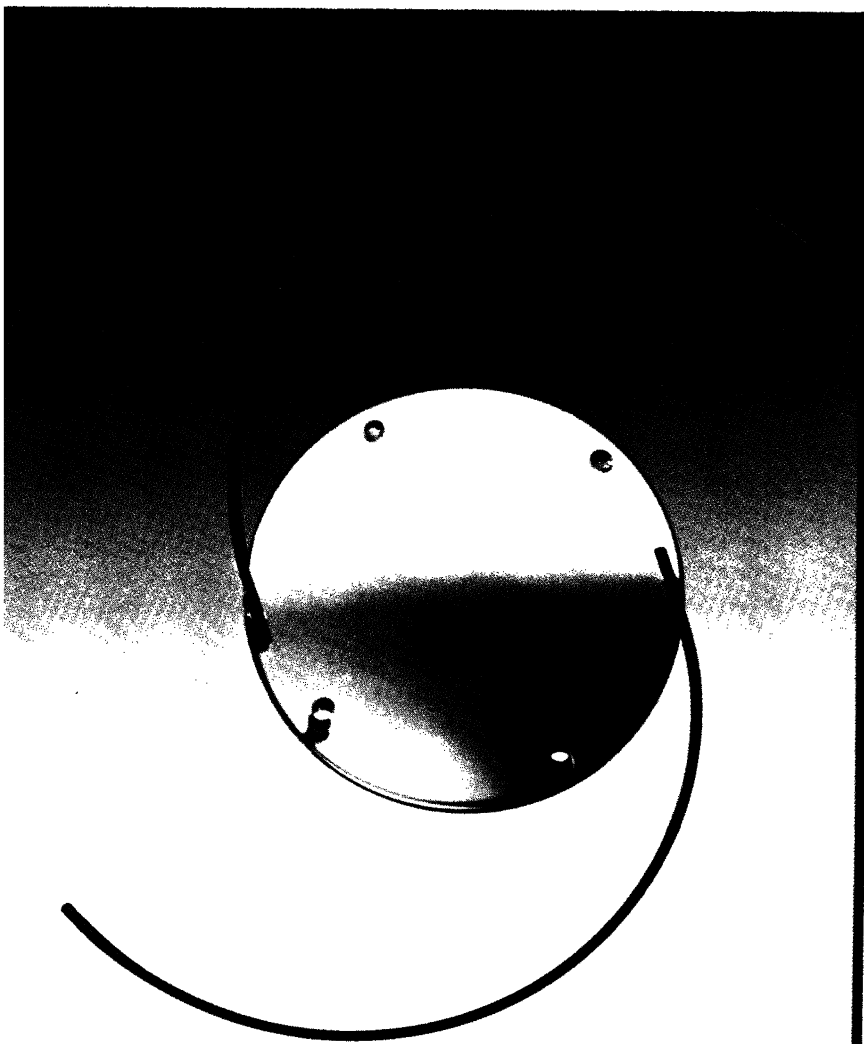
The Simcoe II posterior chamber lens from CILCO.™



CILCO's second-generation Simcoe posterior chamber lens has shortened loops, four manipulation holes of 0.30 mm diameter and blue Prolene™ polypropylene loops.

The lenticular is lathe cut from Perspex® CQ polymethylmethacrylate and measures 6.0 mm in diameter. Overall length is 14.0 mm. Diameter of loops is 0.15 mm.

Surgical protocol and videotape on implantation of the Simcoe II lens are available from CILCO's United Kingdom office. Write or telephone for further information.

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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

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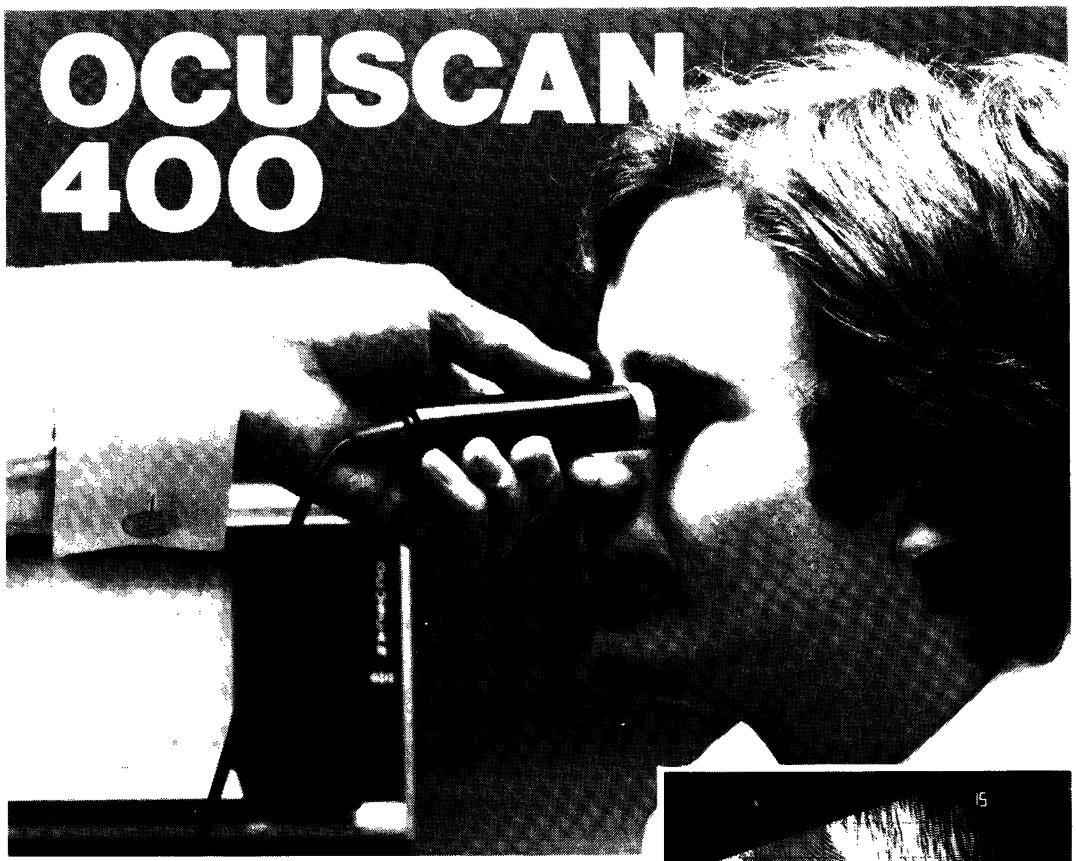

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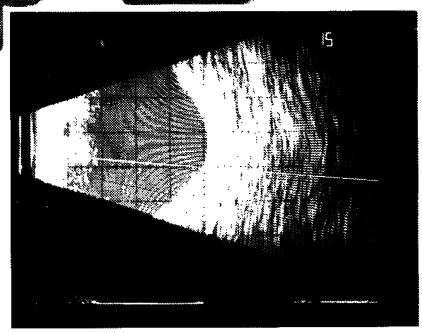

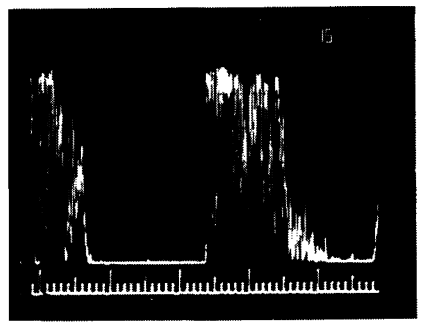

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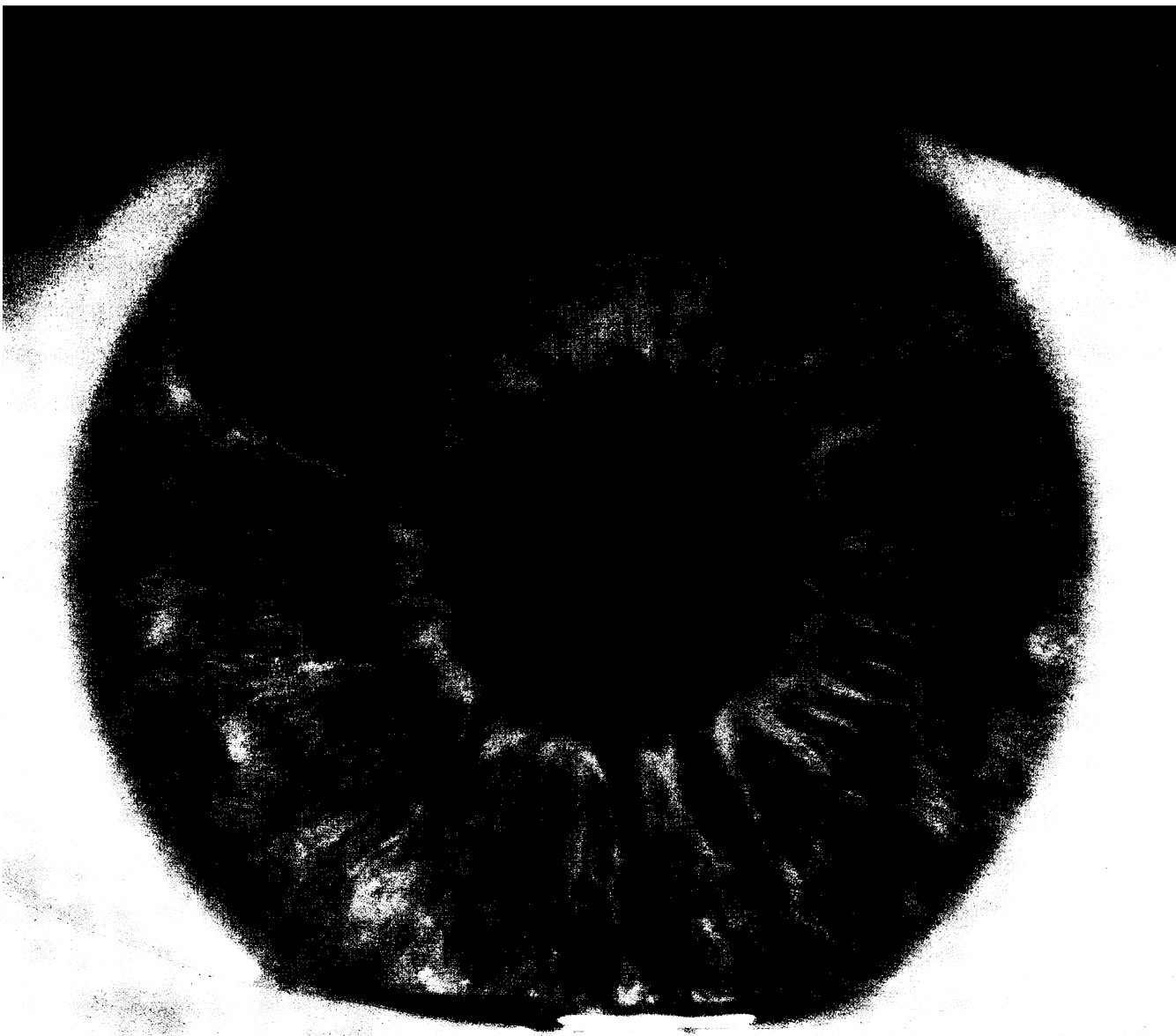

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ABRIDGED PRODUCT INFORMATION

Full prescribing information is available on request and should be consulted before prescribing.

USES
Elevated intra-ocular pressure including: ocular hypertension, chronic open-angle glaucoma (including aphakia); secondary glaucoma.

DOSAGE AND ADMINISTRATION
Usually one drop 0.25% solution in affected eye twice a day. If necessary change to one drop 0.5% solution twice a day.

CONTRA-INDICATIONS
Bronchospasm, bronchial asthma, chronic obstructive pulmonary disease. Uncontrolled cardiac failure. Hypersensitivity.

PREGNANCY
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PRECAUTIONS
'Timoptol' may be absorbed systemically.
Known contra-indications to systemic use of beta-blockers require caution. These include sinus bradycardia, greater than first-degree block; cardiogenic shock; diabetes. Cardiac failure should be adequately controlled before prescribing. History of severe cardiac disease requires monitoring for cardiac failure and checking of pulse rates. There have been reports of skin rashes and/or dry eyes associated with beta-blocking drugs; discontinuation should be considered.
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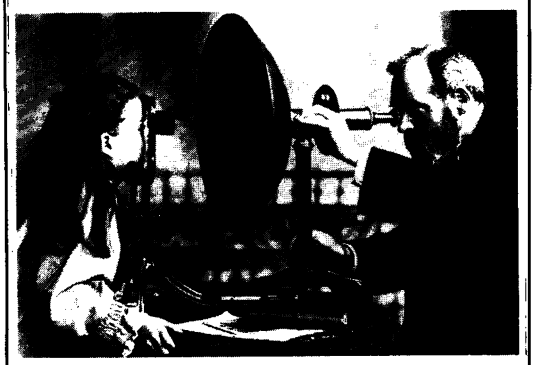

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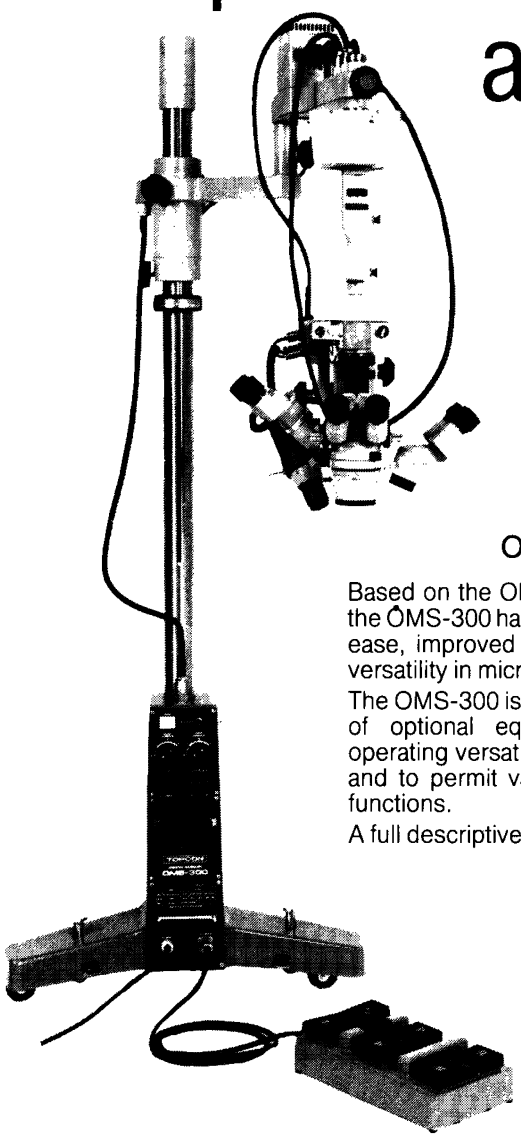

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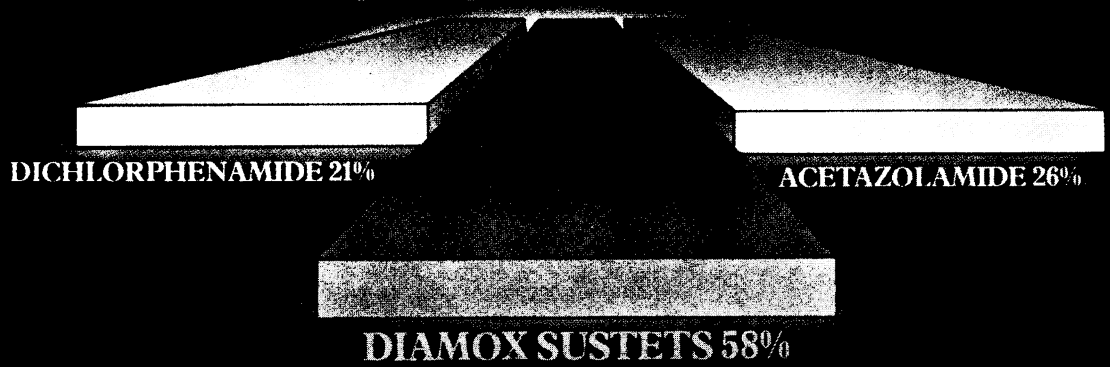

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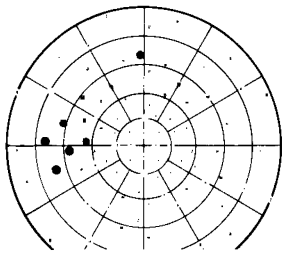

Earlier
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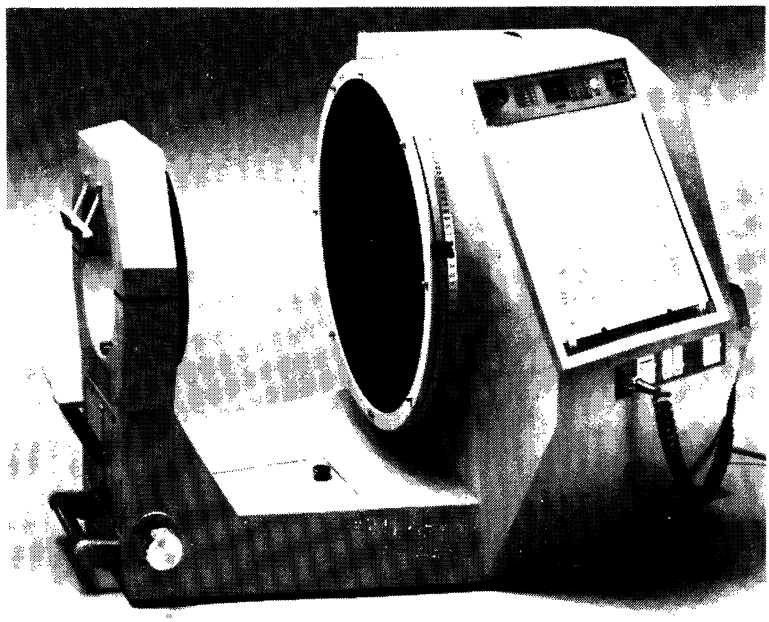

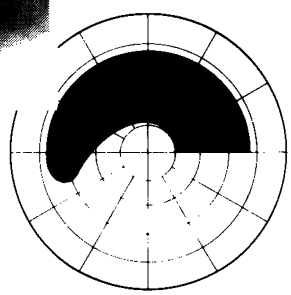

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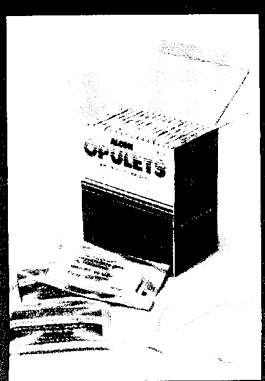

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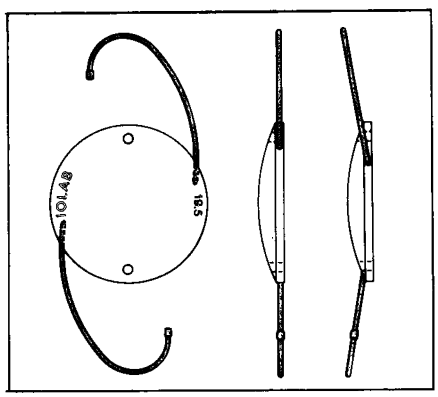

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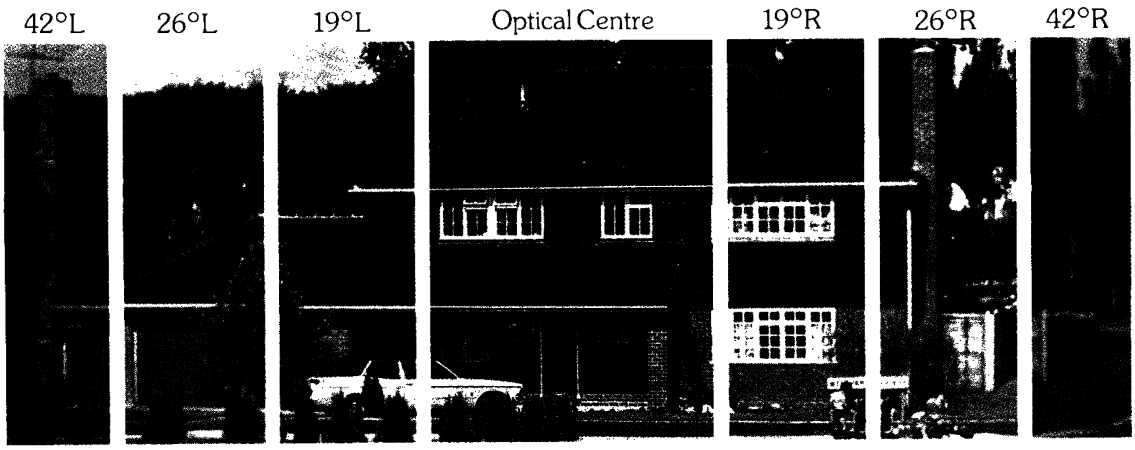

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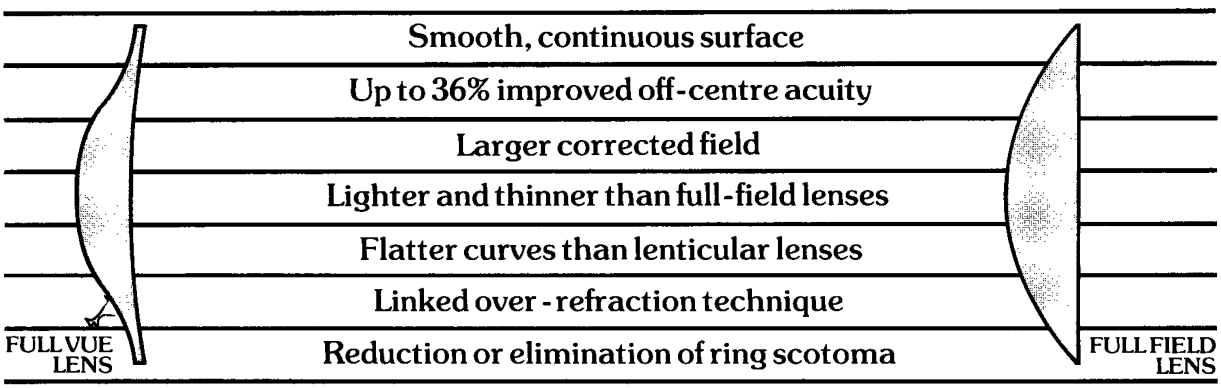

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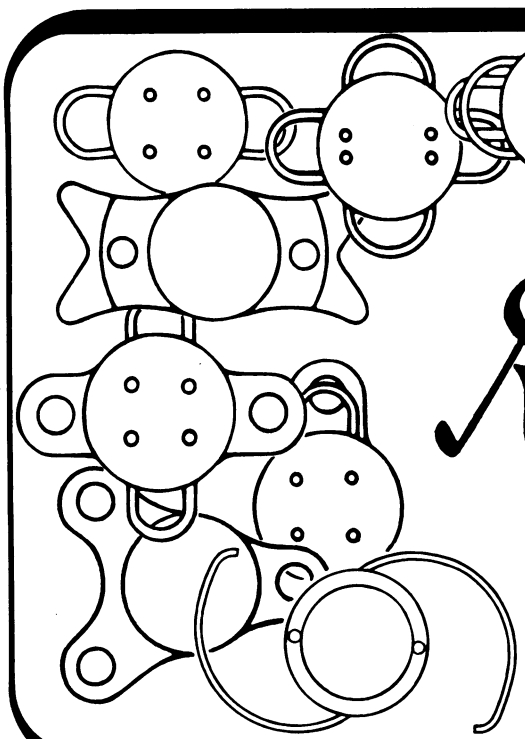

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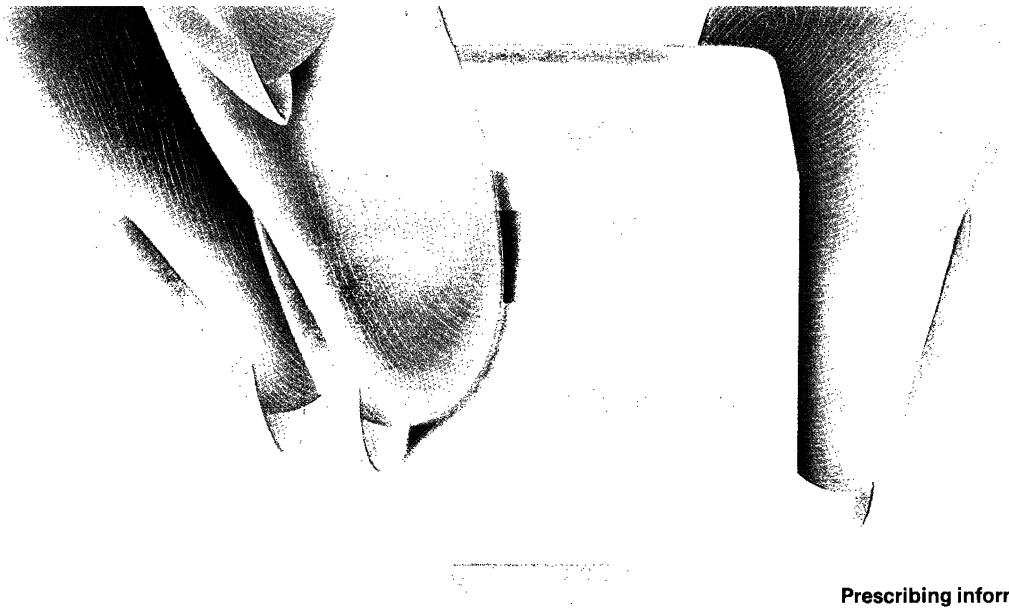

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Ramsell TG, Bartholomew RS, Walker SR. Br J Ophthalmol 1980; 64: 43-5.

Eumovate Eye Drops
(clobetasone butyrate)

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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.

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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.

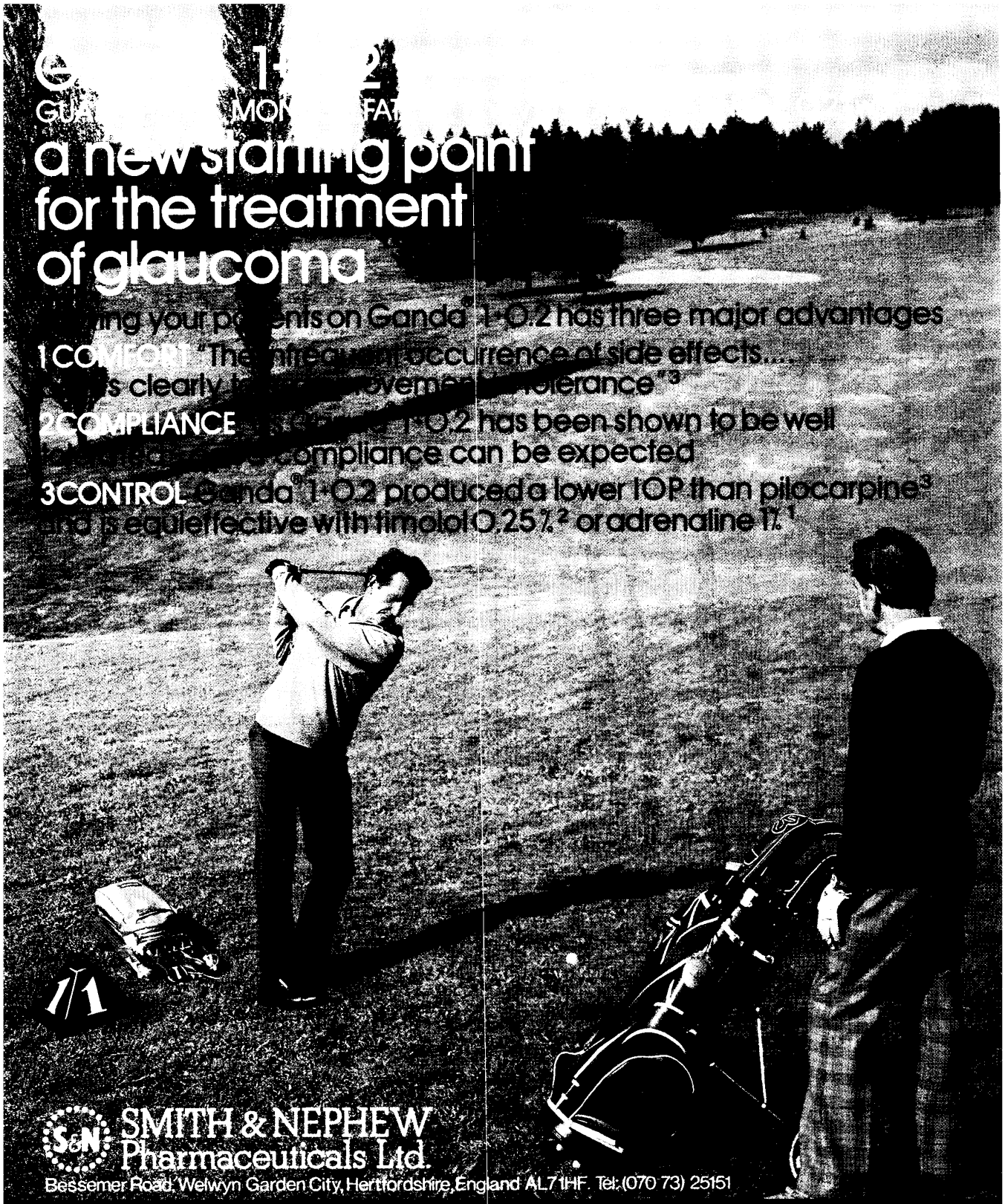
Product Licence numbers

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



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.

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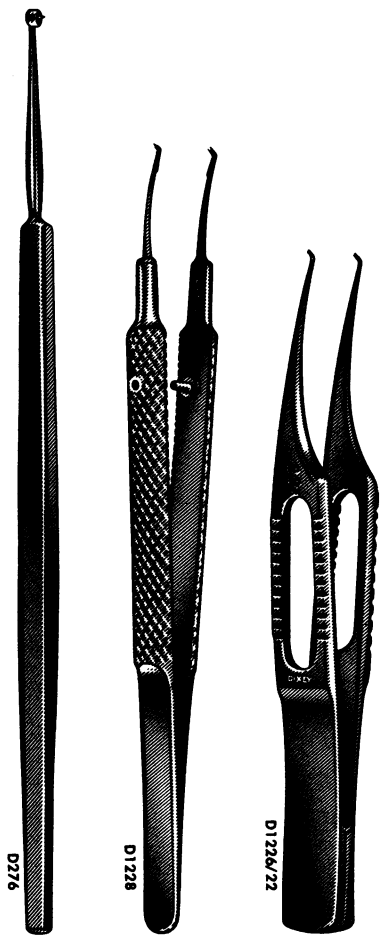

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D1228 Birks Micro 'Colibri' Forceps
D1226/22 Beaked (Colibri) Micro Forceps:

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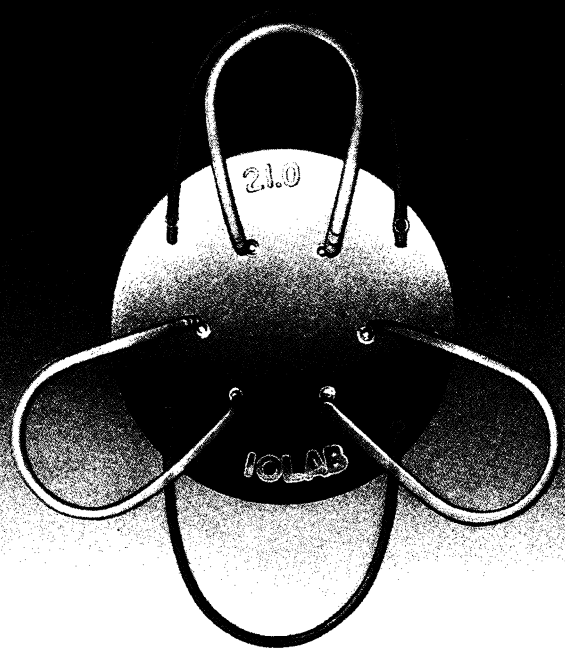

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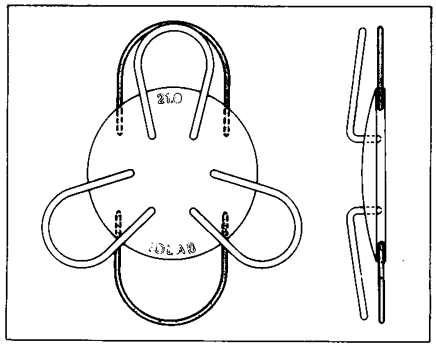

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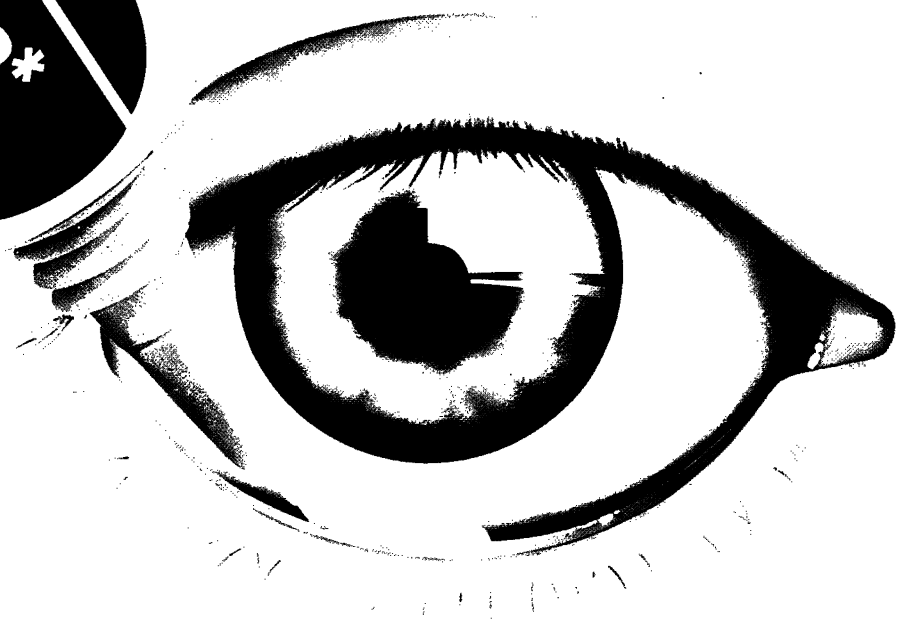

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P456-UK-May 81

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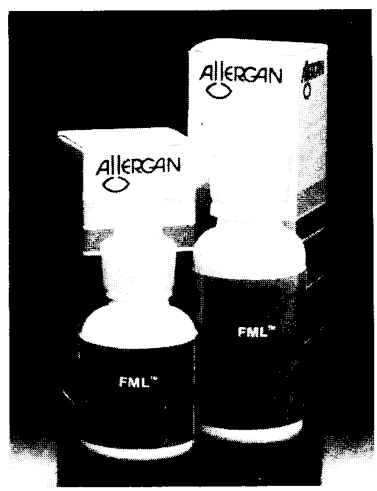

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FML

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Wellcome Wellcome Medical Division, The Wellcome Foundation Ltd., Crewe, Cheshire

1 Data on file.
*Trade Mark

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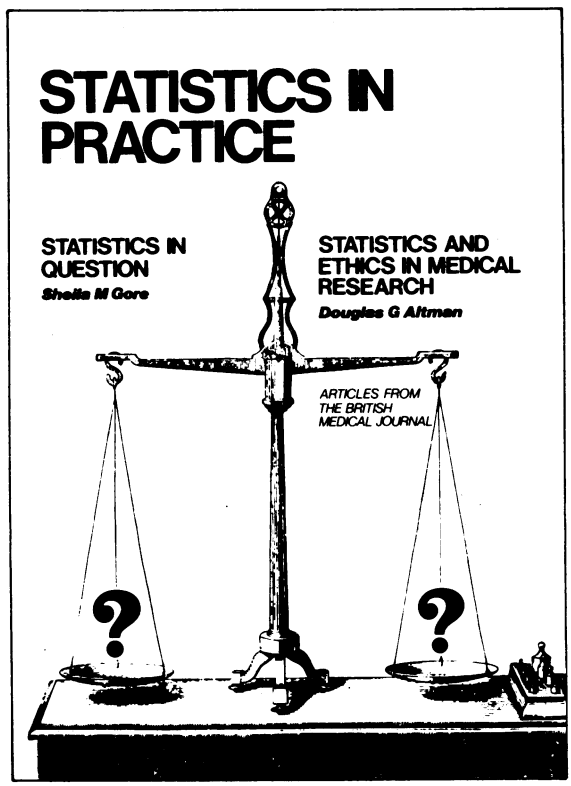

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