Penfill® 40/60 Penfill® 50/50 Penfill® 30/70 Penfill® 100/0 Human Insulin (pyr) Injection. The purpose of insulin therapy is to control blood glucose levels. The degree of control is determined by the patient's sensitivity to insulin. This is influenced by many factors, including diet, exercise, and stress. The NovoPen II is a new design of insulin pen. It is designed to be used by patients with diabetes. The NovoPen II is a new design of insulin pen. It is designed to be used by patients with diabetes. The NovoPen II is a new design of insulin pen. It is designed to be used by patients with diabetes.

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