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THE BRITISH LUNG FOUNDATION



ALLEN & HANBURYS

invites applicants for the post of

British Lung Foundation/Allen and Hanburys RESEARCH FELLOWSHIP IN COPD

Further to a decision by Allen & Hanburys to extend their commitment to the British Lung Foundation, an award of up to £120,000 will be made to support a fellowship to undertake research into COPD. The award is expected to cover the salary and a contribution for expenses for three years.

Applicants should be resident in the UK, have an established record in medical research, have a suitable unit in which to undertake the work and identify a team leader.

Closing date for applications – 29th January 1997

Application forms are available from
The Research Grants Administrator
British Lung Foundation
78 Hatton Garden, London EC1N 8JR
Tel: 0171 831 5831

Please quote reference COPD/THX/96

The British Lung Foundation is the only charity raising funds throughout the UK for research into the prevention, diagnosis and treatment of all lung diseases. Registered charity no. 326730.

Salamol Easi-Breathe™ Inhaler

Salbutamol BP Inhaler

(Please refer to full data sheet before prescribing)

Presentation Metered-Dose Aerosol supplied in a Breath-Operated Inhaler containing 200 doses. Salamol Easi-Breathe Inhaler delivers 100mcg of Salbutamol BP per actuation.

Uses Provides automatic actuation of inhaler with inspiration. For the treatment and prophylaxis of bronchial asthma.

Dosage and Administration Use as required. **Adults** (i) Acute bronchospasm and intermittent episodes of asthma, including relief of symptoms – one or two inhalations as a single dose. (ii) Chronic maintenance or prophylactic therapy – two inhalations three or four times daily. (iii) To prevent exercise induced bronchospasm – two inhalations should be taken before exertion. **Children** (i) Acute bronchospasm and episodic asthma, including relief of symptoms, or before exercise – one inhalation. (ii) Routine maintenance or prophylactic therapy – one inhalation three or four times daily. The doses in children may be increased to two inhalations. Children should be supervised. Allow 4 hours between each dose. No more than 4 doses in any 24 hours.

Contra-indications Managing premature labour or threatened abortion. Hypersensitivity to any of the components.

Warnings Potentially serious hypokalaemia may result from beta₂-agonist therapy and may be potentiated by concomitant drugs or hypoxia – serum potassium levels should be monitored in this situation. Propranolol and other non-cardioselective beta-adrenoceptor blocking agents antagonise the effect of salbutamol.

Precautions Cautious use in patients with hyperthyroidism, who are hypersusceptible or who are suffering from diabetes mellitus, serious cardiovascular disorders or hypertension. Alternative or additional therapy including corticosteroids should be instituted promptly in asthmatic patients whose condition deteriorates despite salbutamol therapy. Adverse metabolic effects of high doses of salbutamol may be exacerbated by concomitant administration of high doses of corticosteroids.

Side Effects Potentially serious hypokalaemia (see Warnings). Salbutamol may cause fine tremor of skeletal muscle, palpitations, muscle cramps, slight tachycardia, tenseness, headaches and peripheral vasodilatation. Reports of hyperactivity in children or hypersensitivity reactions are rare.

Pregnancy/Lactation Use inhalers only if the potential benefit outweighs the risk.

Product Licence Number and Basic NHS Cost

PL 0530/0399 £6.30

Legal Category POM

Further Information is available on request from: Baker Norton, Gemini House, Flex Meadow, Harlow, Essex CM19 5TJ

Beclazone Easi-Breathe™ Inhaler

Beclomethasone Dipropionate BP Inhaler

(Please refer to full data sheet before prescribing)

Presentation Metered-Dose Aerosol supplied in a Breath-Operated Inhaler containing 200 doses. **Beclazone 50 Easi-Breathe, Beclazone 100 Easi-Breathe and Beclazone 250 Easi-Breathe Inhalers** deliver 50, 100 and 250 microgram Beclomethasone Dipropionate BP per actuation of the valve.

Uses Provides automatic actuation of inhaler with inspiration. For the management of bronchial asthma especially in patients inadequately controlled by bronchodilators and sodium cromoglycate.

Dosage and Administration Use regularly. **Adults, Beclazone 50 and 100 Easi-Breathe Inhalers;** 100 microgram three or four times daily. **Beclazone 250 Easi-Breathe Inhaler,** 500 microgram twice a day or 250 microgram four times a day.

Elderly, no dose adjustment necessary, including patients with renal or hepatic impairment. **Children, Beclazone 50 and 100 Easi-Breathe Inhalers;** 50 to 100 microgram two to four times daily, **Beclazone 250 Easi-Breathe Inhaler** is not indicated for use in children.

Contra-indications Hypersensitivity to the ingredients.

Precautions Patients should be instructed in the correct use of inhalers. May induce systemic cortico-steroid effects (with reduction in plasma cortisol levels) and adrenal suppression (above 2000 microgram daily) – monitor adrenal function and provide systemic steroids in appropriate cases of stress. Caution in patients with history of, or active pulmonary tuberculosis. Avoid sudden cessation of treatment.

Pregnancy/Lactation Use inhalers only if the potential benefit outweighs the risk.

Side Effects Paradoxical bronchospasm – discontinue use immediately and seek medical advice. Candidiasis, hoarseness or throat irritation – relieve by rinsing throat with water.

Product Licence Numbers and Basic NHS Cost

Beclazone 50 Easi-Breathe Inhaler – PL 0530/0451 £4.34

Beclazone 100 Easi-Breathe Inhaler – PL 0530/0452 £8.24

Beclazone 250 Easi-Breathe Inhaler – PL 0530/0453 £18.02

Legal Category POM

Further Information is available on request from: Baker Norton, Gemini House, Flex Meadow, Harlow, Essex CM19 5TJ

Date of Issue January 1996

Date of Preparation June 1996

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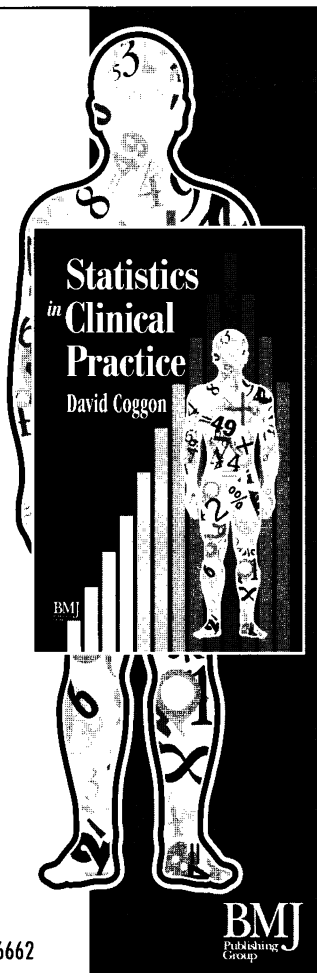
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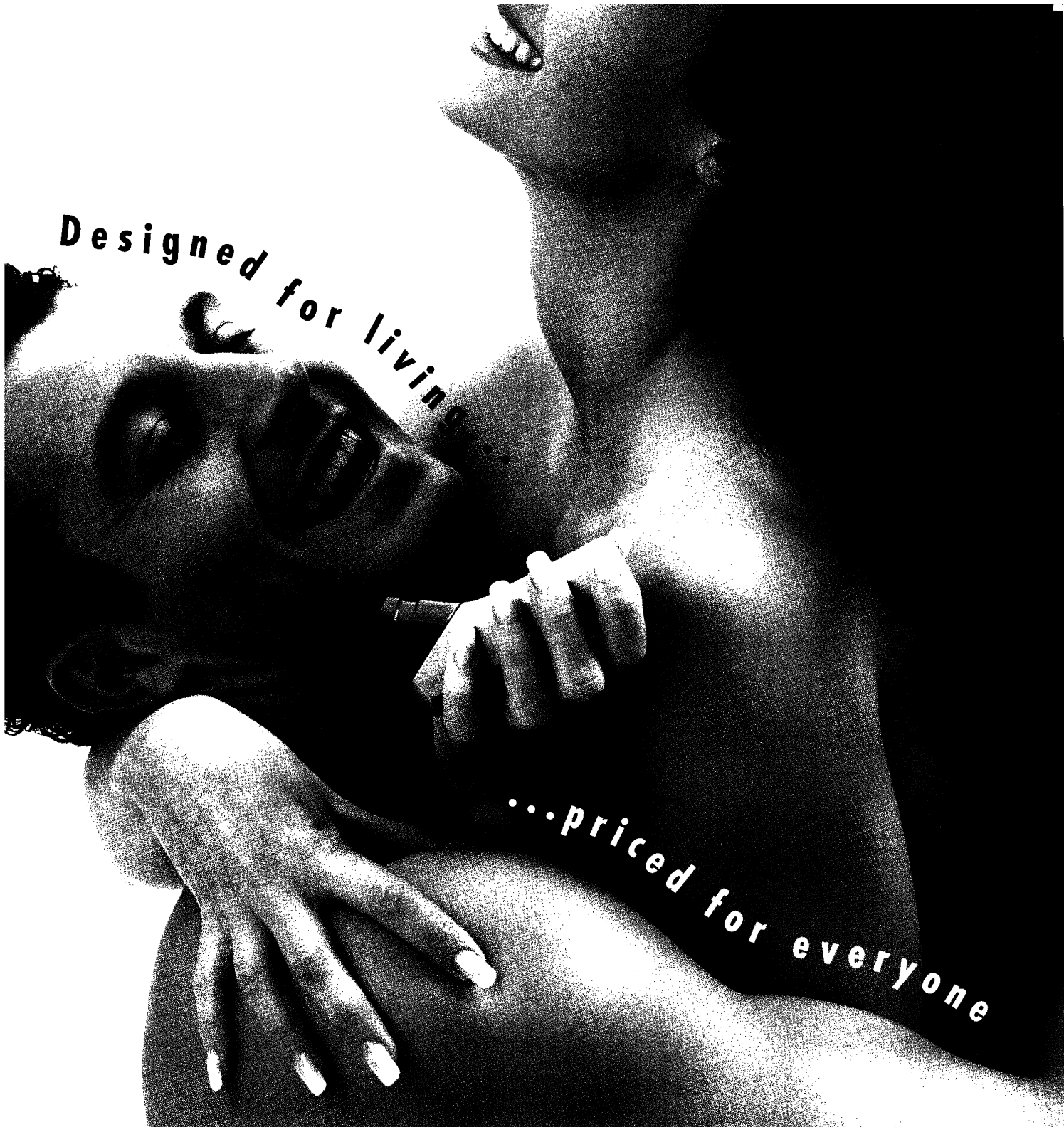
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The Easi-Breathe breath-operated inhalers are designed to help save lives. Perhaps it doesn't matter that many asthma patients can't use their salbutamol inhaler properly¹ – instead they may take more doses until they feel an effect – but with a preventative, such as beclomethasone, the results could be serious.

Easi-Breathe inhalers offer both these therapies in breath-operated inhalers that breathe new life into asthma treatment. Literally, all you do is **open...breathe...and close**. There's no need to coordinate release, and the low inspiratory effort makes Easi-Breathe suitable for a wide range of patients^{2,3,4}.

Of course, you'd give all your asthma patients an inhaler with added benefits if cost wasn't an issue. Well, now it isn't. Beclazone Easi-Breathe inhalers actually cost up to 22% less than standard press-and-breathe inhalers, and Salamol Easi-Breathe is also competitively priced compared to other breath-operated inhalers – including dry powder devices⁵ – so there's no need for patients to use another inhaler for either of these treatments.

Easi-Breathe inhalers are convenient, economical, simple and effective. They're designed for living, and priced for everyone.

Easi-Breathe™

Beclazone Easi-Breathe™
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50, 100 & 250 microgram inhalers

Salamol Easi-Breathe™
Salbutamol BP
100 microgram inhaler



References: 1. Am. J. Respir. Crit. Care Med., **150**: 256-61, 1994[3]; 2. Data on file, Norton Healthcare Ltd; 3. Practitioner, **223**: 265-7, 1989; 4. Eur. Resp. J., **4**: 172-4, 1991; 5. MIMS, June 1996

A GOOD FRIEND IN CHILDHOOD ASTHMA



In a recent one-year study designed to compare accurately measured growth in 122 asthmatic children, aged 4 to 10 years, taking either Flixotide 50 micrograms b.d. or sodium cromoglycate 20 milligrams q.d.s., there was no evidence of growth deceleration in either group!¹ Flixotide has also been shown to produce a significantly greater improvement in lung function than sodium cromoglycate^{1,2}

FLIXOTIDE

fluticasone propionate

AN INHALED STEROID TO GROW UP WITH

Flixotide Accuhaler, Diskhaler and Inhaler (fluticasone propionate) Abridged Prescribing Information (Please refer to the full data sheet before prescribing) Uses Topically active corticosteroid for prophylactic management of asthma. Dosage and administration For inhalation only. Use regularly. Onset of therapeutic effect usually occurs in 4 to 7 days. Adults: 100 to 1,000 micrograms twice daily. Children aged 4 and over: 50 to 100 micrograms twice daily. Equivalent disease control usually obtained at half the daily dose of other currently available inhaled steroids. Contraindications Hypersensitivity. Precautions Special care in active or quiescent pulmonary tuberculosis. Severe or unstable asthma: Warn patients to seek medical advice if short-acting inhaled bronchodilator use increases or becomes less effective. Consider using oral steroids and/or maximum doses of inhaled corticosteroids. Treat severe exacerbations in the normal way. Acute symptoms: Not for relief of acute symptoms. A short-acting inhaled bronchodilator is required. Systemic effects: Adrenal function and reserve usually remain within the normal range. Some systemic effects may occur in a small proportion of adults after long-term treatment at high doses. Some biochemical changes reported in children, but no stunting of growth observed. Transfer from oral steroids: Special care is needed. Monitor adrenal function. Do not stop Flixotide abruptly. Consider additional corticosteroid therapy in situations likely to produce stress. Pregnancy and lactation: Experience is limited. Balance risks against benefits. Side effects Candidiasis of mouth and throat. Hoarseness. Rarely, peripheral oedema and cutaneous hypersensitivity. Possibly, dyspepsia and arthralgia. Paradoxical bronchospasm: Substitute alternative therapy. Presentation and Basic NHS cost Flixotide Accuhaler: 60 inhalations. 50 micrograms - £8.23. 100 micrograms - £12.80. 250 micrograms - £24.23. 500 micrograms - £40.23. Flixotide Inhaler: 120 actuations. 25 micrograms - £6.86. 50 micrograms - £11.43. 125 micrograms - £22.86. 250 micrograms - £38.86. Flixotide Diskhaler: 14 four-place disks with Flixotide Diskhaler. 50 micrograms - £8.23. 100 micrograms - £12.80. 250 micrograms - £24.23. 500 micrograms - £40.23. Refill pack: 14 four-place disks. 50 micrograms - £7.66. 100 micrograms - £12.23. 250 micrograms - £23.66. 500 micrograms - £39.66. Diskhaler and Inhaler Hospital packs also available. Product licence numbers 10949/0226-0229, 10949/0001-0008. Product licence holder Allen & Hanburys, Stockley Park West, Uxbridge UB11 1BT.

POM

References 1. Price JF, Russell G, Hindmarsh P, Weller PH, Heaf DP. Am J Resp Crit Care Med 1996; 153 (4): A409. 2. Price JF, Weller PH. Resp Med 1995; 89: 363-368.



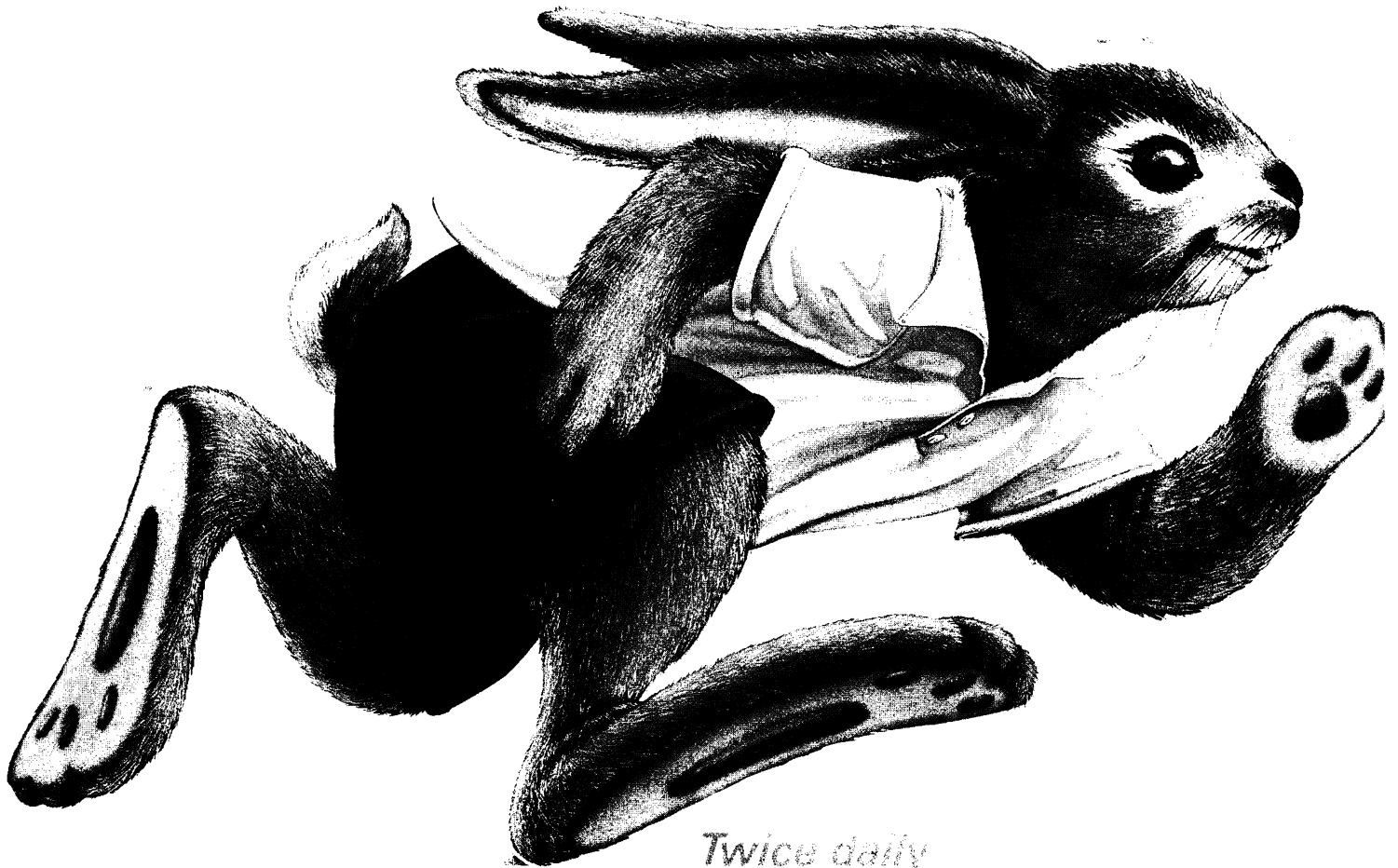
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June 1996

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Twice daily

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salmeterol xinafoate

FOR ACTIVE DAYS AND RESTFUL NIGHTS

Serevent (salmeterol xinafoate)

Abridged Prescribing Information

(Please refer to the full data sheet before prescribing)

Uses Treatment of asthma (including nocturnal and exercise-induced) in patients requiring long-term regular bronchodilator therapy. Patients should normally also be receiving regular and adequate doses of inhaled anti-inflammatory agents, or oral corticosteroids. **Dosage and administration** For inhalation only. *Adults and children 4 years and over:* 50 micrograms twice daily. *Adults only:* More severe cases 100 micrograms twice daily. *Children below 4 years:* Not recommended at present.

Contra-indication Hypersensitivity. **Precautions** *Steroid therapy:* Serevent is not a replacement for corticosteroids and/or, in children, sodium cromoglycate. Warn patients not to stop or reduce such therapy. *Severe or unstable asthma:* Bronchodilators should not be the only or main treatment. Consider using oral steroids and/or

maximum doses of inhaled corticosteroids. Warn patients to seek medical advice if short-acting bronchodilator use increases or becomes less effective. Treat severe exacerbations in the normal way. **Acute symptoms:** Serevent is not for relief of acute symptoms. A short-acting inhaled bronchodilator is required. **Thyrotoxicosis:** Use with caution. **Drug interactions:** Avoid beta-blockers. **Hypokalaemia:** May occur, particularly in acute severe asthma. It may be potentiated by xanthine derivatives, steroids, diuretics and hypoxia. Monitor serum potassium levels in these situations. **Pregnancy and lactation:** Experience is limited. Balance risks against benefits. **Side effects** Tremor, subjective palpitations and headaches have been reported, but are usually mild and transient. Skin reactions, muscle cramps, non-specific chest pain, local irritation and arthralgia have been reported. Potentially serious hypokalaemia may result from β_2 -agonist therapy. **Paradoxical bronchospasm:**

Substitute alternative therapy. **Presentation and Basic NHS cost** *Serevent Diskhaler:* Pack of 14 four-place disk foils, together with a Serevent Diskhaler. 50 micrograms – £29.97. *Serevent Diskhaler refill pack:* Pack of 14 four-place disk foils only – £29.40. *Serevent Inhaler:* 120 actuations per inhaler. 25 micrograms – £28.60. Hospital packs are also available. **Product licence numbers** 10949/0069, 10949/0068.

POM



ALLEN & HANBURY'S

Further information is available on request from:

Allen & Hanburys Limited


Uxbridge, Middlesex UB11 1BT

Diskhaler and Serevent are trade marks of the Glaxo Group of Companies

January 1994

When introducing Serevent in adults we strongly recommend that you do not stop or reduce the dose of corticosteroids. Similarly, in children, do not stop or reduce corticosteroids or sodium cromoglycate.

HELPING PEOPLE WITH CYSTIC FIBROSIS GET THINGS OFF THEIR CHEST



*P.aeruginosa**
*B.cepacia**
*S.aureus**
*H.influenzae**

A powerful ally in the fight against lung damage in cystic fibrosis

Eradication of the organism was not always established.

When facing the prospect of lung damage from chronic bacterial infection in your cystic fibrosis patients, you need to enlist the help of a powerful ally. 'Meronem' is a broad spectrum antibiotic which is active against the problem pathogens encountered in cystic fibrosis: *Pseudomonas aeruginosa*, *Burkholderia cepacia*, *Staphylococcus aureus* and *Haemophilus influenzae*.¹

'Meronem':

- produces high rates of satisfactory clinical response²
- effectively reduces bacterial load²
- improves lung function²
- is simple and convenient to use by IV bolus or infusion
- is well tolerated in adults and children^{2,3,4,5}

So join forces with 'Meronem' in the fight against lung damage in cystic fibrosis.

MERONEM[®] FOR INTRAVENOUS ADMINISTRATION

consult Data Sheet before prescribing.

Special Reporting to CSM Required

Uses Treatment of the following infections caused by bacteria sensitive to meropenem: Pneumonias and Nosocomial pneumonias, Urinary Tract Infections, Intra-abdominal Infections, Gynaecological Infections, Skin and Skin Structure Infections, Meningitis, Septicaemia, Empiric treatment for presumed infections in adults with febrile neutropenia. Patients with cystic fibrosis and chronic lower respiratory tract infections (eradication of organism not always established).

Presentation Vials containing 250mg, 500mg or 1g meropenem powder for reconstitution. Contains 90mg (3.9mmol) sodium per gram of meropenem. Infusion Kits containing either a 500mg or 1g vial with 100ml 0.9% w/v sodium chloride intravenous infusion.

Dosage and administration Establish depending on type and severity of infection and patient's condition. Recommended dosage: Adults (including elderly): 500mg IV every 8 hours for pneumonia, urinary tract infections, gynaecological infections, skin and skin structure infections. 1g IV every 8 hours for nosocomial pneumonias, peritonitis, presumed infections in neutropenic patients and septicaemia. Up to 2g every 8 hours in cystic fibrosis. 3g every 8 hours for meningitis.

Renal Impairment: Dosage should be reduced if creatinine clearance <51ml/min – see Summary of Product Characteristics. Children (3 months to 12 years): 10-20mg/kg every 8 hours depending on type, severity and susceptibility of infection. Children over 50kg use adult dosage. For children aged 4 to 3 years with cystic fibrosis, 5-40mg/kg every 8 hours. For meningitis, 40mg/kg every 8 hours. No experience in hepatic or renal impairment. Children under 3 months: Not recommended. **Administration:** 'Meronem' should be given as an IV bolus injection over approximately 5 minutes or by IV infusion over approximately 5 to 30 minutes.

Contra-indications, warnings, etc. Contra-indicated in patients with hypersensitivity to the product. Caution in patients with history of hypersensitivity to other carbapenems or other beta-lactam antibiotics. Monitor patients with hepatic disease. Monitor for regrowth of non-susceptible organisms. In patients who develop diarrhoea, consider diagnosis of pseudomembraneous colitis. Caution when using as monotherapy in critically ill patients with *Pseudomonas aeruginosa* lower respiratory tract infection. Regular sensitivity testing recommended in *Pseudomonas aeruginosa* infection. Not recommended for methicillin resistant staphylococcal infections. Co-administration with probenecid not recommended. Caution when co-administered with potentially nephrotoxic drugs. Do not use in pregnancy or lactation unless potential benefit outweighs potential risk.

Side Effects Inflammation, thrombophlebitis or pain at site of injection. Rash, pruritus, urticaria, abdominal pain, nausea, vomiting, diarrhoea, pseudomembraneous colitis. Reversible thrombocytopenia, eosinophilia, thrombocytopenia and neutropenia. Positive Coombs test, reduction in partial thromboplastin time. Increases in serum bilirubin, transaminases, alkaline phosphatase and lactic dehydrogenase. Headache, paraesthesia, oral and vaginal candidosis. Convulsions have been reported but a causal link with 'Meronem' has not been established.

Legal Category POM.

Product licence numbers and basic NHS cost 250mg:
12619/0097, 10 vials £100. 500mg: 12619/0098, 10 vials £150, single vial infusion kit £16. 1g: 12619/0099, 10 vials £300, single vial infusion kit £31.

'Meronem' is a trade mark, the property of ZENECA Limited. Further information is available from: ZENECA Pharma, Langley Court, Water Lane, Wilmslow, Cheshire SK9 5AZ.



References

- Edwards JR. J Antimicrob Chemother 1995; 36(Suppl A): 1-17.
Byrne S, Maddison J, Connor P *et al*. J Antimicrob Chemother 1995; 36(Suppl A): 135-143.
Knight RK, Pillai S. Excerpta Medica Int Cong Series 1993; 1034: 125-128.
Data on file, Zeneca.
Norrbay SR, Newell PA, Faulkner KL, Lesky W. J Antimicrob Chemother 1995; 36(Suppl A): 207-223.

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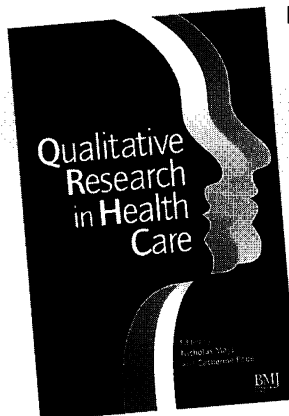
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Twice daily dosage for maintenance therapy

Starts to work within 1-3 minutes

Prescribing Information ▼[®]FORADIL eformoterol fumarate

Presentation 12 micrograms dry powder inhalation capsules for use with breath activated inhaler device. **Indications** Regular maintenance treatment of bronchospasm in patients with reversible obstructive airways disease. **Dosage** Adults including the elderly: 1-2 capsules twice daily. Not recommended for children. **Contra-indications** Hypersensitivity to eformoterol fumarate or lactose. **Precautions** Steroid treatment should continue unchanged. FORADIL is not for relief of acute symptoms – a short-acting β_2 -agonist is required. Thyrotoxicosis, severe cardiovascular disorders, dysrhythmia, hypokalaemia, diabetes mellitus. Pregnancy and

lactation. Avoid use with β -adrenergic blockers. **Side-effects** Occasionally: tremor, palpitations, headache. *Rarely*: muscle cramps, myalgia, tachycardia, agitation, dizziness, insomnia, paradoxical bronchospasm, oropharyngeal irritation. **Legal category** POM. **Packs** Dry powder capsules of 12 micrograms (PL0001/0192) together with an inhaler device, in calendar packs of 56 (basic NHS price £24.00). [®] denotes registered trademark. Full prescribing information is available on request from Geigy Pharmaceuticals, Horsham, West Sussex, RH12 4AB. Telephone (01403) 272827. **Date of preparation** February 1995.
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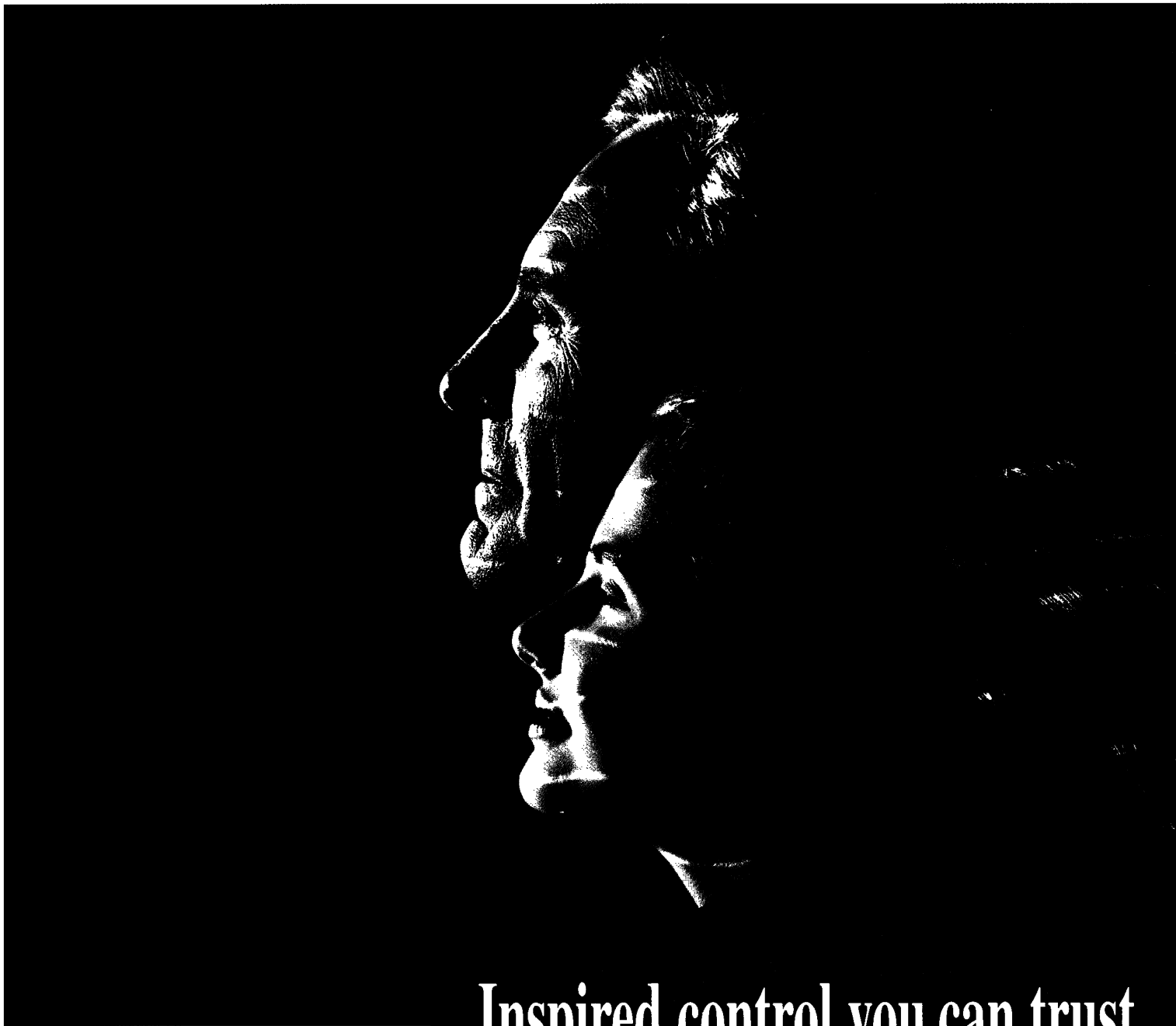
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daily. Children (3 months to 12 years): 0.25-0.5mg twice daily. For an increased therapeutic effect increase dose of Pulmicort rather than combine treatment with oral corticosteroids because of the lower risk of systemic effects. **Contra-indications, warnings, etc.:** Contra-indications: Hypersensitivity to any of the constituents. Special warnings and precautions: Care is needed in patients with pulmonary tuberculosis and viral infections in the airways. A short course of oral steroids in addition to Pulmicort may be required in patients with excessive mucus in the bronchi. Transfer of patients dependent on oral steroids to Pulmicort demands special care: see data sheet for further details. The nebuliser chamber should be cleaned and dried after every administration. Pulmicort does not affect the ability to drive and use machines. Pulmicort Respules can be mixed with 0.9% saline and with solutions of terbutaline, salbutamol, sodium cromoglycate or ipratropium bromide. **Side-effects:**

Mild irritation in the throat, coughing and hoarseness and oral candidiasis have been reported. In rare cases inhaled drugs may provoke bronchoconstriction in hyperreactive patients. Facial skin should be washed after use of the face mask as irritation can occur. Coughing can usually be prevented by inhaling a β_2 -agonist (e.g. terbutaline) 5-10 minutes before inhalation of Pulmicort Respules. Avoid in pregnancy. **Pharmaceutical precautions:** Store below 30°C. Use within 3 months of opening the foil envelope. Protect opened ampoule from light. Use within 12 hours of opening. **Legal status:** POM. **Basic NHS price:** Pulmicort Respules 0.25mg/ml (20 single dose units) £32.00. Pulmicort Respules 0.5mg/ml (20 single dose units) £44.64. **Product licence nos.:** Pulmicort Respules 0.25mg/ml PL 0017/0309. Pulmicort Respules 0.5mg/ml PL 0017/0310. **Name and address of product licence holder:** Astra Pharmaceuticals Ltd., Home Park, Kings Langley, Herts WD4 8DH.



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BUDESONIDE

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