

rescribing Notes.

Special reporting to CSM

consult data sheet before rescribing.

Ise: Hypertension when standard terapy is ineffective or inapproriate. Congestive heart failure adjunctive therapy).

'resentation: Tablets containing .5mg, 5mg, 10mg or 20mg lisino-ril ('Zestril').

losage and administration:
lypertension – initially 2.5mg
.3ily, a 2.5mg dose seldom
chieves a therapeutic response,
djust dose according to response,
laintenance usually 10-20mg
nce daily. Maximum is 40mg
aily. Diuretic-treated patients – if
ossible stop diuretic 2-3 days
efore starting 'Zestril'. Resume
juretic later if desired.

, engestive heart failure (adjuncve therapy) – initially 2.5mg daily hospital under close medical upervision, increasing to 5-20mg nce daily according to response, npaired renal function – may equire a lower maintenance dose. Zestril' is dialysable. Elderly aktients – no change from stanard recommendations.

ontraindications: Pregnancy ensitivity to 'Zestril'. Patients reacng with angioneurotic oedema to inction is recommended. Renal sufficiency; renovascular hypernsion; surgery/anaesthesia; essibility of hypotension espec-.lly in ischaemic heart disease nd cerebrovascular disease. ombination with antihypertenves may increase hypotensive fect. Sometimes increased blood rea and creatinine and/or cases I renal insufficiency if given with uretics. Minimises thiazideduced hypokalaemia and hyperricaemia. Potassium supplements otassium-sparing diuretics and otassium - containing salt subitutes not recommended. Indorethacin may reduce hypotensive ffect. Possible reduced response

Afro-Caribbean patients. Use ith caution in breastfeeding others. Do not use in aortic enosis or outflow tract obstruction or cor pulmonale. Monitor hium serum levels if lithium salts dministered.

Ideeffects: Dizziness, headache, iarrhoea, fatigue, cough and ausea. Less frequently, rash and sthenia. Rarely, angioneurotic adema and other hypersensitivity actions; renal failure; sympomatic hypotension (especially if blume-depleted); severe hypotenon (more likely if severe heart ilure); palpitation; hyperkalaemia; reases in liver enzymes and rum bilirubin (usually reverbleon discontinuation of 'Zestrii') and impotence.

roduct licence numbers and neic NMS cost: 'Zestril' 2.5mg 19/0208) 28 tablets, £7.84. 5mg 19/0204) 28 tablets, £9.83, 10mg 19/0205) 28 tablets, £12.13, 20mg 19/0205) 28 tablets, £20.96.

## lestril' is a trademark.

Further information is available on request.





## Everything is beautiful!

Everyone has a certain zest for life. 'Zestril' lets your hypertensive patients enjoy their's. 'Zestril' is an effective ACE inhibitor from ICI. 'Zestril' is taken once daily, so encouraging good patient compliance. A valuable aspect

of 'Zestril' therapy is that it is well tolerated, and suitable for a wide range of hypertensive patients (for whom conventional therapy is ineffective or inappropriate).

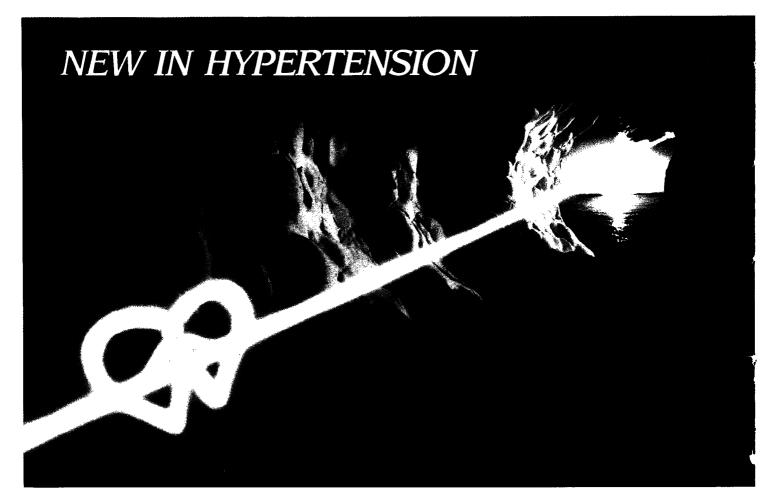
Your hypertensive patients will appreciate

the convenient dosage and good patient tolerability of 'Zestril'. It's a therapy they'll find easy to live with - one which helps retain their zest for life. Letting them enjoy 'everything that's beautiful' in life.

## lisinopril ICI



Once daily antihypertensive therapy which helps retain that zest for life.



## Cardura can improve two major coronary risk factors

There are compelling reasons to consider Cardura first in mild to moderate hypertension.

Cardura in a single daily dose gives smooth and sustained control of blood pressure.<sup>1,2</sup>

Cardura has been shown to reduce blood cholesterol, a second major coronary risk factor.<sup>3</sup> In over 6,000 patients Cardura has been shown to have a predictable and acceptable side effect profile, and no unwanted metabolic effects have been observed to date.<sup>4</sup>

Unlike many of the newer antihypertensives, Cardura is indicated for first-line use.<sup>5</sup>



Prescribing information: ▼ Indications: First-line treatment of hypertension and may be used as the sole agent to control blood pressure in the majority of patients, including those with asthma, gout and the elderly, Dosage: Cardura is used in a once daily regimen. The initial dose is 1 mg. Dosage may then be increased after 1 or 2 weeks of therapy to 2 mg and thereafter, if necessary, to 4 mg. The majority of patients who respond to Cardura will do so at a dose of 4 mg or less. Dosage can be further increased, if necessary, to 8 mg or the maximum recommended dose of 16 mg. Use in children: Not recommended. Contra-indications: Sensitivity to Cardura and related quinazolines. Lactation. Use during pregnancy: Cardura should only be used during pregnancy when, in the opinion of the physician, potential benefit outweighs potential risk. Side effects: Postural hypotension, rarely

associated with fainting. Other reactions include: dizziness, vertigo, headache, fatigue, asthenia ar oedema. Further information: In short-term studies, Cardura produced a modest reduction plasma total cholesterol and LDL cholesterol. Basic NHS Cost: 1mg tablet (PL 57/0276) Calendar pac of 28, £9.60; 2mg tablet (PL 57/0277) Calendar pack of 28, £12.80; 4mg tablet (PL 57/0278) Calendar pack of 28, £16.00. \*Trade Mark. Further information on request. References: 1. Smyth P et al. Eur J Clin Pharmacol 1988; 34: 613-618. 2. Frick MH et al. Br J Clin Pharmacol 1986, 21 (Suppl 1): 555-62S. 3. Cubeddu LX et al. Am J Hyperten 1988; 1: INVICEY: 158-167. 4. Data on file, Pfizer Inc 1987. 5. Data sheet. Invicta\* Pharmaceuticals. A division of Pfizer Limited, Sandwich, Kent C113 9NJ.