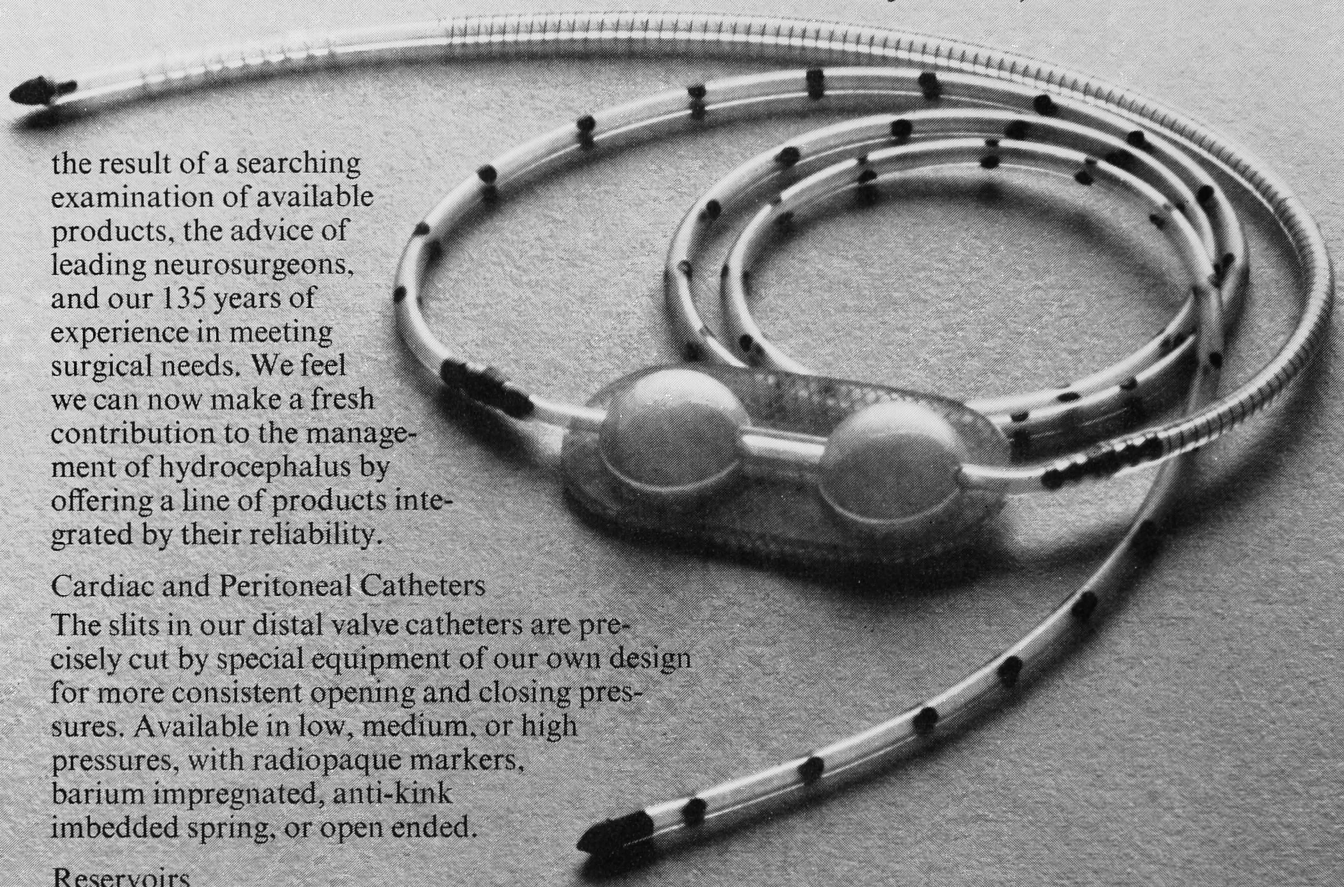
The time has come for

Codman introduces ACCU-FLO* Shunt Systems,



the result of a searching examination of available products, the advice of leading neurosurgeons, and our 135 years of experience in meeting surgical needs. We feel we can now make a fresh contribution to the management of hydrocephalus by offering a line of products integrated by their reliability.

Cardiac and Peritoneal Catheters

The slits in our distal valve catheters are precisely cut by special equipment of our own design for more consistent opening and closing pressures. Available in low, medium, or high pressures, with radiopaque markers, barium impregnated, anti-kink imbedded spring, or open ended.

Reservoirs

The bases of our reservoirs are designed to prevent a needle from passing through during medication. Available as double-dome flat bottom, single-dome flat bottom, or 14mm burr hole.

Ventricular Catheters

Multiple small holes near the closed tips strain the C.S.F. to resist clogging. Available with radiopaque markers, barium impregnated, flanged barium impregnated, anti-kink imbedded spring, or right angle bend.

*Trademark

ACCU-FLO Proximal Valve manufactured by Bio-Medical Research, Ltd.

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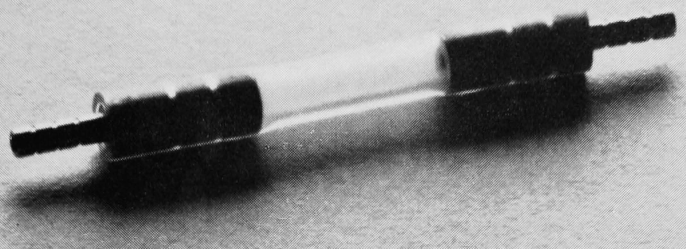
better shunt systems

The ACCU-FLO Proximal Valve



Our design incorporates two valves in one for increased reliability and double protection against refluxing. In addition, every ACCU-FLO Proximal Valve is delivered with *its own test report* showing a strip-chart record of opening pressure, closing pressure, and flow rates. Available in low, medium, or high pressure.

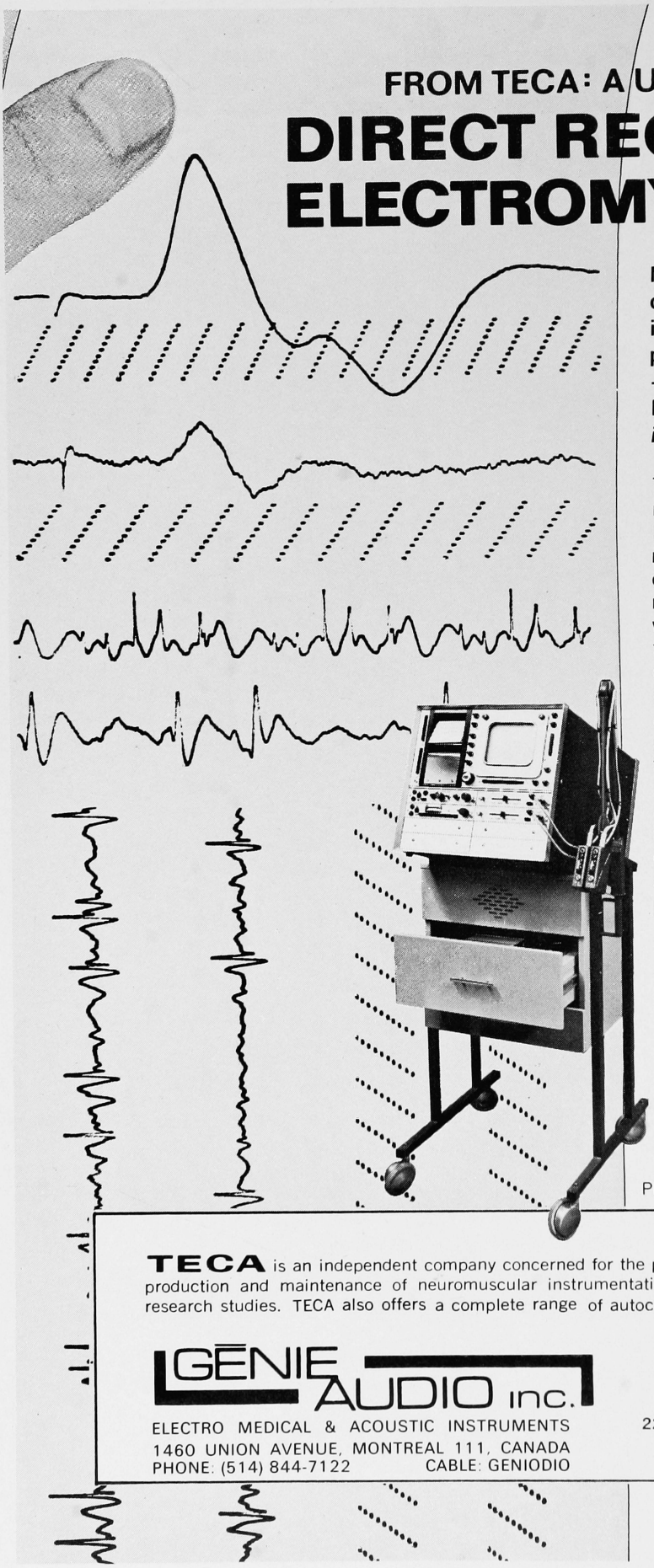
"ACCU-FLO" means just what it says: Accurate flow. Since the treatment of hydrocephalus depends above all on the sure flow of C.S.F., we have made ACCU-FLO Shunt components as reliable as we know how. Ask us to send you our catalog of ACCU-FLO products and get a fresh look at dependability. Codman & Shurtleff,
Division of Ethicon Sutures Ltd.,
Peterborough, Ontario K9J 7B9

Codman*

COD-101

FROM TECA: A UNIQUE NEW

DIRECT RECORDING ELECTROMYOGRAPH



Multiple, single sweep and continuous records appear rapidly on inexpensive 100 mm wide recording paper—*without chemical processing*—on the TECA Model TE-4 Direct Recording EMG—*using a new inertialess recording method.*

The new **TECA TE-4** permits, through modular plug-in design, one to four EMG channels. ■ Four traces of information are displayed on a large 7" cathode ray tube and may be automatically recorded simultaneously on 100 mm wide recording paper. ■ An electronic time ruler, a direct reading latency indicator, a delayed stimulus nerve stimulator with dual pulse capability, and a stabilized current muscle stimulator, permit a wide range of accurate rapid tests. ■ A two channel magnetic tape recorder is integrated into the System. ■ The TE-4 is of solid state design, making extensive use of integrated circuits. Modular plug-in construction simplifies service and permits easy expansion of capabilities by addition of modules listed. ■ Many of the above standard EMG features pioneered by TECA are further detailed in the TE-4 Specifications. Also included are new amplifier, stimulator, and System features and extended performance ranges offered. ■ Optional plug-ins: Evoked Potential Averager, Dual Pulse Train Stimulator, Signal Delay Unit (Delay Line), Integrator, Strain Gauge Amplifier.

PHOTOCOPY OF ACTUAL TRACING

TECA is an independent company concerned for the past 15 years with the development, production and maintenance of neuromuscular instrumentation and electrodes for clinical and research studies. TECA also offers a complete range of autoclavable electrodes.

GENIE AUDIO inc.

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New

Pr Symmetrel® Capsules 100 mg

(amantadine HCl)

for the management of Parkinson's syndrome

✻ **Chemically distinct**

(Not related to levodopa or anticholinergic antiparkinson drugs.)

✻ **Fast onset of action**

(Usually effective within 1 week in contrast to the slower response from levodopa.)

Effective with levodopa

(Either initiated concurrently or added to levodopa. Additional benefit may result — such as smoothing out of fluctuations in performance which sometimes occur when levodopa is administered alone. When the levodopa dose must be reduced because of side effects, the addition of Symmetrel may result in better control of Parkinson's syndrome than is possible with levodopa alone.)

Effective with other anticholinergic antiparkinson drugs

(When these drugs, e.g. benztropine mesylate, provide only marginal benefits, Symmetrel used concomitantly may provide the same degree of control of Parkinson's syndrome, often with a lower dose of anticholinergic medication, and a possible reduction in anticholinergic side effects.)

Effective alone

(Lessening of Parkinsonian symptomatology usually evident within one week in responsive patients.)

CONTRAINDICATIONS "Symmetrel" is contraindicated in patients with known hypersensitivity to the drug.

WARNINGS Patients with a history of epilepsy or other "seizures" should be observed closely for possible untoward central nervous system effects.

Patients with a history of congestive heart failure or peripheral edema should be followed closely as there are patients who developed congestive heart failure while receiving "Symmetrel" (amantadine HCl).

Safety of use in pregnancy has not been established. Therefore, "Symmetrel" should not be used in women with childbearing potential, unless in the opinion of the physician, the expected benefit to the patient outweighs the possible risks to the fetus (see Toxicology-Effects on Reproduction).

Since the drug is secreted in the milk, "Symmetrel" should not be administered to nursing mothers.

PRECAUTIONS The dose of "Symmetrel" may need careful adjustment in patients with renal impairment, congestive heart failure, peripheral edema, or orthostatic hypotension. Since "Symmetrel" is not metabolized and is mainly excreted in the urine, it may accumulate when renal function is inadequate.

Care should be exercised when administering "Symmetrel" to patients with liver disease, a history of recurrent eczematoid rash, or to patients with psychosis or severe psychoneurosis not controlled by chemotherapeutic agents. Careful observation is required when "Symmetrel" is administered concurrently with central nervous system stimulants.

Patients with Parkinson's syndrome improving on "Symmetrel" should resume normal activities gradually and cautiously, consistent with other medical considerations, such as the presence of osteoporosis or phlebothrombosis.

Patients receiving "Symmetrel" (amantadine HCl) who note central nervous system effects of blurring of vision should be cautioned against driving or working in situations where alertness is important.

"Symmetrel" (amantadine HCl) should not be discontinued abruptly since a few patients with Parkinson's syndrome experienced a Parkinsonian crisis, i.e., sudden marked clinical deterioration, when this medication was suddenly stopped.

The dose of anticholinergic drugs or of "Symmetrel" should be reduced if atropine-like effects appear when these drugs are used concurrently.

ADVERSE REACTIONS Adverse reactions reported below have occurred in patients while receiving "Symmetrel" (amantadine HCl) alone or in combination with anticholinergic antiparkinson drugs and/or levodopa.

The more important adverse reactions are orthostatic hypotensive episodes, congestive heart failure, depression, psychosis and urinary retention; and rarely confusion reversible leukopenia and neutropenia, and abnormal liver function test results.

Other adverse reactions of less importance which have been observed are: anorexia, anxiety, ataxia, confusion, hallucinations, constipation, dizziness (lightheadedness), dry mouth, headache, insomnia, livedo reticularis, nausea, peripheral edema, drowsiness, dyspnea, fatigue, hyperkinesia, irritability, nightmares, rash, slurred speech, visual disturbance, vomiting and weakness; and very rarely eczematoid dermatitis and oculogyric episodes.

Some side effects were transient and disappeared even with continued administration of the drug.

DOSAGE AND ADMINISTRATION The initial dose of "Symmetrel" is 100 mg daily for patients with serious associated medical illnesses or who are receiving high doses of other antiparkinson drugs. After one to several weeks at 100 mg once daily, the dose may be increased to 100 mg twice daily. When "Symmetrel" and levodopa are initiated concurrently, "Symmetrel" should be held constant at 100 mg daily or twice daily while the daily dose of levodopa is gradually increased to optimal dose. When used alone, the usual dose of "Symmetrel" is 100 mg twice a day.

Patients whose responses are not optimal with "Symmetrel" (amantadine HCl) at 200 mg daily may benefit from an increase to 300 mg daily in divided doses. Patients who experience a fall-off of effectiveness may regain benefit by increasing the dose to 300 mg daily; such patients should be supervised closely by their physicians.

DOSAGE FORMS CAPSULES: (bottles of 100) - each red, soft gelatin capsule contains 100 mg of amantadine HCl.

Product monograph, with complete references, available upon request.

Endo® DRUGS (CANADA) LTD., MONTREAL DUPONT

Subsidiary of E.I. du Pont de Nemours & Co. (Inc.)

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