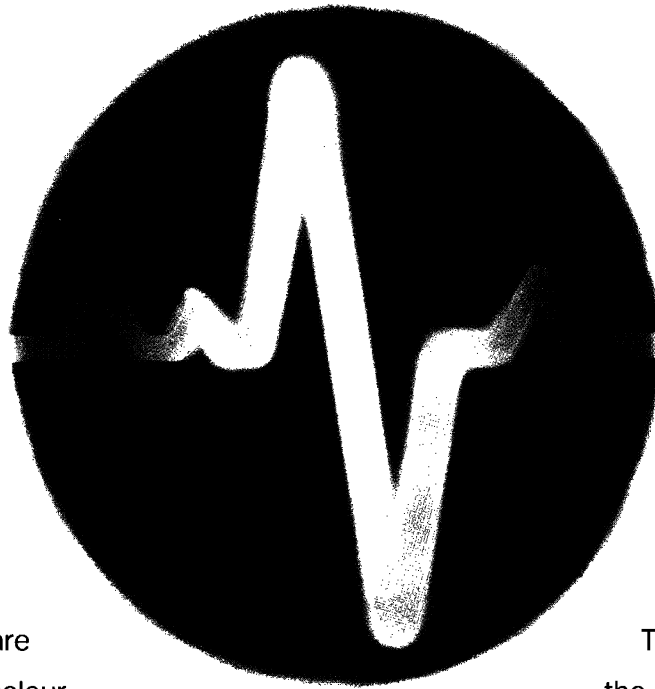
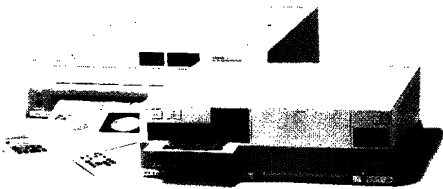


Mitsubishi is making a big impression on the medical market.



Mitsubishi video printers are the easiest way to make colour prints from medical imaging equipment.

They are faster and more economical than conventional film.

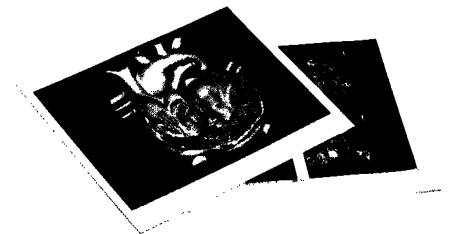


And they are compatible with a variety of medical video

sources: including cardiograms, ultra sound systems, X-ray machines, image intensifiers, gamma cameras, optical microscopes and nuclear medicine equipment.

The CP100B delivers a high-resolution colour print in just 90 seconds. There are 64 levels of grey scale and the RAM memory stores images of up to 640 pixels.

The new CP200B offers the largest prints obtainable: up to 240 x 180mm. Its Quad



Picture facility also gives 4 images on a single print.

Ask Mitsubishi for details about the major contribution that video printers can make to investigative medicine.

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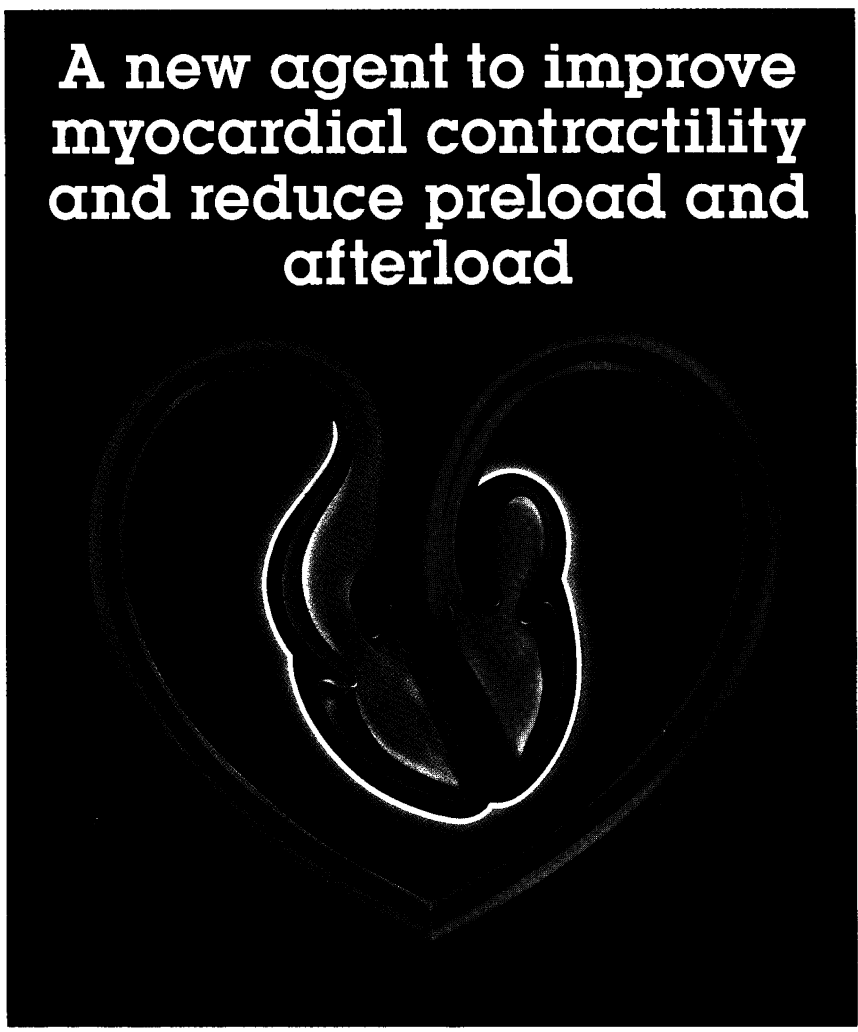
Abridged Prescribing Information

Perfan Injection

Presentation: Perfán Injection is 5mg/ml solution of enoximone presented in ampoules containing 20ml Perfán Injection is a sterile clear yellow solution, pH approximately 12.0 for intravenous administration which must be diluted before use. Containers of diluted product are intended for single use only. **Uses:** Actions: Perfán has positive inotropic and vasodilator properties. Indications: Perfán Injection is indicated for the treatment of congestive heart failure (typically where cardiac output is reduced and filling pressures increased) in patients who require intravenous therapy and who can be closely monitored. **Dosage and Administration:** Perfán Injection must be diluted before use. Diluents should be used immediately and any unused portion discarded. **Dilution:** The pH of Perfán Injection is approximately 12.0. Perfán Injection must be diluted with an equal volume of 0.9% Sodium Chloride Injection or Water for Injections before administration. Do not use more dilute solutions or other diluents particularly dextrose injection, as crystal formation may occur. Only plastic containers or syringes should be used for dilutions. **Administration:** The following procedure is recommended for the administration of the diluted Perfán Injection. **Initial Therapy:** Therapy should be initiated with a dose of 0.5-3mg/kg given as a slow injection, not faster than 12.5mg/min. Further doses of 0.5mg/kg may be given similarly every 30 minutes until a satisfactory response is achieved or a total initial dose of 3.0mg/kg is reached. Alternatively treatment may be initiated as an infusion at a rate of 90 micrograms/kg/minute administered over 10 to 30 minutes until the required haemodynamic response is achieved. **Maintenance Therapy:** To maintain the effects of Perfán Injection the initial dose (not more than 3.0mg/kg) may be repeated as required every 3-6 hours and adjusted according to the response of the patient. Alternatively a continuous or intermittent infusion at a rate of 5 to 20 micrograms/kg/minute may be instituted. Total dose over 24 hours should not normally exceed 24.0mg/kg. In patients with renal impairment the dosage or dosage frequency may need to be reduced. **Precautions:** should be taken to avoid venous extravasation during administration. It should be noted that the initial haemodynamic response determines the subsequent rate of administration as well as the duration of treatment. **Use in children:** Safety and effectiveness in children have not been established. **Contra-indications:** **Warnings, etc.** **Contra-indications:** Perfán Injection is contra-indicated in patients with a known hypersensitivity to Perfán or its components. **Use in pregnancy and lactation:** There is no evidence of animal teratogenicity with oral therapy. There are no adequate and well-controlled studies in pregnant women. Perfán Injection should be used during pregnancy only if the potential benefit justifies the potential risk. It is not known whether the drug is excreted in human milk. Caution should be exercised when Perfán Injection is administered to a nursing mother. **Precautions:** Perfán Injection should be used cautiously when heart failure is associated with hypertrophic cardiomyopathy stenotic or obstructive valvular disease or other outlet obstruction. During treatment with Perfán Injection the following parameters should be monitored: blood pressure, heart rate, ECG, central venous pressure, and fluid and electrolyte status. Monitoring of platelet counts and hepatic enzyme levels is recommended. **Side Effects:** Whilst Perfán has not been shown to be arrhythmogenic in electrophysiological studies, ectopic beats have been observed in some patients during or after Perfán administration. Ventricular tachycardias or supraventricular arrhythmias have been reported less frequently and are more likely to occur in patients with pre-existing arrhythmias. Perfán may induce hypotension as a consequence of its vasodilator activity. Temporary discontinuation of treatment or a reduction in dosage will usually reverse these conditions. Other side effects reported include headache, insomnia, nausea and/or vomiting, and diarrhoea. Isolated cases of chills, oliguria, fever, urinary retention, and upper and lower extremity pain have also been reported. **Pharmaceutical Precautions:** Store ampoules in a cold place (36-46°F / 2-8°C). Use only 0.9% Sodium Chloride Injection or Water for Injections as diluents. After dilution, use immediately and discard unused portion. If immediate administration is not possible, do not refrigerate diluents or crystals. Formation may occur. Do not administer unless diluted product is a clear yellow solution. Other drugs should not be mixed in the same container as Perfán Injection. **Legal category:** POM. **Package quantities:** Ampoules of 20ml in cartons of 10 ampoules. **Product licence no.:** PL 4425-0086. **Name and Address of Licence Holder:** Merrell Dow Pharmaceuticals Ltd, Sharncliffe Park, Fairfield Avenue, Staines, Middlesex TW18 4SX. **NHS Cost:** carton of 10 ampoules £154.00. See full prescribing information before administering this product. **Date of Preparation:** December 1986. **References:** 1. Herriman HC et al. *Circulation* 1987; 75: 1214-1221. 2. Crawford MB. *Am J Cardiol* 1987; 60: 420-45C. 3. Amin DK et al. *Am Heart J* 1984; 106: 1295-1292. Further information is available on request.

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