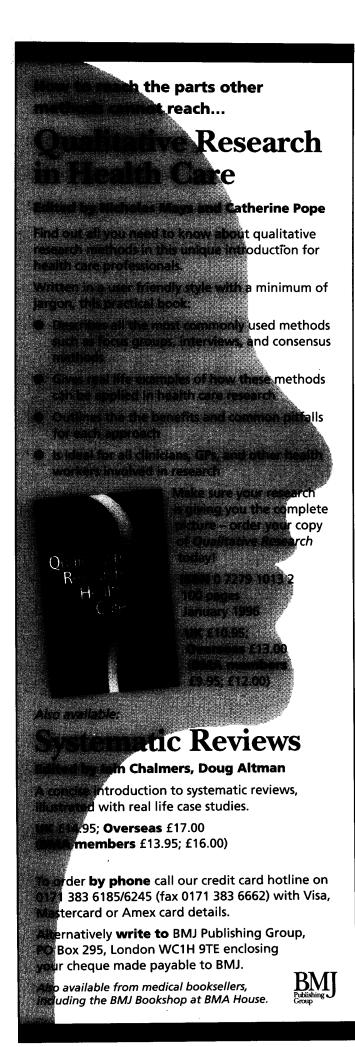
salbutamol's good

A convenient solution for greater Oompah in GOPD



Salamal Fasi-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 beta-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 betaadrenoceptor 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 conticosteroids.

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 N#15 Cost

Pt 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™ Inhale: Beclomethasone Dipropionate BP Inhaler (Please refer to full data sheet before prescribing)

Presentation Metered-Dose Aerosol supplied in a Breath-Operated Inhaler containing 200 class. Bedazone 50 Easi-Breathe, Bedazone 100 Easi-Breathe and Bedazone 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, Beclasses 50 and 190 EasiBreathe Inhalers; 100 microgram three or four times daily. Beclasses 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
Bedazone 50 East Breathe Inhaler - Pt 0530/0451 £4.34
Bedazone 100 East Breathe Inhaler - Pt 0530/0452 £8.24
Bedazone 250 East Breathe Inhaler - Pt 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 December 1995

The freedom to prescribe

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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 properly – they just take more doses until they feel an effect – but with a preventative, such as beclomethasone, the results could be serious.

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all you do is open...breathe...and close. There's no need to co-ordinate release, and the low inspiratory effort makes Easi-Breathe suitable for a wide range of patients.

Of course, you'd give all your asthma patients a better inhaler if cost wasn't an issue. Well, now it isn't. Easi-Breathe beclomethasone inhalers actually cost up to 22% less than ordinary press-and-breathe inhalers, and the salbutamol is also competitively priced (even before eliminating those 'extra puffs') – so there's no need for patients to use another inhaler for either of

these treatments.

Beclazone and Salamol Easi-Breathe

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

Beclazone Easi-Breathe

Beclomethasone Dipropionate BP 50, 100 & 250 microgram inhalers

Salamol Easi-Breathe

Salbutamol BP 100 microgram inhaler



ABBREVIATED PRESCRIBING INFORMATION Presentation UNIPHYLLIN CONTINUS tablets contain Theophylline BP in a controlled release system. UNI-PHYLLIN CONTINUS tablets 400 mg are white, capsuleshaped, scored tablets with the logo NAPP U400 embossed on one side and UNIPHYLLIN on the other. UNIPHYLLIN CONTINUS tablets 300 mg are white, capsule-shaped, scored tablets with U300 embossed on one side. UNIPHYLLIN CONTINUS tablets 200 mg are white, capsule-shaped, scored tablets with U200 embossed on one side. Uses Theophylline is a bronchodilator. In addition it affects the function of a number of cells involved in the inflammatory processes associated with asthma and chronic obstructive airways disease. Of most importance may be enhanced suppressor T-lymphocyte activity and reduction of eosinophil and neutrophil function. These actions may contribute to anti-inflammatory prophylactic activity in asthma and chronic obstructive airways disease. For the treatment and prophylaxis of bronchospasm associated with asthma, emphysema and chronic bronchitis. Also indicated in adults for the treatment of cardiac asthma and left ventricular or congestive cardiac failure. Dosage and administration NB Tablets should be swallowed whole and not chewed. Adults: The usual maintenance dose for elderly patients or those less than 70 kg body weight is 300 mg, 12-hourly following an initial week of therapy on 200 mg, 12-hourly. The usual maintenance dose for patients of 70 kg body weight or over is 400 mg, 12-hourly following an initial week of therapy on 200 mg or 300 mg, 12-hourly. Children: Not recommended for children under seven years of age. The maintenance dose is 9 mg/kg twice daily. Some children with chronic asthma require and tolerate much higher doses (10-16 mg/kg twice daily). Lower dosages (based on usual adult dose) may be required by adolescents. It may be appropriate to administer a larger evening or morning dose in some patients, in order to achieve optimum therapeutic effect when symptoms are quite severe, e.g. at the time of the 'morning dip' in lung function. In patients whose night time or day time symptoms persist despite other therapy and who are not currently receiving theophylline, then the total daily requirement of UNI-PHYLLIN CONTINUS tablets (as specified above) may be added to their treatment regimen as either a single evening or morning dose. Elderly: The initial dose should be 200 mg, 12-hourly increasing to 300 mg, 12hourly. Contra-indications Should not be given concomitantly with ephedrine in children. Precautions and warnings The following increase clearance and it may therefore be necessary to increase dosage to ensure a therapeutic effect: phenytoin, carbamazepine, rifampicin, sulphinpyrazone and barbiturates. Smoking and alcohol consumption can also increase clearance of theophylline. The following reduce clearance and a reduced dosage may therefore be necessary to avoid side-effects: allopurinol, cimetidine, ciprofloxacin, erythromycin, thiabendazole, isoprenaline, fluvoxamine, viloxazine hydrochloride and oral contraceptives. Factors such as viral infections, liver disease and heart failure also reduce theophylline clearance. The forn beta₂ agonist the

headache and CNS stimulation 's sign frantly reduced when UNIPHYLLIN CONTINUS tablet preparations are given. Furthermore, the side effects can be minimised by dose titration downwards. Transferability: it is not possible to ensure pidedulyalence between different sustained release theophyline products. Therefore, it should be emphasised that patients, once titrated to an effective dose, should not be changed from UN-PHYLLIN CONTINUS tablet preparations to other slow or sustained release xanthine preparations without retitration and clinical assessment. Legal category P. Package quantities and basic NHS price UNIPHYLL:N CONTINUS tablets 400 mg - 56's: £7.32; 250's: £32.36; 1,000's: £125.29. UNIPHY'LLIN CONTINUS tablets 300 mg - 56's: £6.17; 250's: £27.89. UN-PHYLLIN CONTINUS tablets 200 mg - 56's: £4.05 Product licence numbers UNIPHYLLIN CONTINUS tablets 400 mg - PL 0337/0074. UNIPHYLLIN CONT-NUS tablets 300 mg - PL 0337/0129. UNIPHYLLIN CONTINUS tablets 200 mg - PL 0337/0057. Product licence holder Napp Laboratories Emited, Cambridge Science Park, Milton Road, Campridge CB4 4GW, UK. Te 01223 424444. Member of Napp Pharmaceutica Group. Further information is available from Napo Laboratories Limited. ® The NAPP device, UNIPHYLLIN and CONTINUS are Registered Trade Marks @ NAPE Laboratories Limited 1995.

Laboratories Limited 1995.
Reference: 1. Kidney J., Dominguez M.
Taylor PM, et al. (In press).
Date of preparation: May 1995.



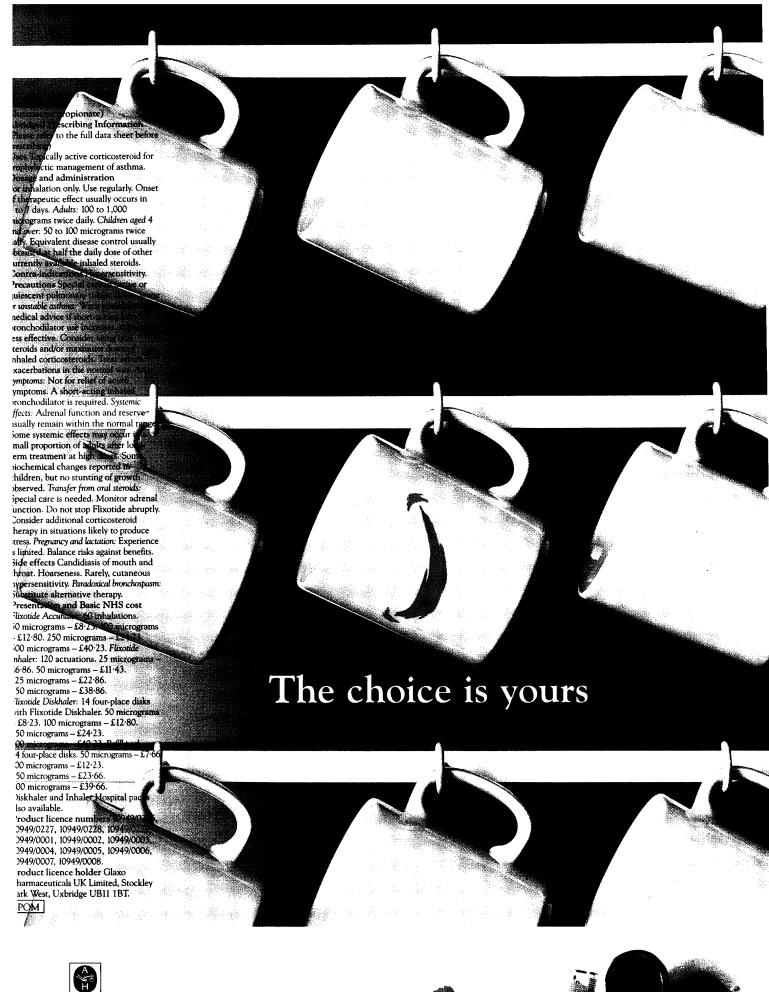


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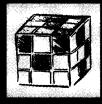












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Prescribing Information ▼®FORADIL eformoterof fumarate Presentation 12 micrograms dry powder inhalation capsules for use with breath activated inhaler device. Indications Regular maintenance treatment of bronchospasm in patients with reversible obstructive 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 62-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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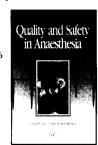
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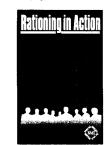
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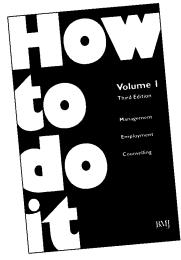
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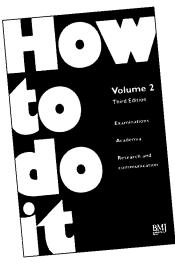
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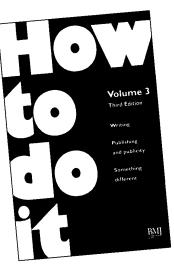
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daily. Children (3 months to 12 years): 0.25-0.5mg twice daily. For an increased therapeutic effect increase dose of Pulmicort rather than combine treatment with oral corticosteroids because of the lower risk of systemic effects. Contra-indications, 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 of 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 82-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 PL 0017/0309. Pulmicort Respules 0.5mg/ml PL 0017/0310. Name and address of product licence nos.: Pulmicort Plantaceuticals Ltd., Home Park, Kings Langley, Herts WD4 8DH.



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