# TEARS Naturale

An artificial tear drop for dry eye syndrome
High tear retention – low viscosity

Alcon

**Alcon Laboratories (U.K.) Limited** Imperial Way Watford Hertfordshire England WD2 4YR. Tears Naturale is for the treatment of dry eye syndromes associated with deficient tear secretion of deficient mucous.

**Dosage and administration:** Tears Naturale is a clear colourless sterile solution containing Dextran70 USP 0.1% and Hydroxypropyl Methylcellulose (Hypromellose) 0.3% preserved with Benzalkonium Chloride 0.01% and Disodium Edetate 0.05%. The normal dose is one to two drops into the eye(s) as frequently as required to relieve eye irritation symptoms.

**Contra-Indications:** Known hypersensitivity to Benzalkonium Chloride. This product should not be used when soft contact lenses are being worn.

Basic NHS cost £1.60 P.L. 0649/0031. Full prescribing information available on request.

# AN IMPORTA
# IN THE TI
# OF HERPES SIMI

**ZOVIRAX is a highly selective antiherpes agent with a fundamentally different mode of action, and extremely low toxicity.**

**● Unique mode of action**
A Wellcome discovery, ZOVIRAX is the first antiherpes agent that is activated to any significant extent only when the herpes simplex virus is present. ZOVIRAX is converted to a monophosphate form by a herpes-specific thymidine kinase enzyme. This starts a chain of events resulting in the active compound, the triphosphate form, which inhibits viral replication. In chemically signalling its presence the virus thus seals its own fate.

**● Highly effective with rapid action**
In clinical studies ZOVIRAX has been shown to be superior to idoxuridine.[1] In the trial, healing time was quicker with ZOVIRAX.

Antiviral activity has been well demonstrated in *in vitro* studies. ZOVIRAX ". . . was found to be between 5 and 10 times more active than cytarabine, idoxuridine and trifluorothymidine, and more than 100 times more active than vidarabine."[2]

**● Greater selectivity**
Because of its unique mode of action, ZOVIRAX can be regarded as an ultra-selective agent. Once "bioactivated" it has a 10 to 30-fold greater affinity for viral DNA polymerase than for cellular polymerase. In tissue culture experiments it was 3,000 times more active against the herpes simplex virus than it was against the host cell.[3]

**● Low toxicity in normal cells**
Because of its ultra-selectivity, ZOVIRAX has extremely low toxicity. A report on this selectivity describes ZOVIRAX as ". . . a new class of antiviral agent that has extremely low toxicity for normal cells while having an inhibitory activity against HSV which is greater than that of any hitherto known compound."[3]

**● An agent of promise**
Wellcome take particular pride in introducing ZOVIRAX, a preparation which we believe heralds a new era in antiviral chemotherapy.

1. Collum, L M T *et al Brit. J. Ophthalmol.*, (1980), **64**, 766 2. *J. Antimicrob. Chemother.*, (1979), **5**, 431 3. *Proc Natl Acad Sci USA.*, (1977), **74**/12, 5716

**PRESCRIBING INFORMATION** **Presentation** Acyclovir 3 per cent w/w in a white soft paraffin base. **Uses** Treatment of herpes simplex keratitis. **Dosage and administration** A 1 cm ribbon of ointment should be placed inside the lower conjunctival sac five times a day at approximately four-hourly intervals. Treatment should continue for at least 3 days after healing is complete. **Contra-indications** Patients with a known hypersensitivity to acyclovir. **Warnings and adverse effects** For ophthalmic use only. Transient mild stinging immediately following administration occurs in a small proportion of patients. Superficial punctate keratopathy has been reported but has not resulted in patients being withdrawn from therapy, and healing has occurred without apparent sequelae. (PL 3/0150)

Further information is available on request. Wellcome Medical Division, The Wellcome Foundation Ltd., Crewe, Cheshire

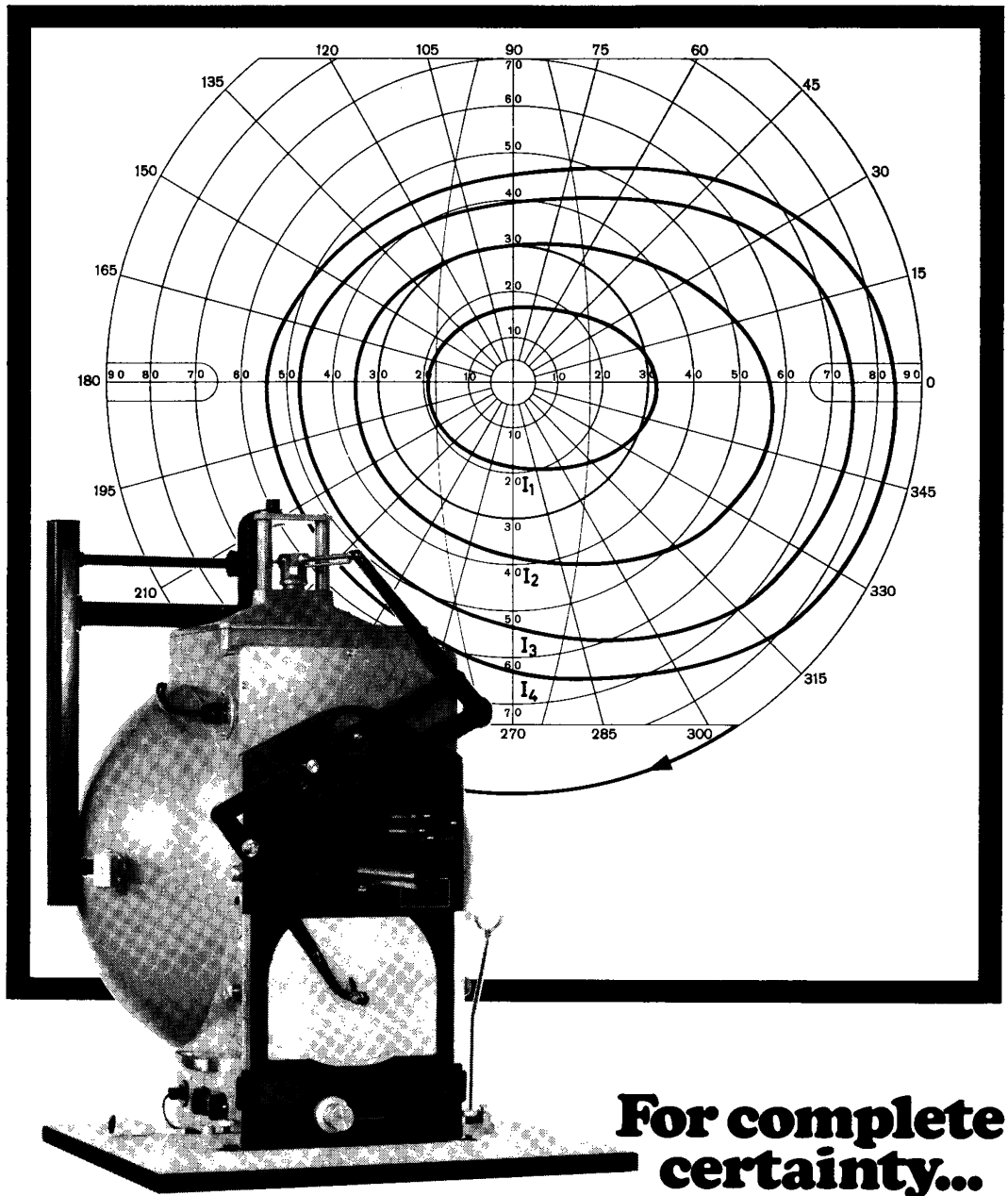
# NT ADVANCE
# ATMENT
# EX INFECTIONS

## NEW ZOVIRAX* OPHTHALMIC OINTMENT
ACYCLOVIR

The effective, more selective antiviral

* Trade Mark

Wellcome




# For complete certainty... the Original Goldmann by Haag-Streit.

The Original Goldmann gives you complete certainty of the highest accuracy and the maximum economy of time in both peripheral and central field plotting. Besides this, the Haag-Streit 940 also gives you complete certainty that examination conditions will be precisely reproducible for each patient even after a lapse of years between examinations. The Original Goldmann Perimeter is available in two models; the 940-K7 for kinetic perimetry and the 940-ST for both kinetic and static perimetry. Accessories for both consist of:

- Patient-activated recording device
- Central scotoma plotting device
- Set of 102 trial lenses to meet requirements for examination within the 30° region.

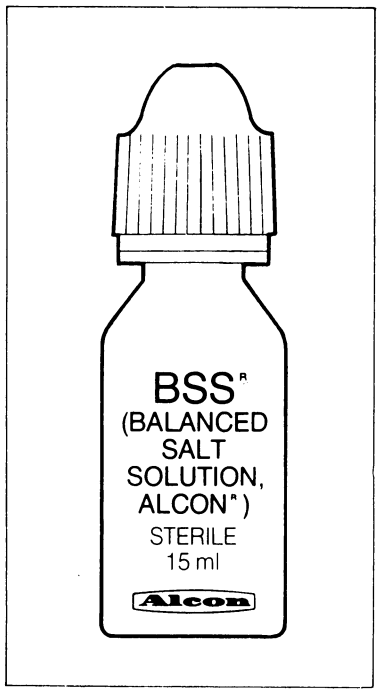
To conduct your perimetry examinations with complete certainty, complete accuracy and maximum time economy use the Original Haag-Streit Goldmann instrument.
Contact us for full information.

HAAG-STREIT

**Clement Clarke International Ltd.**
15 Wigmore Street, London WIH 9LA
Tel. 01-580-8053

Representative in Eire:
TL Egan and Company Ltd. Dublin 2

# Balance is Essential




**Alcon's Balanced Salt Solution (BSS) is:-**

- Compatible with ocular tissues minimising cytotoxic effects.*
- Convenient to use. 15 ml Steri-Unit with an adaptor plug for a Luer-Lok irrigating needle.
- Contained in an outer blister pack enabling the bottle to be placed on a sterile surface.

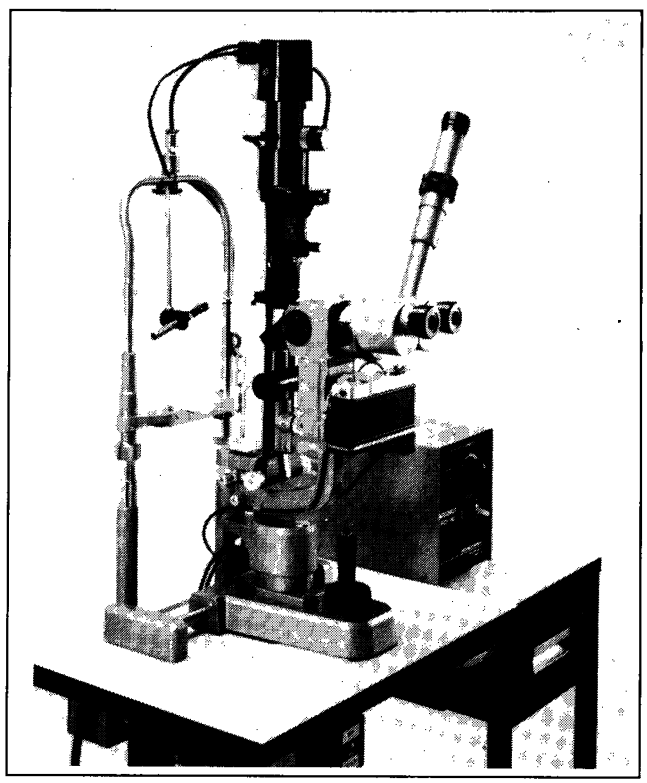
Intra-ocular fluid contains principally seven ionic species. Normal saline and Ringers solution contain only two and four of these ions respectively. They are **not Balanced Salt Solutions.** Thus both produce ionic imbalance resulting in trauma to the tissue.*
To prevent cellular damage to ocular tissues you need a solution that is isotonic and physiologic. **Alcon's Balanced Salt Solution.**

Alcon

ALCON LABORATORIES (U.K.) LTD,
Imperial Way, Watford,
Hertfordshire, England WD2 4YR
Telephone Watford (0923) 46133
Telex 923709

*Merrill, D.L., Fleming, T.C. and Girard, L.J. Amer. J. Ophth. 49:895-903, No.5, Part 1, May '60

# topcon
# photo slit lamp
# SL-5D



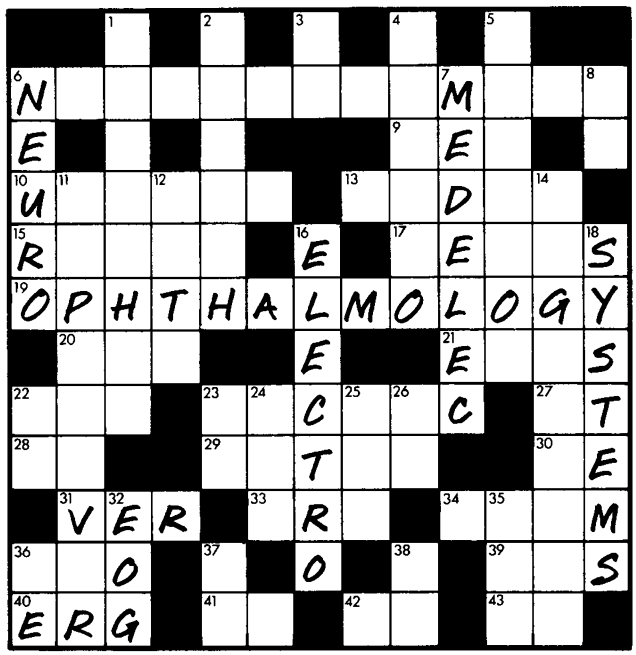
Camera can be attached without cluttering microscope area and without hampering Slit Lamp Operations.
Unit design photographic system and monocular tube makes attachments and exchanges very simple.
Stereo-photographs can be taken easily with one shot.
Three magnification changes for observation and photography.
Camera operated by depressing the release button on joystick control lever and utilizing auto-wind system.

**TOPCON**

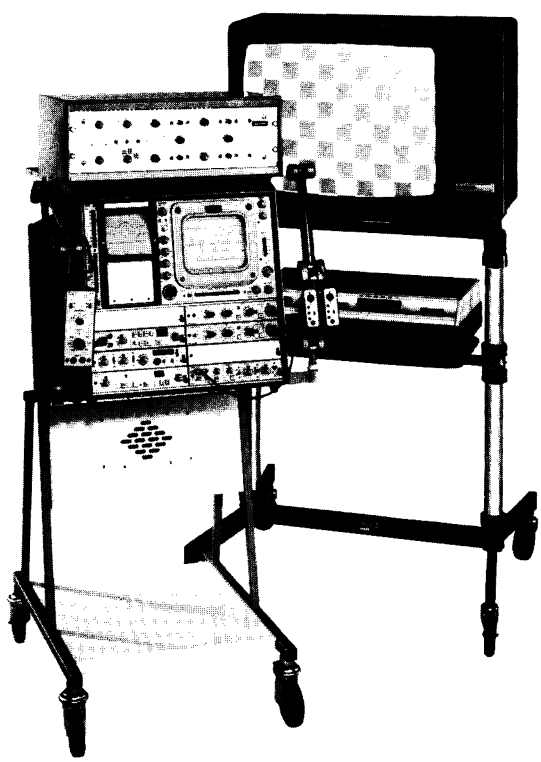
European Distribution Centre: Topcon Europe B.V.
Groothandelsgebouw, P.O. Box 29039, 3001 GA Rotterdam
The Netherlands. Tel. 010 - 127279/147691. Telex: 23783

Keeler

Exclusive distributor in
United Kingdom:
Keeler Instruments Ltd., Academic House. 24/28 Oval Road.
London NW1 9 ND Tel. 01-2676157. Telex: 847565.




# MS6 has the answers



The versatile MS6 electrophysiological system is ideal for neuro-ophthalmological investigation of electrical activity in the visual pathways. Visually evoked responses from the eye (electro-retinography) and brain (electro-encephalography) and eye movements (electro-oculography) can be quantified, and hard copies of the recorded waveforms made as required.

The MS6 assists objective diagnosis of diseases and malfunctions affecting any region of peripheral and central visual areas: retinal degeneration, amblyopia, multiple sclerosis and neuromyelitis optica.

The Medelec video stimulators allow presentation of vertical and horizontal bars or checkerboards. Wide control of retinal area of stimulation, pattern configuration, spatial frequency (for testing acuity) and contrast is available.

For detailed technical and applications information write or phone for Medelec's Technical Information Service sheets.

**medelec**

A Vickers Medical Company

Medelec Ltd., Manor Way, Old Woking, Surrey GU22 9JU.
Telephone: Woking (04862) 70331.
Telex: 859141 Medlec G.

# MAXIDEX

(DEXAMETHASONE 0.1%)

# Intensive care steroid for severe ocular inflammations

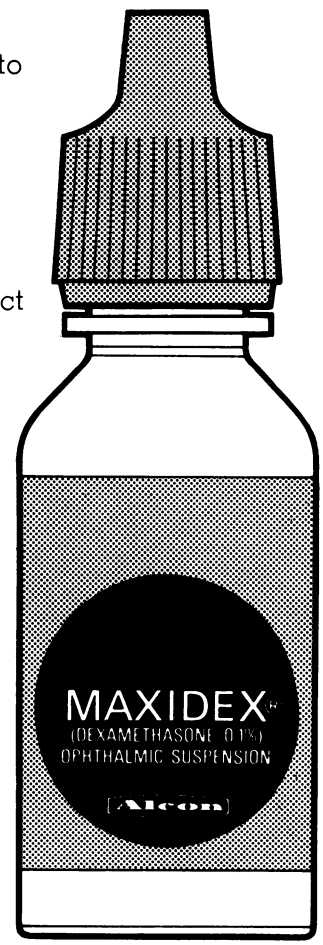
**● the most potent ocular steroid**

Dexamethasone has anti-inflammatory effects 30 to 50 times that of cortisone.[1]
Dexamethasone is the most potent of the corticosteroids available for ophthalmic use.

**● the ideal ophthalmic vehicle**

The Isopto® Vehicle of MAXIDEX:
**provides extended activity**[2] by prolonged contact time in the eye, increasing opportunity for absorption of the anti-inflammatory agent.

References:
1. Havener, W. H.: Ocular Pharmacology, St. Louis, C. V. Mosby Co., p. 290-1, 294, 1966.
2. Linn, M. T. and Jones, L. T.: Rate of Lacrimal Excretion of Ophthalmic Vehicles, Amer. J. Ophthal. *65*:76, 1968.




ALCON LABORATORIES (U.K.) LIMITED
Imperial Way Watford Hertfordshire England WD2 4YR
Telephone Watford 46133 Telex 923709 Cable Alcon Watford

# Ganda® 1+0.2

GUANETHIDINE MONOSULFATE B.P. 1% w/v and ADRENALINE B.P. 0.2% w/v

# a new starting point for the treatment of glaucoma

1 COMFORT

2 COMPLIANCE

3 CONTROL

SMITH & NEPHEW Pharmaceuticals Ltd.

Bessemer Road, Welwyn Garden City, Hertfordshire, England AL7 1HF. Tel: (070 73) 25151

**DOSAGE AND ADMINISTRATION** *Adults:* One drop to be instilled into the eye once or twice daily or at the discretion of the physician. *Children:* At the discretion of the physician.

**CONTRA-INDICATIONS, WARNINGS ETC.** Ganda 1+0.2 should not be used in the case of a narrow angle between the iris and cornea as pupillary dilation may precipitate angle closure. Occasionally, orbital discomfort or red eye (hyperaemia) may occur. Other side effects, such as local irritation and headache are rare. When used in conjunction with miotics, Ganda 1+0.2 should follow the miotic after an interval of 5-10 minutes. Ganda 1+0.2 should not be used if the solution has become dark amber. The contents of the bottle should be discarded one month after the pouch has been opened. Ganda 1+0.2 is fully potent for two years providing the pouch remains unopened.

**PRODUCT LICENCE NUMBER** 0033/0075 Full prescribing information is available on request

**References** 1 Romano J., Nagasubramanian S., and Poinoosawmy D. Double-masked cross-over comparison of Ganda 1.02 (Guanethidine 1% and Adrenaline 0.2% mixture) with Guttae Adrenaline 1% (Simplene 1%) and with Pilocarpine 1% (Sno-Pilo 1%). British Journal of Ophthalmology in press.
2 Mills K. B. Personal communication. 3 Urner-Bloch U., Aeschlimann J. E., and Gloor B. P. (1980) Treatment of Chronic Simple Glaucoma with an Adrenaline/Guanethidine Combination at Three Different Dosages (Comparative Double-Blind Study) Albrecht v. Graefes Arch. klin. exp. Ophthal. 213, 175-185.

# Nine lives, but only one pair of eyes...

## lengthen the odds against IOP increase with FML (fluorometholone)


The efficacy of FML is comparable to 0.1% dexamethasone and 1.0% prednisolone with less propensity to increase IOP than dexamethasone.

FML is the only steroid available in the lubricating Liquifilm vehicle which in itself soothes hot and irritated ocular tissues.

FML offers dosage flexibility, especially during the first 48 hours of treatment.

For convenience and economy FML is available in both 5 cc and 10 cc sizes.

**Presentation** White microfine sterile ophthalmic suspension containing fluorometholone (0.1%). **Uses** Topical ophthalmic suspension for steroid responsive inflammation of the palpebral and bulbar conjunctiva, cornea and anterior segment of the globe. **Dosage and administration** 1 to 2 drops instilled into the conjunctival sac two to four times daily. During the initial 24 to 48 hours the dosage may be safely increased to 2 drops every hour. Care should be taken not to discontinue therapy prematurely. **Contra-indications, warnings, etc** Contra-indications: Acute superficial herpes simplex keratitis. Fungal diseases of ocular structures. Vaccinia, varicella and most other viral diseases of the cornea and conjunctiva. Tuberculosis of the eye. Hypersensitivity to the constituents of this medication. **Warnings**: Steroid medication in the treatment of herpes simplex keratitis (involving the stroma) requires great caution. Frequent slit-lamp microscopy is mandatory. Prolonged use may result in glaucoma, damage to the optic nerve, defects in visual acuity and fields of vision, posterior subcapsular cataract formation, or may aid in the establishment of secondary ocular infections from fungi or viruses liberated from ocular tissue. In these diseases causing thinning of the cornea or sclera, perforation has been known to occur with use of topical steroids. Safety and effectiveness have not been demonstrated in children of the age group two years or below. This preparation contains benzalkonium chloride and should be used with caution in association with hydrophilic contact lenses. **Use in pregnancy**: Safety of the use of topical steroids during pregnancy has not been established. *Precautions*: As fungal infections of the cornea are particularly prone to develop coincidentally with long-term local steroid applications, fungus invasion must be suspected in any persistent corneal ulceration where a steroid has been used or is in use. Intraocular pressure should be checked frequently. *Adverse reactions*: Glaucoma with optic nerve damage, visual acuity or field defects, posterior subcapsular cataract formation, secondary ocular infection from pathogens liberated from ocular tissues, perforation of the globe. Local side effects of steroid therapy, ie skin atrophy, striae and telangiectasia, are especially likely to affect facial skin. **Pharmaceutical precautions** Protect from freezing. **Legal category** Restricted by the terms of the product licence to supply on prescription from registered pharmacies, and also through hospitals and ophthalmological clinics. **Package quantities** Supplied in plastic dropper bottles of 5 ml and 10 ml. **Further information** Nil. **Product licence number** 0426/0028

ALLERGAN **Allergan Limited, Fennels Lodge, St Peters Close, Loudwater, High Wycombe, Bucks, HP11 1JT Tel: Bourne End (06285) 27778**


# New from Glaxo

## With significantly less effect on intra-ocular pressure

Eumovate Eye Drops have significantly less effect on intra-ocular pressure than hydrocortisone, betamethasone, prednisolone or dexamethasone eye drops.

'It is therefore of some significance that with clobetasone butyrate it has been possible to dissociate the adverse intra-ocular pressure effect from the advantageous anti-inflammatory effects, and thus we may well have a "safer" steroid for use in ophthalmology.'

Ramsell TG, Bartholomew RS, Walker SR. Br J Ophthalmol 1980; 64: 43-5.

## Eumovate Eye Drops
**(clobetasone butyrate)**

## Eumovate-N Eye Drops
**(clobetasone butyrate and neomycin)**

**A new standard of safety in ophthalmology**

### Prescribing information

**Indications**
Eumovate Eye Drops are indicated for the treatment of non-infected inflammatory conditions of the eye. Eumovate-N Eye Drops are indicated for inflammatory conditions of the eye where secondary bacterial infection is likely to occur.

**Dosage and administration**
The usual dosage is one to two drops four times a day: for severe inflammatory conditions one or two drops should be instilled into the eye every one or two hours until control is achieved, when the frequency may be reduced.

**Contra-indications**
Viral, fungal, tuberculous or purulent conditions of the eye, hypersensitivity to any component of the preparation. Use is contra-indicated if glaucoma is present. Eumovate Drops and Eumovate-N Drops contain benzalkonium chloride as a preservative and therefore should not be used to treat patients who wear soft contact lenses.

**Precautions**
Although Eumovate Eye Drops have been shown to have little effect on intra-ocular pressure in most patients, those receiving long term treatment should have their intra-ocular pressure monitored frequently.
Cataract is reported to have occurred after unduly prolonged treatment with some topical corticosteroids and in those diseases which cause thinning of the cornea, perforation has been known to occur.
In general, topical steroids should not be used extensively in pregnancy, i.e., in large amounts or for prolonged periods.

**Side effects**
Rises in intra-ocular pressure have been reported in susceptible patients but these are generally much less than with other corticosteroid eye preparations, including hydrocortisone.

**Product Licence numbers**

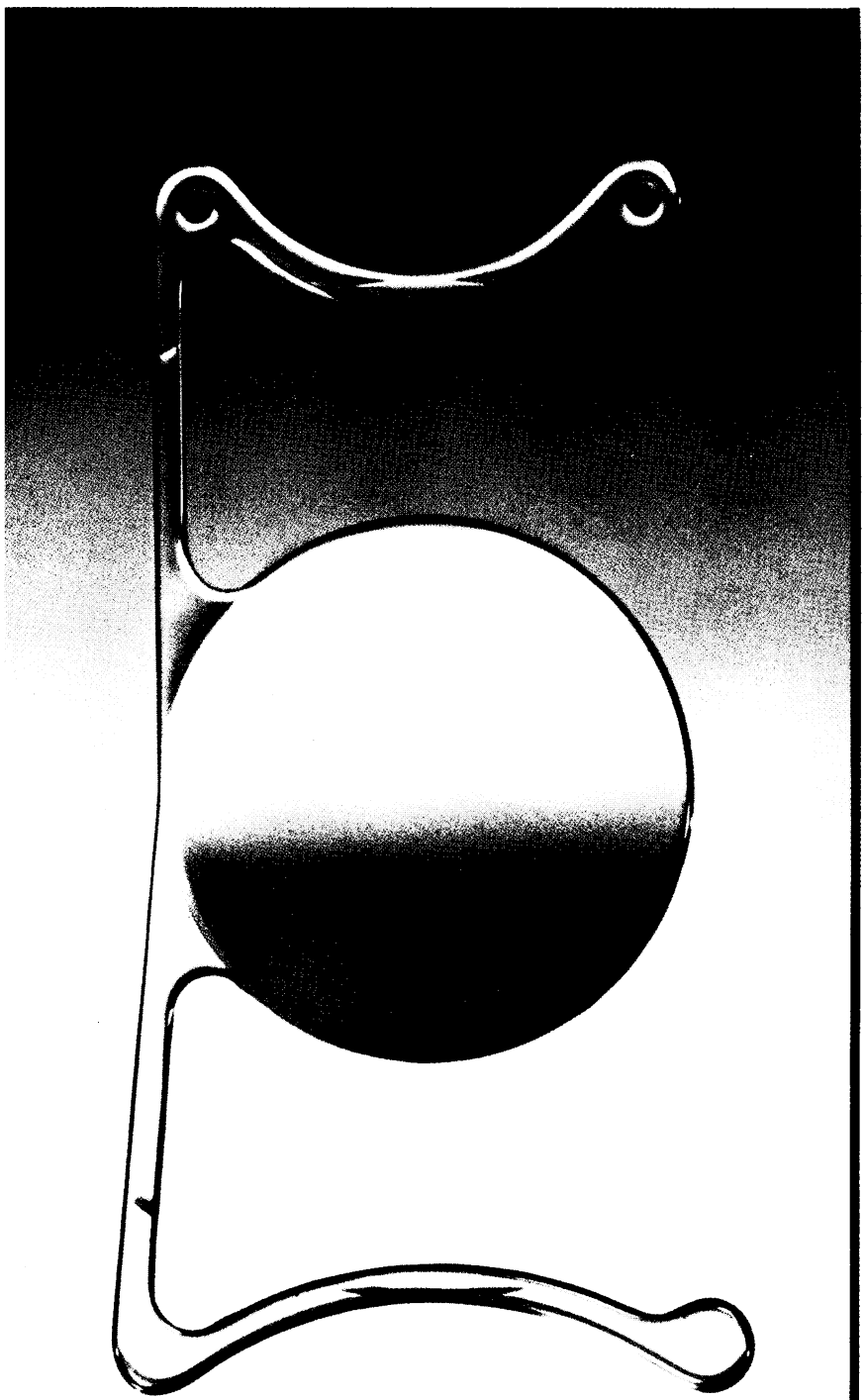
| | |
|---|---|
| Eumovate Drops | 4/0260 |
| Eumovate-N Drops | 4/0276 |

| Presentation | | Basic NHS cost (exclusive of VAT) £ |
|---|---|---|
| Eumovate Eye Drops (in plastic dropper bottles) | 5ml | 1·80 |
| | 10ml | 3·33 |
| Eumovate-N Eye Drops (in plastic dropper bottles) | 5ml | 1·80 |
| | 10ml | 3·33 |

***Glaxo***

Further information on Eumovate Eye Drops and Eumovate-N Eye Drops is available from: Glaxo Laboratories Limited Greenford, Middlesex UB6 0HE
Eumovate is a Glaxo trade mark

# The Kelman™ Quadraflex™* anterior chamber lens from CILCO.™



The Kelman™ Quadraflex™ anterior chamber lens is designed by Charles D. Kelman, M.D. and is lathe cut in a single piece from Perspex® CQ polymethylmethacrylate.

Diameter of the optic is 5.0 mm. The full range of diopter powers is available. Width of the superior footplate is 5.0 mm. Width of the inferior footplate is 6.0 mm. Sizes (overall diagonal length) range from 11.5 mm to 13.5 mm in 0.5 mm increments.

Videotape on implantation of the Kelman Quadraflex lens is available for loan from CILCO's United Kingdom office. Write or telephone for further information.

CILCO™

England: CILCO, Inc., 3 Waterdene House, Water Lane, Leighton Buzzard, Bedfordshire LU77AW
Telephone: (0525) 381122
TLX: 848 507

Europe, Middle East and Africa: CILCO SARL, 99 rue Georges Clemenceau, Cannes, France 06400
Telephone: (93) 38 06 99
TLX: 470 900

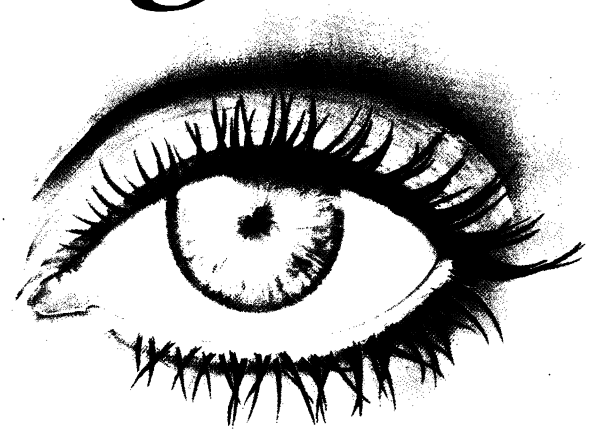
Australia: A.O. Medical Company
51 Stead Street
South Melbourne 3205, Victoria
Telephone: Melb. 690 2608
TLX: SLE MED 35763

Canada: CILCO Canada, Simcoe Building
Suite 206, 345 Kingston Road
Pickering, Ontario L1V1A1
Telephone: 416/286-1416

U.S.A.: CILCO, Inc., 1616 13th Avenue
Huntington, West Virginia 25701
Telephone: 304/697-4422
TLX: 886 453

*Patented

# Many pilocarpine patients don't see the light of day



How many of your glaucoma sufferers still take pilocarpine and see life through a miotic haze?

Today, thanks to 'Timoptol', there's no good reason why they should. 'Timoptol' not only gives superior control of intra-ocular pressure in more patients than pilocarpine[1] but it does so without miosis and with a minimum of blurring, spasm or irritation[2].

Understandably, patients on lifetime glaucoma therapy really appreciate the change[3] and they show it by being more ready to comply with treatment.

'Timoptol' is presented in a special Ocumeter® Dispenser which delivers a metered sterile dose.

One drop of 'Timoptol' twice daily gives day long control of glaucoma without the miotic problems of pilocarpine, helping glaucoma patients to view life in a dramatically different light.

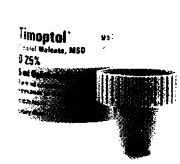
**References:**
1. *Proceedings of the International Symposium on glaucoma* XXIII International Congress of Ophthalmology, Kyoto, Japan, May 12. 1978, p.41. 2. ibid., p.29. 3. Doig, W.M. *Res & Clin. Forums.*, 1980, 2 (1), p.167.

Ophthalmic Solution

**Timoptol®**

Timolol maleate, MSD

**The bright one**

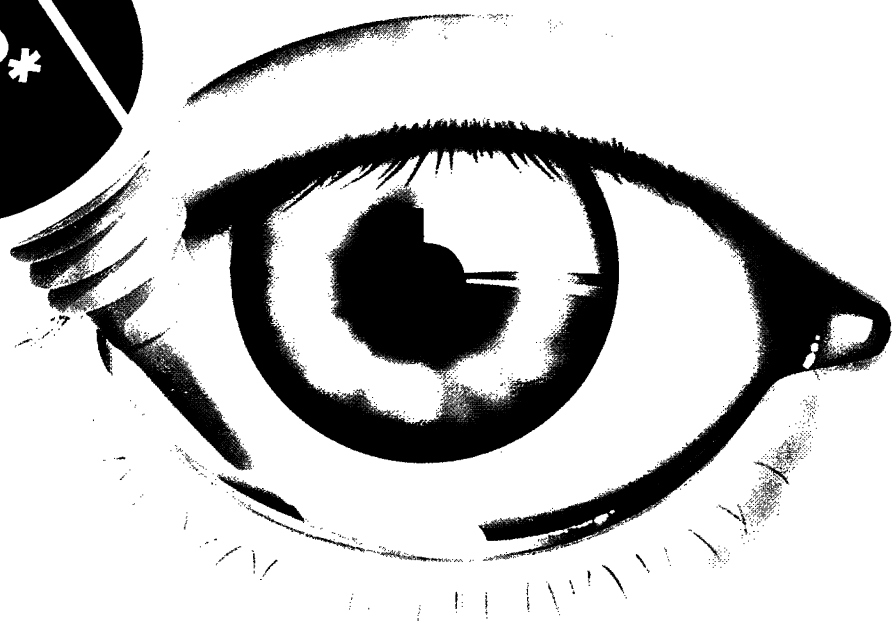



MSD MERCK SHARP DOHME Merck Sharp and Dohme Limited, Hoddesdon, Hertfordshire, EN11 9BU


6.82TOT.81.GB.7924.J

For prescribing information see next page

# Improve on your most frequent choice



# This blue nozzle† makes it easier to apply

# Chloromycetin

chloramphenicol eye ointment BP

## Ophthalmic ointment

Further information (including data sheet) is available on request:
Parke, Davis and Company, Usk Road, Pontypool, Gwent NP4 0YH. Tel: Pontypool (04955) 2468.

Chloromycetin and the device showing a tube having a blue nozzle are the trade marks of Parke, Davis and Company for ophthalmic preparations containing chloramphenicol. † Blue Nozzle patent no. 8018334 pending.

P456-UK-May 81

PARKE-DAVIS

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