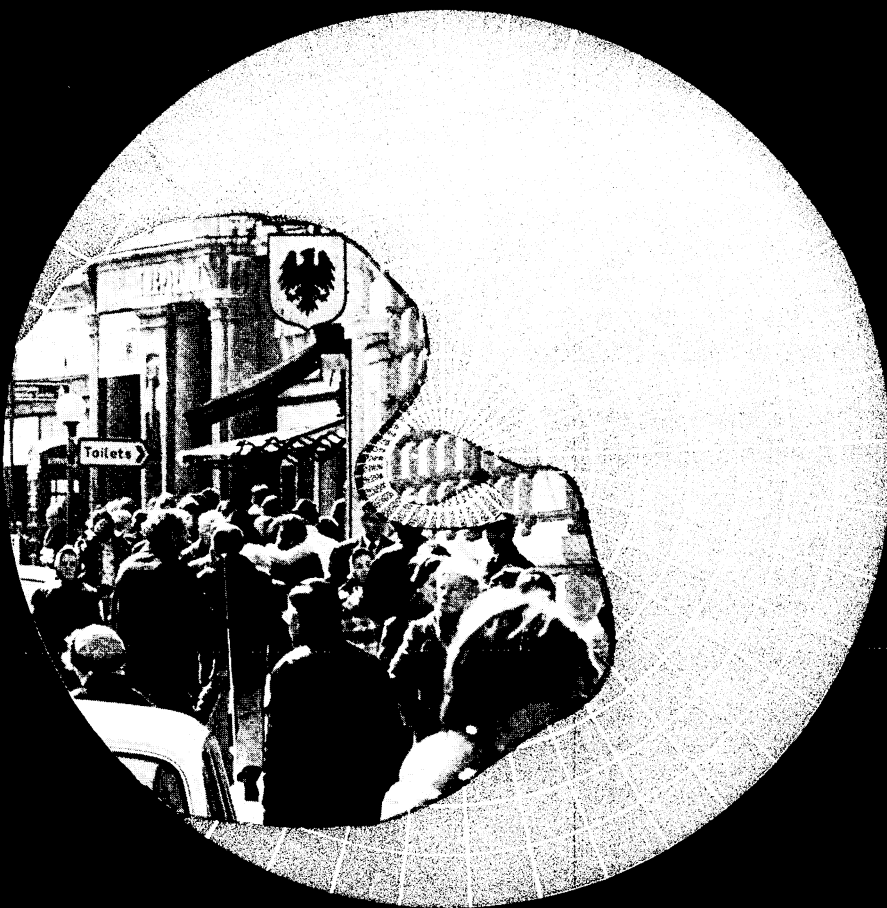


NEW
PRODUCT
FOR GLAUCOMA

Sno-Pilo[®]

pilocarpine you can always
be sure of.



Sno-Pilo is presented in a specially designed, easy-to-use, plastic dropper bottle containing 10ml pilocarpine hydrochloride eye drops. There are five strengths available: 0.5% w/v, 1.0% w/v, 2.0% w/v, 3.0% w/v and 4.0% w/v. PL 0033/0064 - 0068. Full prescribing information is available. Smith & Nephew Pharmaceuticals Ltd., Bessemer Road, Welwyn Garden City, Hertfordshire, United Kingdom.



Opticrom. A completely new treatment for vernal kerato-conjunctivitis, an allergic disease of the eye.

Opticrom is a new application of sodium cromoglycate. This drug is well established in the treatment of asthma and allergic rhinitis. Its unique properties now offer a completely new approach to the management of vernal kerato-conjunctivitis without the serious side effects which are always a risk with corticosteroids used in the eye.

Opticrom is a 2% w/v solution of sodium cromoglycate which works by preventing the degranulation of local mast cells in the conjunctiva and inhibiting the release of inflammatory agents. Symptoms are thus prevented. This mode of action sets it apart from other therapy.

Therapy with Opticrom should be continued for several days before assessing effectiveness. Maximum clinical improvement may take longer to appear. Since it is essentially prophylactic treatment, patients should maintain regular dosage in the presence of environmental challenge, even when apparently free from symptoms.

Opticrom is probably the first really new treatment for an allergic eye disease that has appeared in a long time.

Prescribing Information

Presentation A clear colourless aqueous solution of Sodium Cromoglycate BP 2% w/v with benzalkonium chloride 0.01% w/v 2-Phenylethanol 0.4% w/v.

Uses For the treatment of vernal kerato-conjunctivitis (vernal or spring catarrh).

Dosage One or two drops into each eye four times daily.

Contra-indications, warnings, etc. Known hypersensitivity to benzalkonium chloride. Transient stinging may occur in some patients.

Pharmaceutical Precautions Store below 30°C.

Legal Category (Sec. 62).

Package Quantity 10 ml.

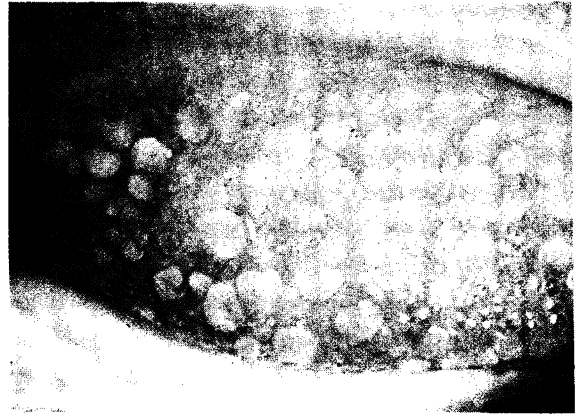
Further information Discard any remaining contents four weeks after removing the bottle from its wrapping.

Product Licence Number (UK) PL 0113/0039.
(Eire) PA 18/2/1.

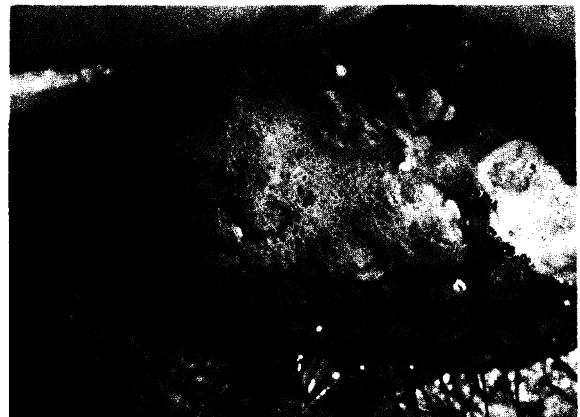
Opticrom[®]

FISONS Leaders in Allergy Research

Further information is available on request from:
Fisons Limited Pharmaceutical Division
Loughborough, Leicestershire LE11 0BB



Right upper tarsus of adult patient with vernal kerato-conjunctivitis showing 'cobblestones' due to giant compound papillae.



Upper tarsal plate in active vernal disease. Note fine lace-like scarring and profuse mucopurulent discharge.



Indolent vernal corneal ulcer stained with alcian blue to demonstrate mucous deposition.

Photographs first published in *Clinical Allergy* (1972) 2 99 107. Reproduced by kind permission of the publishers.

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So how long should cycloplegia persist?

Ideally, as most ophthalmologists would agree, cycloplegia should last long enough to complete refraction – and as little as possible afterwards.

Mydriacyl is the most effective way to meet these criteria. Two drops, 1 to 5 minutes apart permits you to start refracting within 20 minutes. If you are not ready to attend to the patient at that time, instillation of a further drop (repeatable at 30 minute intervals) maintains maximum cycloplegia.

Mydriacyl makes life easier for you – easier for your patients.

Even without use of miotics fair accommodation returns within 3 to 4 hours, and complete recovery within 6 hours. Add a miotic, and patients can resume normal life even sooner.

Which is a vast improvement on conventional techniques often giving patients blurred vision for up to 48 hours.

Supplied: For cycloplegia – Mydriacyl 1.0%. For mydriasis (with moderate, short-acting cycloplegia) – Mydriacyl 0.5%. Both in 15cc Drop-tainer dispenser. Rx only.

Caution: as with any mydriatic, caution should be used when intraocular pressure is high or unknown, or when anterior chamber is shallow. Contraindicated in narrow angle glaucoma.

“Recovery of accommodation is rapid and the cycloplegic effect is gone in 2 to 4 hours, with complete return of accommodation within 6 hours”.

B. C. Gettes, Philadelphia Archives of Ophthalmology May 1961

MYDRIACYL
MYDRIACYL
(TROPICAMIDE)

for timed mydriasis and cycloplegia

Ophthalmic Division, Alcon Laboratories, UK, Ltd, Impara Way, Watlington, Herts, England, S.D.4YR
Telephone: Watlington 46133, Telex Number: 923700

Alcon

World leaders in ophthalmic therapy.