

The purpose of this quiz is to provide a convenient means of self-assessment of your reading of the scientific content of this issue of JAOA and the supplement. Enter your answers to the questions in the spaces provided so that you can easily check them with the answers that will be published next month.

To apply for CME credit, transfer your answers to the mail-in card on page 17 and return it to the CME office. So that you may complete this self-assessment in privacy, use only your member number to apply for CME credit. The CME office will record only the fact that you have completed the self-assessment test. Any grading will be done by the Editorial Department only for the purpose of planning areas of study which may be helpful to cover in future issues of JAOA.

1. In animal tests (and presumably in humans) frictional contact at the tactile skin surface is greatest at what level of sweating and epidermal hydration?
☐ (a) Low
☐ (b) Intermediate
☐ (c) High
2. The thermoreceptors of tactile skin are located where?
☐ (a) In the stratum corneum
☐ (b) At the skin surface
☐ (c) In the dermis and lower epidermis
3. The atrichial sweat gland in humans is characterized by parasympathetic innervation.
☐ (a) True
☐ (b) False
4. Neonatal myasthenia gravis affects only the infants of mothers with the disease.
☐ (a) True
☐ (b) False
5. When the muscles of the limbs are affected by myasthenia gravis, which of the following are more often involved:
☐ (a) arms
☐ (b) legs
☐ (c) proximal muscles
☐ (d) distal muscles
☐ (e) (a) and (c) only
☐ (f) None of the above
6. In otitis media in children, optimum treatment consists of the use of oral decongestants, with osteopathic manipulative therapy chiefly for achieving relaxation of tension.
☐ (a) True
☐ (b) False
7. The emphasis in osteopathic management of patients with laryngitis, as described by Schmidt, is on techniques that are designed to:

**On Mother's Day
we'll be working
to keep Mom
in the picture for
years to come.**



Heart disease and stroke will touch the very heart of many families this year. We're working to make sure it's not yours. Yet every year, heart disease, stroke and related disorders cause half of all deaths — nearly one million mothers, fathers, sons and daughters.

The American Heart Association is fighting to reduce early death and disability from heart disease and stroke with research, professional and public education, and community service programs.

But more needs to be done.

You can help by making this Mother's Day "A Time To Remember." Send Mom a special occasion card from the American Heart Association, listed in your telephone directory.



**American Heart
Association**

WE'RE FIGHTING FOR YOUR LIFE

- ____ (a) relieve muscular tension.
- ____ (b) assist in lymph drainage.
8. When plasminogen activator activity within serosal surfaces is reduced by 50 percent, fibrin can still be cleared and permanent adhesions associated with endometriosis subsequently do not form.
- ____ (a) True
- ____ (b) False
9. Patients with mild endometriosis are rarely infertile.
- ____ (a) True
- ____ (b) False
10. Side effects of tocolysis with isoxsuprine include which of the following?
- ____ (a) Infection
- ____ (b) Hypotension
- ____ (c) Fetal bradycardia
- ____ (d) (b) and (c) of the above
- ____ (e) None of the above
11. How do drugs that stimulate beta adrenergic receptors act to inhibit labor?

- ____ (a) By altering hormone balance
- ____ (b) By creating relative neuroplegia
- ____ (c) By direct action on receptors in uterine smooth muscle
12. Although herpes gestationis responds to corticosteroid therapy, the risk to the fetus makes the treatment inadvisable.
- ____ (a) True
- ____ (b) False
13. Herpes gestationis obviously is associated with pregnancy. At what period is it most common?
- ____ (a) First trimester
- ____ (b) Second trimester
- ____ (c) Third trimester
- ____ (d) Puerperium
14. Among the various agents used in treatment of herpes gestationis, which of the following is most effective?
- ____ (a) Pyridoxine
- ____ (b) Progesterone
- ____ (c) Prednisone
- ____ (d) Antihistamines

Dimetane® Expectorant-DC

Each 5 ml teaspoonful contains:

Codeine Phosphate, USP.....	10 mg
(Warning: May be habit forming)	
Brompheniramine Maleate, USP.....	2 mg
Phenylephrine Hydrochloride, USP.....	5 mg
Phenylpropanolamine Hydrochloride, USP.....	5 mg
Guaifenesin, USP.....	100 mg
Alcohol, 3.5%	

Also available: Dimetane® Expectorant
Same formula as Dimetane Expectorant-DC,
but without the codeine.

INDICATIONS

Based on a review of these drugs by the National Academy of Sciences - National Research Council and/or other information, FDA has classified these products as lacking substantial evidence of effectiveness as fixed combinations for the following indications:

Dimetane Expectorant is indicated for relief of coughing and for symptomatic relief of many manifestations of allergic states in which expectorant action is desired. Dimetane Expectorant-DC is indicated in the same disorders as Dimetane Expectorant when the antitussive properties of codeine are desired.

CONTRAINDICATIONS: Hypersensitivity to brompheniramine maleate and other antihistamines of similar chemical structure; hypersensitivity to any of the other active ingredients; use in pregnancy; monoamine oxidase inhibitor therapy (see Drug Interaction section).

Use in Newborn or Premature Infants: Dimetane Expectorant and Dimetane Expectorant-DC should not be used in newborn or premature infants.

Use in Nursing Mothers: Because of the higher risk of antihistamines for infants generally and for newborns and premature infants in particular, Dimetane Expectorant and Dimetane Expectorant-DC are contraindicated in nursing mothers.

Use in Lower Respiratory Disease: Antihistamines should NOT be used to treat lower respiratory tract symptoms including asthma.

WARNINGS: Antihistamines should be used with considerable caution in patients with: narrow angle glaucoma; stenosing peptic ulcer; pyloroduodenal obstruction; symptomatic prostatic hypertrophy; bladder neck obstruction. Codeine can produce drug dependence of the morphine type and therefore has the potential for being abused.

Use in Children: In infants and children, especially, antihistamines in overdose may cause hallucinations, convulsions, or death.

As in adults, antihistamines may diminish mental alertness in children. In the young child, particularly, they may produce excitation.

Use in Pregnancy: Experience with brompheniramine maleate in pregnant women is inadequate to determine whether there exists a potential for harm to the developing fetus.

Use with CNS Depressants: Brompheniramine maleate and codeine phosphate have additive effects with alcohol and other CNS depressants (hypnotics, sedatives, tranquilizers, etc.).

Use in Activities Requiring Mental Alertness: Patients should be warned about engaging in activities requiring mental alertness, such as driving a car or operating appliances, machinery, etc.

Use in the Elderly (approximately 60 years or older): Antihistamines are more likely to cause dizziness, sedation, and hypotension in elderly patients.

PRECAUTIONS: As with other antihistamines, brompheniramine maleate has an atrophine-like action and, therefore, should be used with caution in patients with: history of bronchial asthma; increased intraocular pressure; hyperthyroidism; cardiovascular disease; hypertension. As with all preparations containing sympathomimetic amines, administer with caution to patients with cardiac or peripheral vascular diseases and hypertension.

Drug Interactions: MAO inhibitors prolong and intensify the anticholinergic (drying) effects of antihistamines. The CNS depressant effect of brompheniramine maleate and codeine phosphate may be additive with that of other CNS depressants.

ADVERSE REACTIONS: General. Urticaria, drug rash, anaphylactic shock, photosensitivity, excessive perspiration, chills, dryness of mouth, nose and throat.

Cardiovascular System. Hypotension, hypertension, headache, palpitations, tachycardia, extrasystoles.

Hematologic System. Hemolytic anemia, thrombocytopenia, agranulocytosis.

Nervous System. Sedation, sleepiness, dizziness, disturbed coordination, fatigue, confusion, restlessness, excitation, nervousness, tremor, irritability, insomnia, euphoria, paresthesias, blurred vision, diplopia, vertigo, tinnitus, acute labyrinthitis, hysteria, neuritis, convulsions.

G.I. System. Epigastric distress, anorexia, nausea, vomiting, diarrhea, constipation.

G.U. System. Urinary frequency, difficult urination, urinary retention, early menses.

Respiratory System. Thickening of bronchial secretions, tightness of chest and wheezing, nasal stuffiness.

Note: Guaifenesin has been shown to produce a color interference with certain clinical laboratory determinations of 5-hydroxyindoleacetic acid (5-HIAA) and vanilmandelic acid (VMA).

OVERDOSAGE: Overdosage reactions may vary from central nervous system depression to stimulation. Stimulation is particularly likely in children as a result of antihistamine overdosage. Atrophine-like signs and symptoms - dry mouth; fixed, dilated pupils; flushing; and gastrointestinal symptoms - may also occur.

If vomiting has not occurred spontaneously, the patient should be induced to vomit. This is best done by having him drink a glass of water or milk after which he should be made to gag. Precautions against aspiration must be taken, especially in infants and children.

If vomiting is unsuccessful, gastric lavage is indicated within three hours after ingestion and even later if large amounts of milk or cream were given beforehand. Isotonic and one-half isotonic saline is the lavage solution of choice.

Saline cathartics, as milk of magnesia, by osmosis draw water into the bowel and therefore are valuable for their action in rapid dilution of bowel content.

Stimulants should not be used. Vasopressors may be used to treat hypotension. Naloxone may be used to treat codeine toxicity.

SUGGESTED DOSAGE: Adults: 1 to 2 teaspoonfuls four times a day.

Children: ½ to 1 teaspoonful three or four times a day.

HOW SUPPLIED: Dimetane Expectorant - bottles of one pint (NDC 0031-1818-25) and one gallon (NDC 0031-1818-29).

Dimetane Expectorant-DC - bottles of one pint (NDC 0031-1831-25) and one gallon (NDC 0031-1831-29). Rev. May 1980

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Codeine plus
the expectorant
action of
guaifenesin,
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for allergic
symptoms,
and two
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That's the
combination
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coughs!

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*This drug has been evaluated as lacking substantial evidence of effectiveness as a fixed combination. See prescribing information on facing page.

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