

2. The following are two *important "side effects"*:

a. extended use of topical steroid therapy may cause increased intra-ocular pressure in certain individuals. It is advisable that intraocular pressure be checked frequently;

b. in those diseases causing thinning of the cornea, perforation has been known to occur with the use of topical steroids.

All manufacturers of Topical Corticosteroid preparations and steroid antimicrobial combinations intended for ophthalmic use have been requested to revise the labeling and advertising of these preparations to include warnings concerning the above contraindications and side effects.

AYERST LABORATORIES,
New York, N.Y., May 3, 1963.

IMPORANT—DRUG WARNING

DEAR DOCTOR: During the past several years, there have appeared reports totalling approximately 12 cases of fatal liver necrosis following surgical procedures performed under anesthesia technics of which "Fluothane" (Halothane) was a major component. It is interesting that a considerable proportion of these cases are accounted for by cholecystectomies.

It has thus far not been possible to establish a clear cause and effect relationship between the liver necrosis and the anesthetic although studies are under way. Results from these studies will be presented as soon as they become available. Meanwhile the administration of "Fluothane" (Halothane) to patients with known liver or biliary tract disease is not recommended.

Enclosed with this letter is a copy of the revised package insert and attention is drawn to the following statements:

Adverse Reactions

Fatal massive hepatic necrosis or cholestatic jaundice may occur following surgery performed under anesthesia of which Halothane in its usually safe concentration is a major component.

Contraindications

The administration of Halothane to patients with known liver biliary tract disease is not recommended.

Halothane is not recommended for obstetrical anesthesia except when uterine relaxation is needed. Halothane is rarely indicated in operations for the removal of retained products of conception. The uterine relaxation obtained, unless carefully controlled, may fail to respond to ergot derivatives and oxytocic posterior pituitary extract. Halothane is primarily a uterine muscle relaxant, and its employment should be reserved for cases of external cephalic version and for those phases of operation during which intrauterine manipulation or the removal of the placenta demand greater ease of accessibility to the uterine cavity.

Precautions

Halothane may increase cerebrospinal fluid pressure. Thus, in patients with markedly raised intracranial pressure. Halothane administration must be preceded by measures which will effect a reduction in cerebrospinal fluid pressure.

We will appreciate the submission to us or the Food and Drug Administration of any reports of adverse effects associated with the use of "Fluothane" (Halothane) in your own practice.

Assuring you that we shall keep you fully informed regarding future developments,

I am sincerely,

JOHN B. JEWELL, M.D.