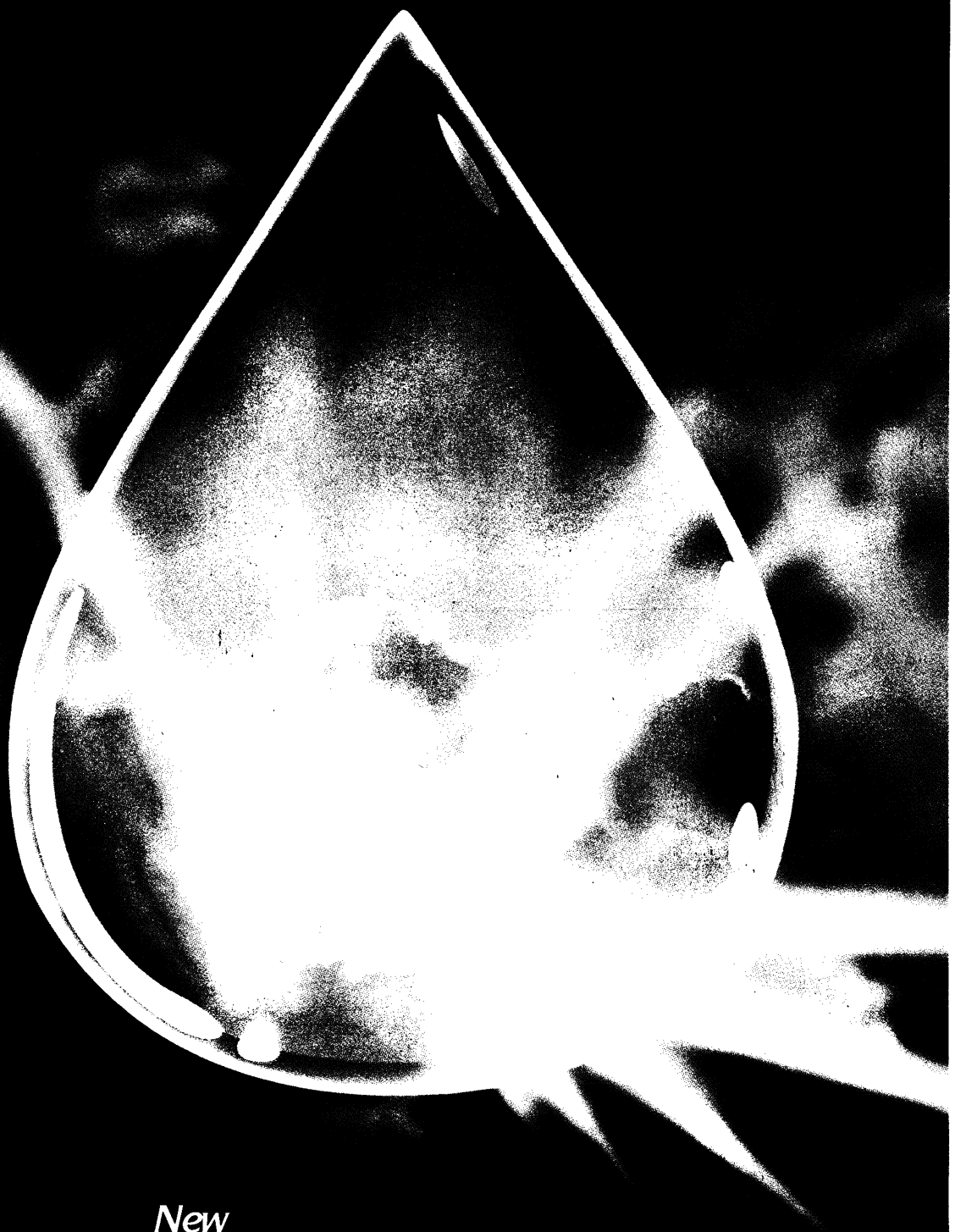
A long-awaited breakthrough in glaucoma therapy



New

THE FIRST TOPICAL CARBONIC ANHYDRASE INHIBITOR (CAI)

TRUSOPT®▽

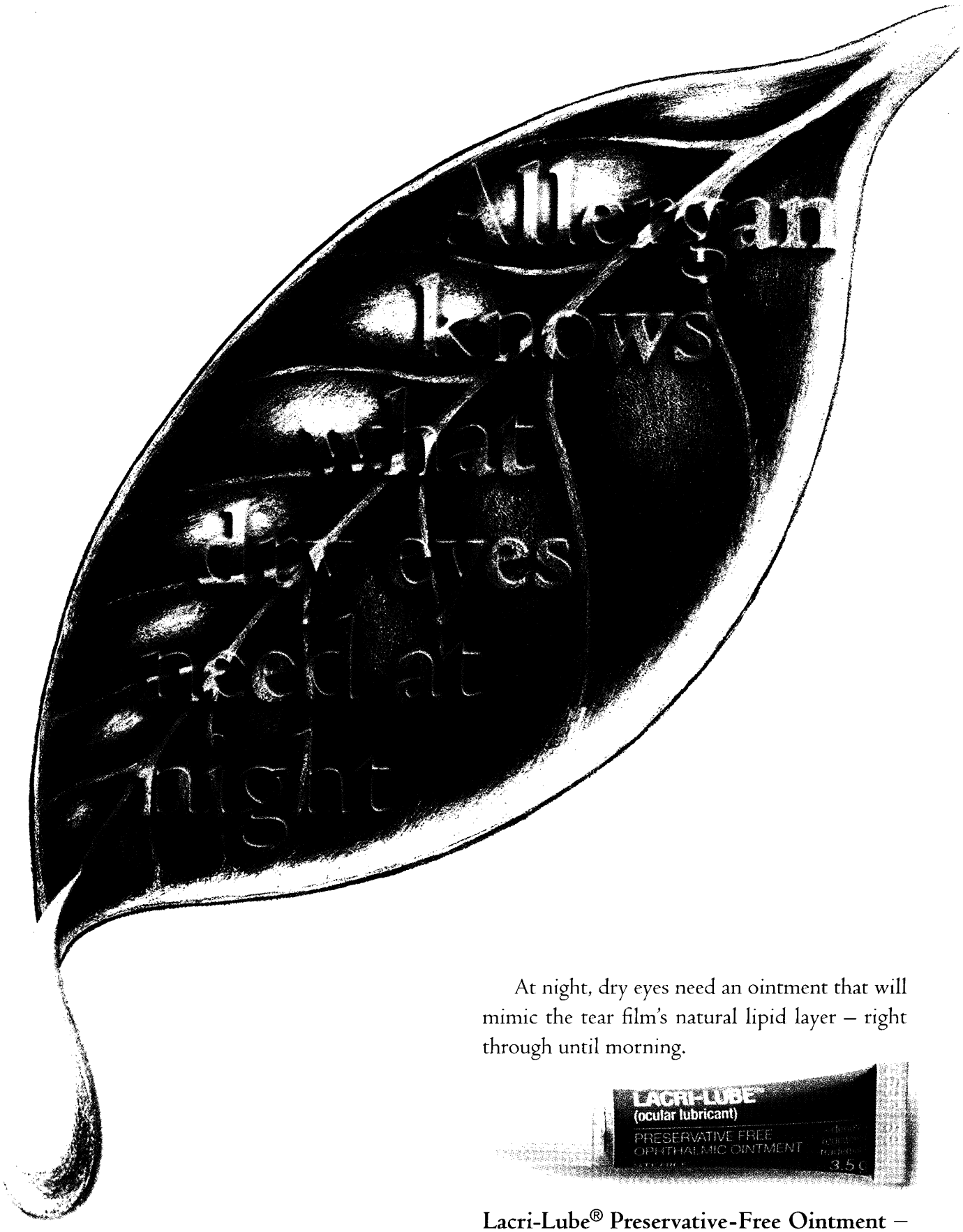
(dorzolamide hydrochloride ophthalmic solution, MSD)

CAI Therapy in a Drop

MSD
Merck Sharp & Dohme Limited
Hertford Road, Hoddesdon, Hertfordshire, EN11 9BU

03-97 TRU.96.GB.50026.J

USOPT®
rzolamide hydrochloride, MSD)
RIDGED PRODUCT
FORMATION
fer to Data Sheet before prescribing.
ESENTATION
usopt' Sterile Ophthalmic Solution is
plied as an isotonic, buffered, slightly
ous, aqueous solution of dorzolamide HCl.
h ml of 'Trusopt' 2% contains 20 mg
zolamide (22.3 mg of dorzolamide HCl).
ES
adjunctive therapy to beta-blockers or as
notherapy in patients unresponsive to beta-
kers or in whom beta-blockers are contra-
cated. For the treatment of elevated intra-
lar pressure in ocular hypertension, open-
le glaucoma, and pseudo-exfoliative
ucoma.
SAGE AND ADMINISTRATION
notherapy: One drop in the conjunctival sac
the affected eye(s) three times daily.
junctive therapy: When used with an
thalmic beta-blocker: one drop of 'Trusopt'
he affected eye(s) twice daily. *Use in children:*
ety and efficacy not established. If more
n one topical ophthalmic drug is to be used,
drugs should be administered at least 10
utes apart. When 'Trusopt' is substituted
another ophthalmic antiglaucoma agent,
ontinue the other agent after proper dosing
one day and start 'Trusopt' on the next day.
NTRA-INDICATIONS
persensitivity to any component of this
duct, severe renal impairment (creatinine
rance <30 ml/minute) or hyperchloraemic
dosis.
ECAUTIONS
with caution in patients with hepatic
airment. Patients with acute angle-closure
ucoma require therapeutic interventions in
ition to ocular hypotensive agents. The
e types of adverse reactions attributable to
emic sulphonamides may occur with a
ical administration such as 'Trusopt'. If any
s of serious reactions or hypersensitivity
ur, discontinue drug therapy. Local ocular
erse effects, primarily conjunctivitis and lid
ctions, were reported with chronic
inistration of 'Trusopt'. Some reactions
olved upon discontinuation of drug therapy.
such reactions occur, discontinuation of
usopt' should be considered. Administration
'Trusopt' and oral carbonic anhydrase
ibitors is not recommended. 'Trusopt'
uld not be administered while wearing soft
tact lenses. *Pregnancy and lactation:* Do not
'Trusopt' in pregnancy and stop therapy
mediately if pregnancy is detected. Do not
in breast-feeding mothers. *Drug*
ractions: Specific drug interaction studies
e not been performed with 'Trusopt'.
usopt' was used concomitantly with the
owing without evidence of adverse
ractions: timolol ophthalmic solution;
axolol ophthalmic solution; systemic
dications including ACE inhibitors,
cium-channel blockers, diuretics, non-
roidal anti-inflammatory drugs and
mones. 'Trusopt' is a carbonic anhydrase
ibitor and, although administered topically,
absorbed systemically. In clinical studies
usopt' was not associated with acid-base
turbances but since these disturbances
asionally occur with oral carbonic
ydrase inhibitors resulting in drug
ractions, this potential should be
sidered with 'Trusopt'.
DE EFFECTS
most frequently reported side effects in long-
m clinical studies were: bitter taste, burning
stinging, blurred vision, eye itching, tearing,
dache, conjunctivitis, eyelid inflammation,
sea, eyelid irritation, and asthenia/fatigue.
most frequent cause of discontinuation
proximately 3%) from treatment with
usopt' was drug-related ocular adverse effects,
narily conjunctivitis and lid reactions.
locyclitis and rash were reported rarely.
olithiasis has been reported once. *Laboratory*
findings: No clinically meaningful electrolyte
turbances.
CKAGE QUANTITIES AND BASIC NHS
ST
usopt' 2% Ophthalmic Solution is available
5 ml vials. £9.31.
oduct licence number: 2% Ophthalmic
ution. PL 0025/0323
oduct licence holder: Merck Sharp & Dohme
ited, Hertford Road, Hoddesdon,
rtfordshire, EN11 9BU
M Date of review: March 1996
denotes registered trademark of Merck &
, Inc., Whitehouse Station, N.J. U.S.A.



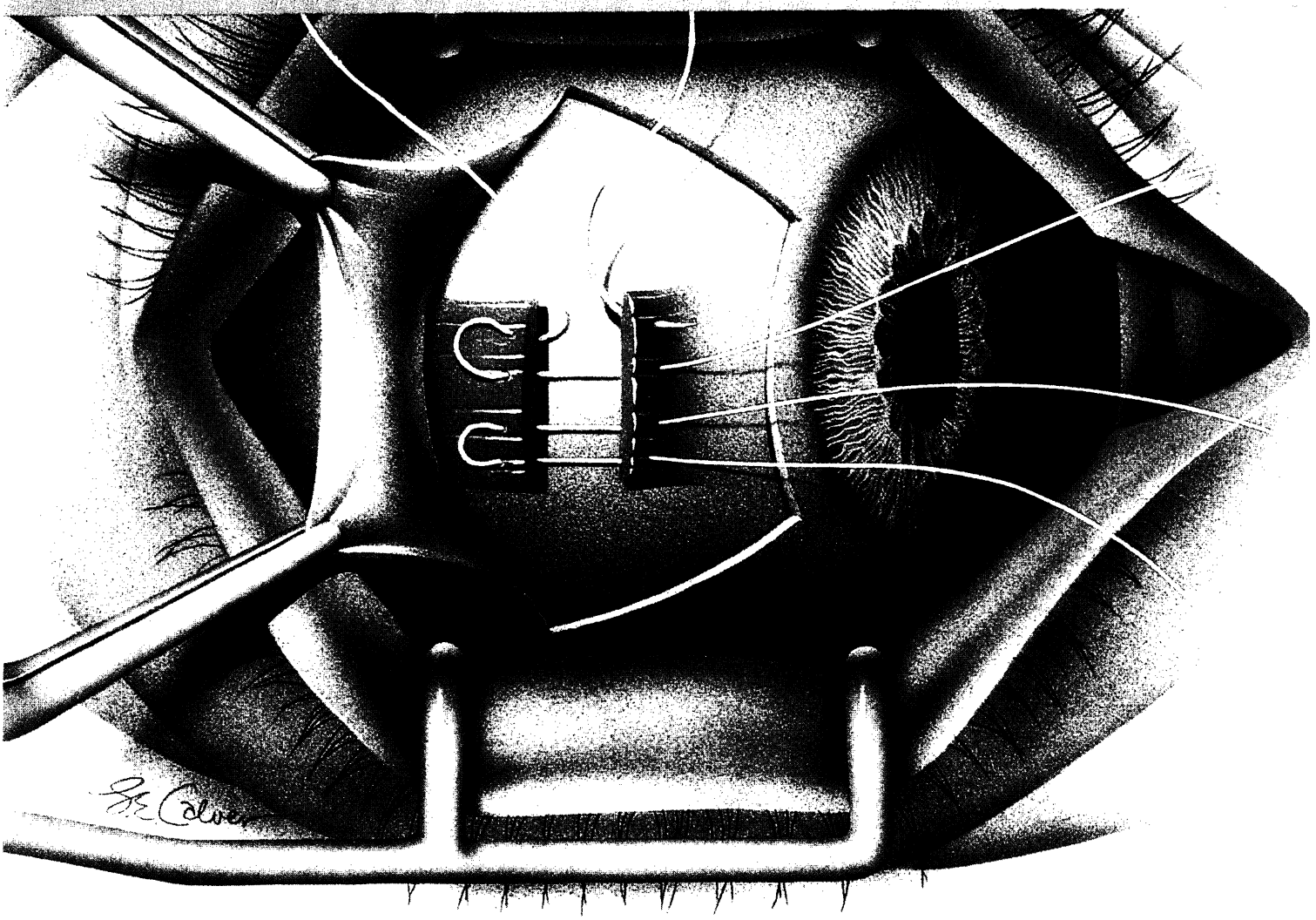
At night, dry eyes need an ointment that will mimic the tear film's natural lipid layer – right through until morning.

Lacri-Lube® Preservative-Free Ointment – Part of the Allergan Tears Range

Presentation: Off-white, smooth, preservative free sterile ophthalmic ointment containing white soft paraffin, mineral oil and lanolin alcohols. **Uses:** Useful as adjunctive therapy to lubricate and protect the eye in conditions such as exposure keratitis, decreased corneal sensitivity, recurrent corneal erosions, keratitis sicca, and also in ophthalmic and non-ophthalmic surgery. **Dosage and administration:** For topical administration. Pull lower lid down to form a pocket and apply a small amount as required. There is no variation of dose for age. **Contra-indications, warnings, etc.** Hypersensitivity to lanolin alcohols. To avoid contamination during use, do not touch tube tip to any surface. **Pharmaceutical precautions:** Store away from heat. **Legal category:** P. **Package quantities:** Lacri-Lube® is available in 3.5g and 5g ophthalmic ointment tubes. **Further information:** Dry eye symptoms commonly persist at night – Lacri-Lube® has been specifically formulated to lubricate and protect the dry eye during sleep. Lacri-Lube® can provide prophylactic ocular care during general surgical procedures as an adjunct to taping of the eyelids. **Product Licence number:** 0426/0041 **Product Licence holder:** Allergan Ltd. **Date of Preparation:** Jan 1996. **Allergan Limited,** Coronation Road, High Wycombe, Bucks HP12 3SH. 001/926a

ALLERGAN
Experts in the eyes of the world

The Alternative



ALCON'S QUALITY OPHTHALMIC NEEDLES
now available with absorbable sutures

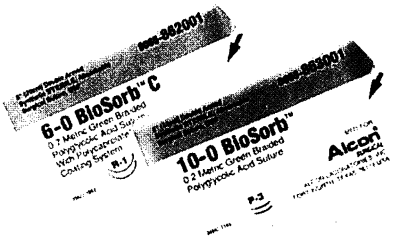
Both Biosorb™ and Biosorb™C, come with a range of specially designed Alcon needles for all your ophthalmic surgery.

Our needles incorporate the latest tip design technology to provide superior sharpness and ease of penetration. A variety of designs with varying curves and chords allow you to select the correct needle for each specific procedure.

** Trade Mark American Cyanamid Company*

NEW **BIOSORB™**
Polyglycolic acid, synthetic, absorbable suture, USP.

NEW **BIOSORB™C**
Polyglycolic acid, synthetic, absorbable suture, USP with Polycaprolate* coating system.



Alcon Surgical

Alcon Laboratories (UK) Ltd
Pentagon Park, Boundary Way, Hemel Hempstead, Herts HP2 7UD.
Tel: 01442 341234 Fax: 01442 341200

HELP A CHILD TO SEE/CHILDREN'S EYE GROUP FELLOWSHIP

A fund has been created to provide money for a travelling fellowship. The award is made annually except where there are insufficient applications deemed appropriate by the adjudicators.

The adjudicators will be the organisers of the Children's Eye Group and two representatives of the Child Health Research Appeal. The applications will be reviewed by the four adjudicators and a consensus as to the most suitable will be obtained by the current year's organiser of the Children's Eye Group.

Applications may be submitted by anyone interested in children's eye problems, but must have a clearly defined and practical aim. Five copies of a detailed itinery, plan and costings together with the applicants C.V. should be submitted to:-

Mr M. P. Clarke
Consultant Ophthalmologist
Claremont Wing Eye Centre
Royal Victoria Infirmary
Queen Victoria Road
Newcastle upon Tyne
NE1 4LP

by Monday 10th March 1997.

The award will cover travel and travel insurance. Subsistence and other expenses will be allowed at rates to be agreed. The total value of the award will be about £2000.

The award will be made at the Children's Eye Group Meeting in March 1997. The recipient of the award must prepare a report to be read at the Children's Eye Group meeting in 1998.