Evomatic®
4000/8000 XT

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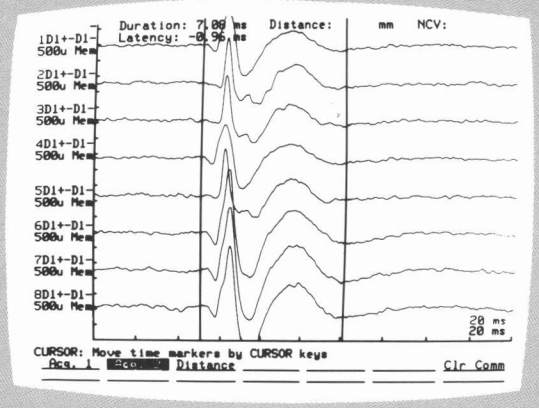
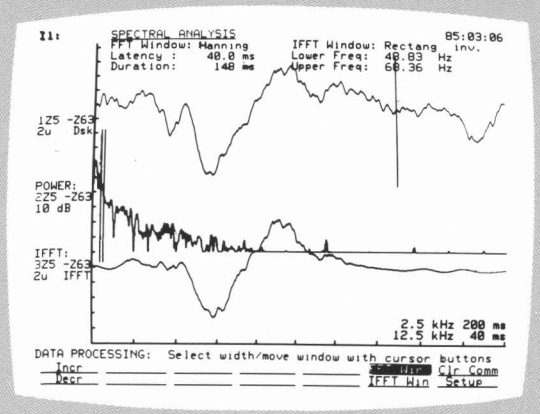


Step function with consecutive responses



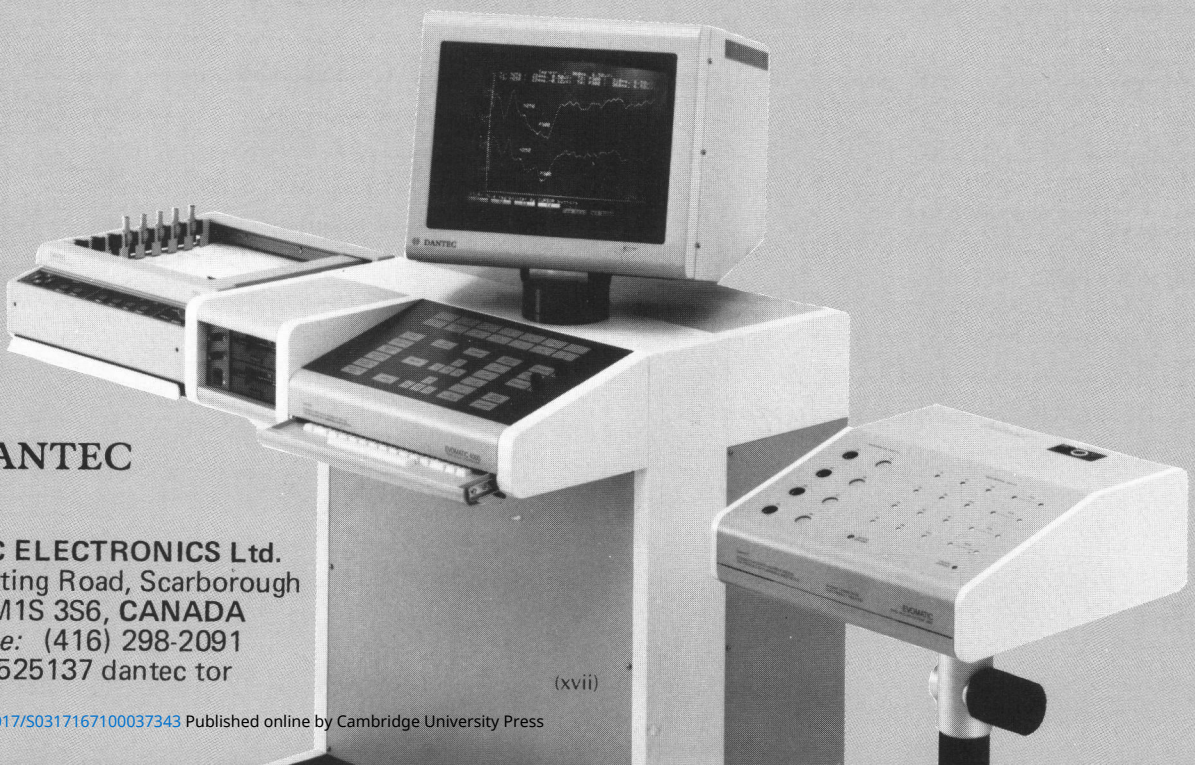
Interactive Fast Fourier Transformation

16S01 EMG Module

- ★ Signal-trig and free-run
- ★ Pre-delay and post-delay
- ★ Step function
- ★ Train stimulation
- ★ Automatic decrement display and calculation
- ★ Time-shifted superimpose display mode

16S02 Advanced Data Processing

- ★ Digital filters without phase shift
- ★ Fast Fourier Transformation (displaying amplitude spectra, power spectra and phase spectra)
- ★ Automatic FFT Mode
- ★ Interactive FFT Mode
- ★ Correlation Analysis



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NEUROLOGIST

Trail Regional Hospital
Trail, British Columbia, Canada

is seeking a fully qualified Neurologist for unopposed practice. Service area for Neurologist approx. 75,000 - 80,000. F.R.C.P.(C) a necessity. Complete facilities including EEG, Angiography, Nuclear Medicine and newly acquired CT Scanner. Superb recreational and educational facilities.

Apply to:

K.B. LeRose, M.D., F.R.C.S., F.A.C.S.
Chairman, Recruitment Committee
Trail Regional Hospital
Trail, B.C. V1R 4M1
Telephone: (604) 368-3311

NEUROMUSCULAR FELLOWSHIP

NEUROMUSCULAR FELLOWSHIP, at least 1 year, beginning in July 1988. Comprehensive experience in clinical, electrophysiological, morphological and animal research aspects of neuromuscular disease at University and Victoria Hospitals. Salary through grant support based on research project. Send curriculum vitae and three references to:

Dr. A.F. Hahn
Department of Clinical Neurological Sciences
Victoria Hospital
P.O. Box 5375
London, Ontario, Canada N6A 4G5

NEURO-ONCOLOGY FELLOWSHIP

A clinical fellowship in neuro-oncology is available for neurologists and neurosurgeons. The program offers comprehensive training in the diagnosis and management of primary brain tumor, neurological complications of cancer and pain due to cancer. A second research year will be encouraged.

Please submit curriculum vitae and three letters of reference to:

J. Gregory Cairncross, MD.
The London Regional Cancer Centre
391 South Street
London, Ontario, Canada
N6A 4G5

NEUROPATHOLOGIST

University Hospital
University of Western Ontario

Applications are invited for position as Neuropathologist, University Hospital, London, Ontario, Canada. Applicants should have interest in both diagnostic neuropathology and research, preferably in the area of mechanisms and pathogenesis of Dementia. The Hospital has a widely recognized clinical neurological service and active research programs in neurological sciences. A cross-appointment and research facilities in the Robarts Institute are available for the appropriate candidate.

Academic appointment is in the Department of Pathology, University of Western Ontario; salary and rank is dependent on qualifications.

Applicants must be Canadian citizens/landed immigrants, or eligible for immigration to Canada and must have qualifications permitting medical registration in the Province of Ontario.

Address letters of enquiry with curriculum vitae and the names of three references to:

Robert A. Goyer, M.D.
Chairman
Department of Pathology
Health Sciences Center
The University of Western Ontario
London, Ontario, Canada N6A 5C1

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NEUROSURGERY CLINICAL AND RESEARCH FELLOW

Full-time position available for one year beginning July, 1988 for clinical and research experience. Candidates must already have completed a neurosurgical training program.

Reply with curriculum vitae and names of two references to:

C.H. Tator, M.D., Ph.D., F.R.C.S.(C)
Division of Neurosurgery and
Playfair Neuroscience Unit
Toronto Western Hospital
399 Bathurst Street, ECW Rm. 4-034
Toronto, Ontario
M5T 2S8

NEUROPATHOLOGIST

Applications are invited for an appointment as a staff neuropathologist at The Hospital for Sick Children which is affiliated with the University of Toronto. The applicant must be a neuropathologist and committed to research. The incumbent will be expected to compete for grant support to extend his/her research endeavors. Since research interests in molecular biology are considered essential, additional training could be arranged for the successful applicant willing to pursue this goal. Experience in pediatric neuropathology would be an asset.

Salary and academic appointment will be commensurate with experience and qualifications. The physician must be certified or eligible for certification by the Royal College of Physicians and Surgeons of Canada.

In accordance with Canadian immigration regulations, the advertisement is directed in the first instance, to Canadian citizens and permanent residents.

Please reply with curriculum vitae and three letters of reference to: Dr. Laurence E. Becker, Department of Pathology (Neuropathology), The Hospital for Sick Children, Room 3120, 555 University Avenue, Toronto, Ontario M5G 1X8.

DIRECTOR

HELEN SCOTT PLAYFAIR MEMORIAL NEUROSCIENCE UNIT

The University of Toronto and the Toronto Hospital are seeking a Director for the Helen Scott Playfair Memorial Neuroscience Unit. The successful candidate will be an internationally recognized neuroscientist who will qualify for the rank of Professor. The Playfair Neuroscience Unit is housed in a large teaching hospital and comprises a group of basic and clinical neuroscientists. The individual should personally be conducting research in a major area of current concern in neuroscience. Salary to be negotiated. The University of Toronto encourages both men and women to apply for positions. Applications, including a current curriculum vitae, should be directed to Dr. John H. Dirks, Dean, Faculty of Medicine, University of Toronto, Toronto, Ontario M5S 1A8. In accordance with Canadian immigration requirements, this advertisement is directed to Canadian citizens and permanent residents.

STROKE RESEARCH FELLOW

Full-time position available for one year beginning in July 1988

For clinical investigation in the
Acute Stroke Unit and
Carotid Doppler Laboratory

Reply with curriculum vitae and the names of two references to:

J.W. NORRIS, MD, FRCP
STROKE RESEARCH UNIT
SUNNYBROOK MEDICAL CENTRE
(University of Toronto)
2075 Bayview Avenue
Toronto, Ontario, Canada M4N 3M5

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℞**LIORESAL®**
(baclofen)
Muscle relaxant
Antispastic agent

INDICATIONS AND CLINICAL USES
Alleviation of signs and symptoms of spasticity resulting from multiple sclerosis. Spina cord injuries and other spinal cord diseases.

CONTRAINDICATIONS
Hypersensitivity to LIORESAL.

WARNINGS
Abrupt Drug Withdrawal: Except for serious adverse reactions, the dose should be reduced slowly when the drug is discontinued to prevent visual and auditory hallucinations, confusion, anxiety with tachycardia and sweating, and worsening of spasticity.

Impaired Renal Function: Caution is advised in these patients and reduction in dosage may be necessary.

Stroke: Has not been of benefit and patients have shown poor tolerability to the drug.

Pregnancy and Lactation: Not recommended as safety has not been established. High doses in rats and rabbits are associated with an increase of abdominal hernias and ossification defects in the fetuses.

PRECAUTIONS
Not recommended in children under 12 as safety has not been established.

Because sedation may occur, caution patients regarding the operation of automobiles or dangerous machinery, activities made hazardous by decreased alertness, and use of alcohol and other CNS depressants.

Use with caution in spasticity that is utilized to sustain upright posture and balance in locomotion, or whenever spasticity is utilized to obtain increased function, epilepsy or history of convulsive disorders (clinical state and EEG should be monitored), peptic ulceration, severe psychiatric disorders, elderly patients with cerebrovascular disorders, and patients receiving antihypertensive therapy.

ADVERSE REACTIONS
Most common adverse reactions are transient drowsiness; dizziness, weakness and fatigue. Others reported:

Neuropsychiatric: Headache, insomnia, euphoria, excitement, depression, confusion, hallucinations, paresthesia, muscle pain, tinnitus, slurred speech, coordination disorder, tremor, rigidity, dystonia, ataxia, blurred vision, nystagmus, strabismus, miosis, mydriasis, diplopia, dysarthria, epileptic seizures.

Cardiovascular: Hypotension, dyspnea, palpitation, chest pain, syncope.

Gastrointestinal: Nausea, constipation, dry mouth, anorexia, taste disorder, abdominal pain, vomiting, diarrhea, and positive test for occult blood in stool.

Genitourinary: Urinary frequency, enuresis, urinary retention, dysuria, impotence, inability to ejaculate, nocturia, hematuria.

Other: Rash, pruritus, ankle edema, excessive perspiration, weight gain, nasal congestion.

Some of the CNS and genitourinary symptoms reported may be related to the underlying disease rather than to drug therapy.

The following laboratory tests have been found to be abnormal in a few patients receiving LIORESAL: SGOT, alkaline phosphatase and blood sugar (all elevated).

SYMPTOMS AND TREATMENT OF OVERDOSAGE
Signs and Symptoms: Vomiting, muscular hypotonia, hypotension, drowsiness, accommodation disorders, coma, respiratory depression, and seizures.

Co-administration of alcohol, diazepam, tricyclic anti-depressants, etc., may aggravate the symptoms.

Treatment: Treatment is symptomatic. In the alert patient, empty the stomach (induce emesis followed by lavage). In the obtunded patient, secure the airway with a cuffed endotracheal tube before beginning lavage (do not induce emesis).

Maintain adequate respiratory exchange; do not use respiratory stimulants. Muscular hypotonia may involve the respiratory muscles and require assisted respiration. Maintain high urinary output. Dialysis is indicated in severe poisoning associated with renal failure.

DOSAGE AND ADMINISTRATION
Optimal dosage of LIORESAL requires individual titration. Start therapy at a low dosage and increase gradually until optimum effect is achieved (usually 40-80 mg daily).

The following dosage titration schedule is suggested:

5 mg t.i.d. for 3 days
10 mg t.i.d. for 3 days
15 mg t.i.d. for 3 days
20 mg t.i.d. for 3 days

Total daily dose should not exceed a maximum of 20 mg q.i.d.

The lowest dose compatible with an optimal response is recommended. If benefits are not evident after a reasonable trial period, patients should be slowly withdrawn from the drug (see Warnings).

AVAILABILITY
LIORESAL (baclofen) 10 mg tablets: White to off-white flat-faced, oval tablets with GEIGY monogram on one side and the identification code 23 below the monogram. Fully bisected on the reverse side.

LIORESAL D.S. 20 mg tablet: White to off-white capsule-shaped, biconvex tablets. Engraved GEIGY on one side and GW with bisect on the other.

Available in bottles of 100 tablets.

Product Monograph supplied on request.

References:
1. Cartlidge, N.E.F., Hudgson, P., Weightman, D.: A comparison of baclofen and diazepam in the treatment of spasticity. J Neurol. Sci. 23: 17-24 (1974).
2. Young, R., Delwaide, P.: Spasticity. New England Journal of Medicine 304: 28-33 & 96-99 (1981).
3. From, A., Heltberg, A.: A double blind trial with baclofen and diazepam in spasticity due to multiple sclerosis. Acta Neurol. Scandinav. 51: 158-166, (1975).

See pages x, xi

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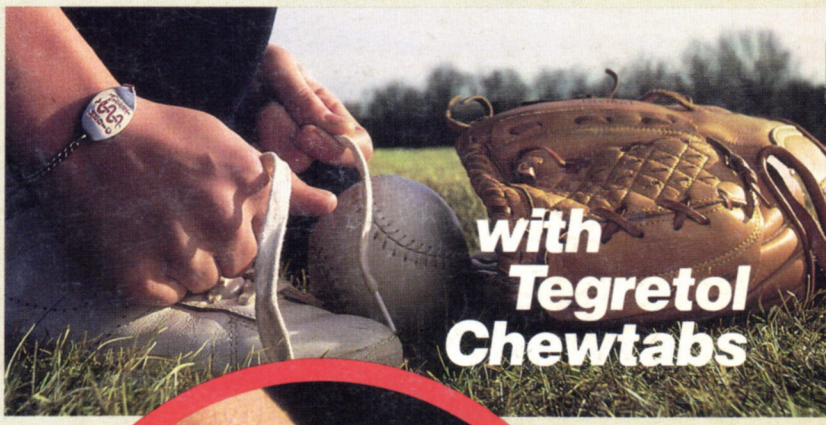
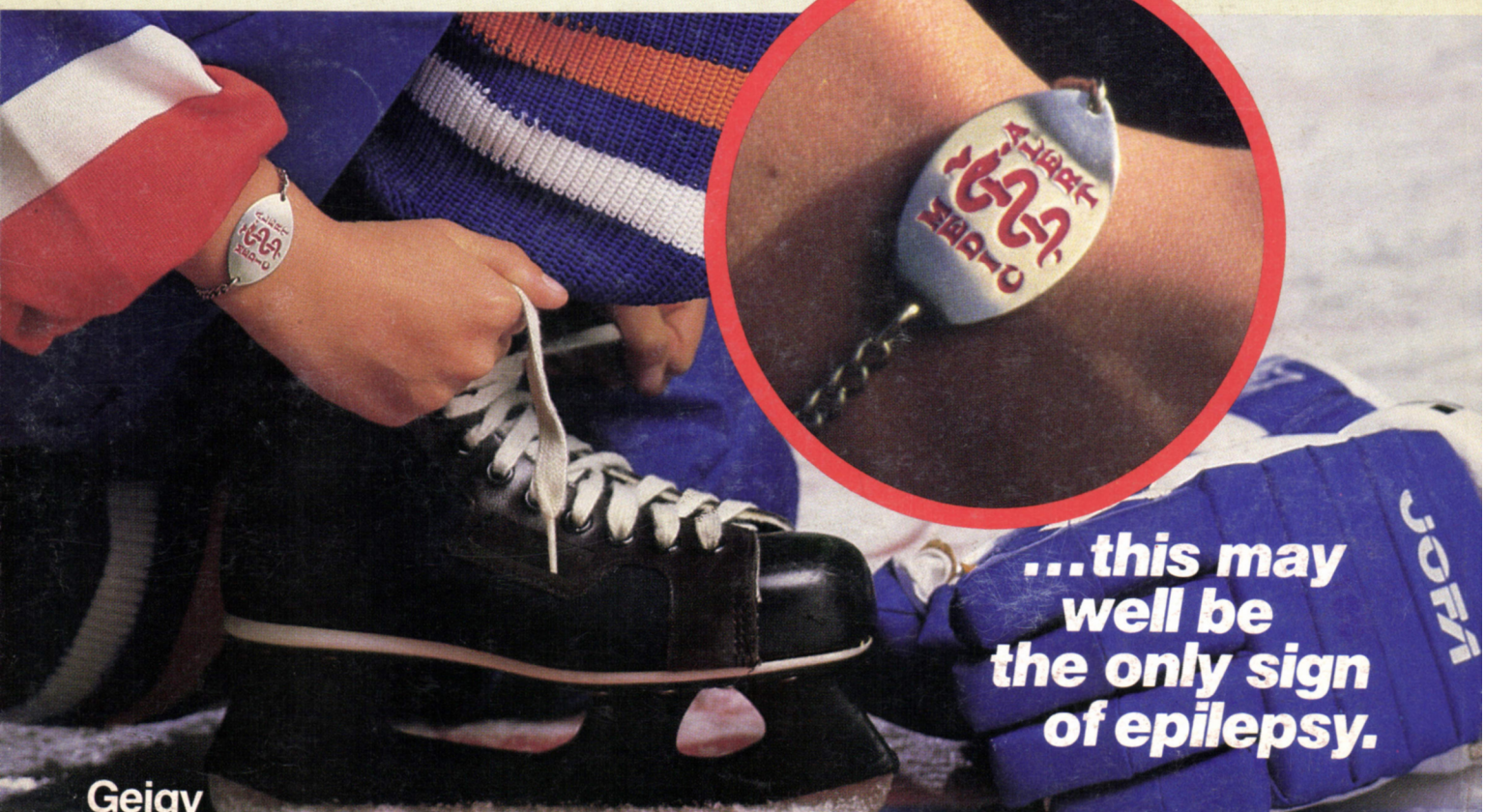
New Tegretol® Chewtabs™ (carbamazepine)

100mg and 200mg*

- ☐ the only chewable carbamazepine
- ☐ easier titration for both children and adults
- ☐ increased convenience provided by an easily administered chewable formulation
- ☐ improved compliance arising from a pleasant tasting cherry-mint flavour

Now indicated in children aged 6 years and over





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For brief prescribing information see page vii

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