ASN Research Award Program

Carl W. Gottschalk Research Scholar Award

The Carl W. Gottschalk Research Scholar Award is designed to foster the independent careers of young investigators in biomedical research related to nephrology. The award recognizes an individual of promise by providing him or her with $75,000 annually for two years to cover salaries/supplies related to the submitted research proposal.

Application deadline:
Applications are due by December 1 of each year for funding the following year.

Criteria:
Applicants shall be active ASN members, hold an M.D., or Ph.D., or equivalent degree, and have a full-time faculty appointment at the time of the initiation of the award. No more than six years shall have elapsed since the beginning of the applicant’s nephrology fellowship or first postdoctoral training.

Career Enhancement Grant

The ASN Career Enhancement Grant is designed as a bridge grant to support investigator’s meritorious research applications that were close to the funding range, but did not receive NIH funding. These awards provide $50,000 for one year and are designed only for those investigators who lack sufficient funds to maintain their laboratory efforts for the period needed to submit a revised grant proposal.

Application deadlines:
February 15  May 15  October 15

Criteria:
(1) Applicants must be active ASN members who have submitted an NIH grant proposal in the field of nephrology that was favorably reviewed and close to the funding range, but did not receive support; (2) Applicants shall not have other substantial research funding for the specific unfunded proposal or other projects; (3) Applicants shall have a full-time academic appointment at the time the award is initiated.
The Journal of the American Society of Nephrology

Frequency: One volume per year, beginning in January.

Correspondence concerning business matters should be addressed to: Customer Service, Subscriptions, Lippincott Williams & Wilkins, 351 West Camden Street, Baltimore, MD 21201-2436. Telephone: (800) 638-6423 from anywhere in the United States and Canada. From other countries, call (410) 428-8555. Fax: (410) 528-8596.

For information on American Society of Nephrology membership, contact: Neya Matthews at (202) 857-1190.

Correspondence regarding editorial matters should be addressed to: C. Craig Tisher, M.D., J. Am. Soc. Nephrol., Division of Nephrology, Box 100224, 1600 SW Archer Road, University of Florida, Gainesville, Florida 32610.

Instructions to Authors appears in each issue.

Annual subscription rates: U.S.: Personal $307.00; Institutional $428.00; In-training $123.00; Single copy $43.00. Other countries, surface delivery: Personal $377.00; Institutional $498.00; In-training $193.00; Single copy $49.00. Special in-training rate is available to residents, interns, and students for a period of three years. In requesting this rate, please indicate training status and name of institution. This special in-training rate can be extended to all participants in four-year training programs, provided that sufficient proof of training status is supplied. Institutional (multiple reader) rate applies to libraries, schools, hospitals, clinics, and group practices, and federal, commercial, and private institutions and organizations. For Japanese rates, please contact: Igaku-Shoin MYW Ltd., 3-23-14 Hongo, BunkyoKu, Tokyo 113, JAPAN. Phone: (03) 5689-5400 or 5401. Fax: (03) 5689-5402. PRICES ARE SUBJECT TO CHANGE. The GST number for Canadian subscribers is 123394371. Country of origin: USA.

New subscriptions received before May 1st of each year will begin with the first issue of the year. Subscriptions received between May 1st and October 31st will start with the mid-year issue. Subscriptions received after October 31st will start with the first issue of the following year. Subscriptions may start with any current year's issue upon request. Subscriptions should be renewed promptly to avoid a break in journal delivery. The publisher cannot guarantee to supply back issues on late renewals.

Change of address: The publisher must be notified 60 days in advance. Journals undeliverable because of incorrect address will be destroyed. Duplicate copies may be obtained, if available, from the Publisher at the regular price of a single issue. Send address changes to: The American Society of Nephrology, 351 West Camden Street, Baltimore, MD 21201-2436.

Reprints of individual articles are available only from the authors. If authors need information on their reprint orders, please call (410) 528-4118. Reprints (nonauthor) in large quantities, for commercial or academic use, may be purchased from the Publisher. For information and prices, call (410) 528-4292.

Microfilm and microfiche: Prices are available upon request. Microfilm editions may be ordered from Lippincott Williams & Wilkins. All promotional literature must be approved in advance.

Volume index appears in the December issue. Indexing/abstracting services: The Journal is currently included by the following services in print and/or electronic format: Index Medicus, Current Contents (Clinical Medicine), and BIOSIS.

Disclaimer: The statements and options contained in the articles of The Journal of the American Society of Nephrology are solely those of the individual authors and contributors and not of the American Society of Nephrology or Lippincott Williams & Wilkins. The appearance of advertisements in the Journal is not a warranty, endorsement, or approval of the products or services advertised or of their effectiveness, quality, or safety. The American Society of Nephrology and the Publisher disclaim responsibility for any injury to persons or property resulting from any ideas or products referred to in the articles or advertisements.

Copyright information: THE JOURNAL OF THE AMERICAN SOCIETY OF NEPHROLOGY is copyrighted by the American Society of Nephrology. No portion(s) of the work(s) may be reproduced without written consent from the Publisher. Permission to reproduce copies of articles for non-commercial use may be obtained from the Copyright Clearance Center, 222 Rosewood Drive, Danvers, MA 01923 (978) 750-8400, with a fee of $3.00 per copy.
Announcing an Exciting New Service...

Historically, the ASN Placement Service has only been available during the ASN Annual Meeting. This popular and ever-growing service will now be available electronically year-round! To register simply visit the ASN web site at www.asn-online.com.

Who should register: The ASN Placement Service is designed for all potential employers and employees in the nephrology field.

Employers
Post positions and view the CVs of participating candidates.

Employees/Candidates
View available positions (searching by salary, geography, etc.) and post CVs.

How to register: Visit the ASN web site at www.asn-online.com, complete the on-line registration form, and follow the simple instructions. Participants will be issued a password, which will be valid for one year.

1998 ASN Annual Meeting
Register for the ASN Placement Service on the web today and use the 1998 Annual Meeting in Philadelphia as an opportunity to meet with prospective employers and/or candidates. The ASN will have several meeting areas set aside for placement service participants who have arranged interviews/meetings. These meeting areas will be available on a first-come, first-served basis. All meeting arrangements are the responsibility of the employers and employees.

Questions? Visit the ASN web site at www.asn-online.com for all the details, or contact Neysa Matthews at the ASN at 202-857-1190 or E-mail address: neysa_matthews@dc.uba.com.

ASN Placement Service Prices

<table>
<thead>
<tr>
<th>Position Type</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASN Member Candidates</td>
<td>$75</td>
</tr>
<tr>
<td>ASN Associate Member Candidates</td>
<td>$25</td>
</tr>
<tr>
<td>Nonmember Candidates</td>
<td>$125</td>
</tr>
<tr>
<td>Nonmember Trainee Candidates</td>
<td>$65</td>
</tr>
<tr>
<td>ASN Member Employers</td>
<td>$275</td>
</tr>
<tr>
<td>Nonmember Employers</td>
<td>$395</td>
</tr>
<tr>
<td>Additional Job Posting(s)</td>
<td>$100 each</td>
</tr>
</tbody>
</table>

Williams & Wilkins' gift certificates let you do your giving with a professional touch. Certificates are available in $25 and $50 denominations and are good toward the purchase of any of our fine line of books, journals, videos, CD-ROMs, or software.

These certificates are perfect for students, residents, or your colleagues. They're a personalized gift that lets you show your commitment to excellence in medicine.

Redeeming these gift certificates is easy—recipients just choose the product they want by reviewing our catalog, website, promotional brochures, or calling our customer service department. They then return the gift certificate to Williams & Wilkins after making their product selection.

These certificates are just like the ones available at retail stores and they're good for any Williams & Wilkins product. This is one gift of knowledge your friends and colleagues will remember for many years.

1-800-638-0672 • Fax: 410-528-8550
E-mail: custserv@wwilkins.com

GIFT 57774

Williams & Wilkins
A WAVERLY COMPANY

American Society of Nephrology
1200 19th Street, NW, Ste. 300
Washington, DC 20036-2422
NORTHERN CALIFORNIA
Embark on a stimulating career with Kaiser Permanente. We are seeking BC/BE Nephrologists to join our medical centers in Oakland, Sacramento, and South San Francisco. Prospective candidates should have experience in clinical nephrology, end-stage renal disease, hemodialysis, peritoneal dialysis, renal transplantation, kidney biopsy, temporary dialysis lines and other procedures associated with this specialty. Physicians with our group enjoy competitive salaries and a rich benefits package.
For more information, send CV and cover letter to: Gordon Leung, TMPG Physician Recruitment Services, 1814 Franklin St., 4th Floor, Oakland, CA 94612. Fax: 510/873-5006. Email: Gordon.Leung@ncal.kaiserperman.org. Refer to job #A115. EOE.

NEPHROLOGY
Group Health Permanente is currently seeking a full-time nephrologist to join with three other members in providing services to 450,000 enrollees. Position located in the Seattle area. For further information, call 800-543-9323 or fax CV and cover letter to (206) 448-6191.

TWO ASSOCIATES
Explosive growth has necessitated the urgent need for two associates for this solo practitioner. 100% nephrology practice includes HD, CAPD, CCPD, CVVHD, and transplant follow-up in a very desirable southeast coastal community with a draw area of 500K. Academic affiliation and teaching of IM and FP residents are an integral part of this unparalleled opportunity. Send CV to PO Box 22848, Savannah, GA 31403.

http://dnnes.simplenet.com
http://webmed.org/nephrology.html
http://webmed.org/webnephron.html
How to Prepare For and Pass the Nephrology Board Examination. 6-month self-study program. Also online medical bookstore, career opportunities, meetings/conferences, electronic CME/ journallibrary. Check http://dnnes.simplenet.com, http://webmed.org/webnephron.html, http://webmed.org/nephrology.html. D&S Education Service, 2300 Foothill Blvd. #727, La Verne, CA 91750, Phone: 800-201-8926, Fax: 909-620-4896, Email: buaq93a@prodigy.com

BC/BE NEPHROLOGIST
100+ physician, multispecialty group seeking outstanding BC/BE Nephrologist. State-of-the-art technology, 16 station Dialysis Center, and 410-bed teaching and referral hospital. No transplants. Some general IM. Beautiful Western Kentucky with 350,000 service area. Great recreation nearby. Competitive base income, incentives, and benefits. Call 800-272-3497. Fax CV to 502-825-7462. E-mail: recruit@wkyphysicians.com

SHENANDOAH VALLEY OF VIRGINIA
BC/BE Nephrologist needed to join 4-physician group. Large nephrology practice in lovely part of Virginia 1 1/2 hours from Washington, DC. All aspects of nephrology including two free standing dialysis facilities and sole renal consultation services at a 400 bed medical center and surrounding 200,000 pop. drawing area. Medical student teaching opportunities. Excellent salary and benefits. Partnership opportunities after 1 year. Reply to JASN Box #1-11, 351 W. Camden Street-5N, Baltimore, MD 21201-2436.

http://www.wwilkins.com/classifieds

Opportunity Listings from Journal of the American Society of Nephrology can also be found at

http://www.wwilkins.com/classifieds

on the internet.

HYPERTENSIONOLOGIST
MAYO CLINIC/MAYO MEDICAL SCHOOL,
ROCHESTER, MN
DEPARTMENT OF MEDICINE, DIVISION
OF HYPERTENSION

Position available for full time clinician BE-BC in Internal Medicine to join a multidisciplinary group of 13 consultants devoted to the management of patients with hypertension. BE-BC subspecialty (CV, Nephrology, Endocrinology, Clinical Pharmacology) with strong background in clinical research preferred. Protected time for research in state of the art clinical research center to qualified candidate. Opportunities for teaching also available.

Send curriculum vitae to:

Gary Schwartz, M.D., Chair
Division of Hypertension
Mayo Clinic
200 First Street SW
Rochester, MN 55905

Mayo Foundation is an affirmative action and equal opportunity educator and employer.
Together FAX Lulfleran Image 19x6 to 593x786

Together We...
Identify Your Needs
Search The Marketplace
Nurture Relationships
Accomplish Your Goal

Well Rounded
100% Nephrology Practice in Midwest Setting

Dakota Clinic, Ltd., a 170 physician owned multispecialty group based in Fargo, North Dakota, is seeking a full time BE/BC nephrologist to replace a retiring physician. Practice features a 16 unit dialysis center, 20-25 kidney transplants per year and some limited travel to outlying regional dialysis centers. Position includes a competitive salary, full benefits and stockholder option after two years. This opportunity does not qualify for J-1 Visa holders.

Fargo is a growing progressive metropolitan community of 130,000 people. It has been consistently rated by Money magazine as one of the best places to live in the nation. We feature excellent schools, safe neighborhoods, three universities and over 30 art organizations. We are within one hour of hundreds of Minnesota clear blue lakes.

To receive our video and community/practice information, mail or fax your curriculum vitae to:

Dick Reis, Physician Recruitment Manager
Dakota Clinic, 1702 South University Drive
Fargo, ND 58103, Fax: 701-280-3229
or call toll free at 1-800-882-7310
E-mail address is: DREIS@DAKCL.COM

Nephrology Private Practice Opportunities

Seeking BC/BE Nephrologist for private practice opportunities nationwide. Positions range from hospital sponsored solo practices to group practices. To discuss your specific interest, geographical preferences and explore various opportunities within the field, please contract.

Carolyn Strasbaugh
Nephrology Search Consultant
Medical Staffing Associates, Inc.
6731 Whittier Avenue, 3rd Floor, McLean, VA 22101
Phone (800) 235-3105 * FAX (703) 893-7358
Web page: www.medstaffer.com

Kentucky Nephrology Opportunity

Announcing a high-volume opportunity offering you the professional success and satisfaction you desire. There is a tremendous demand for your services in this lucrative practice setting featuring low managed care penetration and virtually no competition. Join another Nephrologist in a ten-member group and enjoy a highly competitive compensation package that includes generous salary plus bonuses and full benefits. Partnership in this dynamic group is available after one year. Beautiful community enjoys strong economic base and is within an easy drive of four popular metro areas.

For more information, please contact:
Ken Dowdy
Medical Doctor Associates
888-649-0356
dowdyk@mdainc.com

Specializing In Nephrology Search
Practice Opportunities Nationwide

Rose O’Malley-Trench
Ten Years Experience
888-236-0176 Toll Free
602-473-9378 Fax

Gundersen Lutheran is seeking a Board Certified/Board Eligible General Nephrologist. Gundersen Lutheran is a multi-specialty group practice with over 300 physicians. We are a modern, state of the art facility adjacent to a 402-bed hospital with Level II Trauma Center. In addition, the Gundersen system includes 36 regional community clinics based throughout western Wisconsin, eastern Minnesota and northeast Iowa.

La Crosse, Wisconsin nestled between towering bluffs is located where the Mississippi, La Crosse and Black Rivers merge. The area was untouched by the glaciers, leaving many hills and valleys as an outstanding scenic area. The metropolitan area of La Crosse, with its 100,000 people, offers exceptional year round opportunities for recreational activities.

Gundersen Clinic offers excellent working conditions and fringe benefits. Salaries are competitive. Interested candidates should send a letter of application and curriculum vitae to Frank Perez-Guerra, Manager, Recruitment, Retention and Resource Planning, Gundersen Lutheran, 1836 South Avenue, La Crosse, WI 54601; or call Frank Perez-Guerra at 1-800-362-9567.

Gundersen Lutheran

Expert Free Legal Advice
Confidentiality
Uncompromised Service
PhosLo® is indicated for control of hyperphosphatemia in end-stage renal disease. Patients with higher-than-normal serum calcium levels should be closely monitored and their dose adjusted or terminated to bring levels to normal.


Warnings: Patients with ESRD who develop hypercalcemia when given calcium with meals. No other calcium supplements should be given concurrently with PhosLo®. Serum calcium levels should be monitored when PhosLo® therapy is started and periodically established. Safety in the elderly. No increased incidence of adverse reactions has been noted in patients over 65 years of age.

Precautions: Serum calcium and phosphate levels should be closely monitored. PhosLo® should be taken with meals to ensure the mixing of calcium with dietary phosphate.

Adverse Reactions: On occasion, patients have developed nausea while taking PhosLo®, but the relationship of this adverse reaction to the drug is unclear as nausea often occurs in patients with end-stage renal disease. Mild hypercalcemia may occur in some patients, but it is easily controlled by reduction in dose or by temporarily discontinuing therapy.

Drug Interactions: The potential for hypercalcemia is increased if the patient takes other calcium supplements or calcitriol.

Binds twice as much phosphate as equivalent amounts of calcium carbonate.1,2

- Reimbursable under Medicaid and other state and private insurance programs.
- Tablets are swallowed, not chewed.
- No threat of aluminum toxicity.1,3,4

PhosLo® (Calcium Acetate Tablets)
667 mg Tablets
Medicaid-approved.
MORE OF WHAT YOUR PATIENTS NEED.
And less of what they don’t.

R&D Laboratories’ calcium carbonate line is formulated to meet the distinctive nutritional requirements of patients with renal disease. You will find a choice of forms and unique, high-strength formulations for medical food supplementation and phosphorus binding to optimize bone metabolism in ESRD. Our patient-friendly options mean greater benefit and greater compliance. Just how do we know? We’re a company focused on renal micronutrition. What you and your patients get out of our medical food supplements is all the years of expertise we put into them.

For samples or more information, contact us at 800-338-9066, info@rndlabs.com, or www.rndlabs.com
INSTRUCTIONS TO AUTHORS

Send manuscripts to the Editor:

C. Craig Tisher, M.D.
J. Am. Soc. Nephrol.
Division of Nephrology
Box 100224
1600 SW Archer Road
University of Florida
Gainesville, Florida 32610

The Journal of the American Society of Nephrology will publish original manuscripts judged by peers to be of high quality and relevant to the broad field of nephrology. Nephrology is an alliance of scientists and physicians who seek to understand the functions of the kidneys and the means to improve the medical care of individuals with kidney disease. The strength and vitality of the discipline radiate, historically, from the dynamic interaction between the basic and the clinical sciences. The Journal strives to nurture this relationship by providing the means for communicating to nephrologists and others in related specialties critical information of broad significance in the field. Subjects appropriate for the Journal include, but are not restricted to:

- clinical nephrology
- cell and transport physiology
- pathology and immunology
- cell and structural biology
- pathophysiology of renal disease
- hormones, growth factors, and cell signaling
- hemodynamics, hypertension and vascular regulation
- dialysis
- transplantation
- mineral metabolism and bone disease
- molecular medicine, genetics, and development

General Information

Original manuscripts are of two types: Regular Articles and Brief Communications. Regular Articles are traditional full length papers that address research questions with exhaustive experimental design and methodology. Brief Communications should contain not more than 2000 words (including abstract, figures, tables and references) describing important new observations in nephrology.

Reviews of basic and clinical topics of interest to the readership will be solicited by the editors.

In the cover letter, designate one author as the correspondent. The cover letter should include a statement explaining why the research is especially important. The journal office may solicit editorials to accompany articles that are especially newsworthy or controversial.

Include in the cover letter the names, addresses, telephone and fax numbers and areas of expertise of at least five individuals (peers) who may serve at the discretion of the editors, as reviewers of the manuscript.

Copyright Transfer

Include one of the two following statements on copyright interests signed by all authors: “In consideration of the American Society of Nephrology’s taking action in reviewing and editing this submission, the author(s) undersigned hereby transfer(s), assign(s) or otherwise convey(s) all copyright ownership to the ASN in the event this work is published by the ASN.”

Federal Government: “I was an employee of the United States Federal Government when this work was conducted and prepared for publication; therefore, it is not protected by the Copyright Act and there is no copyright of which the ownership can be transferred.”

The signatures that must accompany the cover letter indicate that each author approved the final version of the manuscript and is prepared to take public responsibility for the work.

Review Process

It is the policy of the Journal to expedite manuscript review. Authors will receive within 7 days of receipt at the editorial office, acknowledgment that their manuscript has been forwarded to an associate editor and appropriate reviewers. Manuscripts that are judged by a panel of screening editors to fail outside the range of interest of the readership or that fail to satisfy technical requirements will be promptly returned to the authors without further review. In order to reduce postage expense, manuscripts sent to outside reviewers as privileged communications will be destroyed and not returned to the authors. Glossy prints and photographs from rejected manuscripts will be returned to authors.

Manuscript Preparation

- Submit an original manuscript and three photocopies, typed double-spaced in letter-quality print on one side only of standard (8½ × 11 inch) white bond paper. Manuscripts should be organized as follows: title page, abstract, introduction, methods, results, discussion, acknowledgments, references, tables and figure legends.
- On the title page type the full names, highest academic degrees and affiliations of all authors. The title should not exceed 100 characters including spaces between words. Number all pages consecutively beginning with the title page. Include an abbreviated title of not more than 40 characters.
- Abstract: State the problem considered, methods, results and conclusions in less than 250 words.
- Use of Systeme International d’Unites (SI) for measurements is preferred throughout the manuscript. Factors for converting frequently used components can be found in JAMA (1989; 262:200–202).
- Use generic names of drugs.
- Do not use abbreviations in the title. Define unusual abbreviations with the first use in the body of the manuscript.
- Text footnotes should be typed on a separate page.
• Foreign contributors, whose language is not English, should obtain help from colleagues who are proficient in scientific English.

• It is assumed that all clinical investigation described in the manuscript was conducted in accordance with the guidelines proposed in the Declaration of Helsinki. Document in the manuscript that informed consent was obtained.

• It is assumed that all animal experimentation described in the manuscript was conducted in accord with the NIH Guide for the Care and Use of Laboratory Animals or the equivalent, and the manuscript should contain a statement to that effect.

• Tables: Type double-spaced on separate sheets of standard-sized white bone paper. Each table should have a title and be numbered in the order of appearance in the text. Use superscript letters to indicate footnotes typed at the bottom of the table.

• Figures: Four complete sets of glossy photographs of all figures including graphs, black and white light and electron micrographs and color photographs, must be submitted. The use of color illustrations is encouraged, but authors should contact the editor prior to their preparation for advice and assistance. All figures should be clearly labeled on the back. Photomicrographs should be sized to fit one column (8 cm) or two columns (17 cm); the maximum plate size is 17 × 22 cm. The fee for color figures is $250.00 per page. Authors are responsible for the cost of color pages. Legends should state degree of magnification or scale bars should be used on the photograph. Graphs must be of professional quality. Computer-generated graphs should be of laser quality. High contrast prints for roentgenographic photographs and electron micrographs are essential. Clear photocopies of the figures should be included with the original and each copy of the manuscript.

• References: References should be typed on a separate page and numbered in the order of appearance in the text, with only one reference to a number. Citation of unpublished observations or personal communications (include separately permission to quote from appropriate individual) should be placed in the text in parenthesis. Journal articles, abstracts and books: List all authors for each article cited. Journal names should be abbreviated according to the BIOSIS list of serials.


• Manuscripts on Electronic Diskettes: Authors must submit electronic diskettes of the final version of their manuscripts along with the printout of the revised manuscript. Diskettes produced on IBM or IBM-compatible computers are preferred, but those produced on most Macintosh computers can also be converted. Word and WordPerfect are preferred. Authors preparing diskettes on Macintosh computers should not use the Fast Save option. Files in ASCII are not preferred. Identify the diskette by providing journal name, manuscript number, senior author’s name, manuscript title, name of computer file, type of hardware, operating system and version number, and software program and version number. The journal does not assume responsibility for errors in conversion of customized software, newly released software, and special characters. Mathematics and tabular material will be processed in the traditional manner.

Manuscript Checklist
1. Include the original typed manuscript and three photocopies.
2. Send four sets of glossy print figures; each manuscript set should also contain photocopies of figures.
3. Include a cover letter containing a copyright transfer statement.
4. Include all authors’ personal signatures.
5. Designate a corresponding author and provide a telephone number, fax number and address.

Proofs
Please read, correct, and return the original set of proofs with the manuscript and figure copy. Be sure that all Editor’s or printer’s queries are answered. Only minor corrections are permitted. Authors will be charged for excessive changes. Excess pages will be assessed on articles and brief communications that exceed four pages in length ($60.00 per printed page). Invited reviews and editorials will be exempt. The enclosed prints of your illustrations should be reviewed carefully and any corrections noted on the figure proof. Return the corrected proof and manuscript within 48 hours to: Journal Editing, Lippincott Williams & Wilkins, 351 West Camden Street, Baltimore, MD 21201-2436.

Reprints
Authors of articles published in the Journal of the American Society of Nephrology will receive reprint order forms with the page proofs. Reprint order forms must be returned within 48 hours of receipt. Send Reprint Order forms to: Author Reprint Department, Lippincott Williams & Wilkins, 351 West Camden Street, Baltimore, MD 21201-2436. Telephone: 1-800-341-2258, Fax: 410-361-8016, E-mail: reprints@wwilkins.com, Internet: http://www wwilkins.com periodicals/author-reprints.

Disclaimer—The statements and opinions contained in the articles of the JOURNAL OF THE AMERICAN SOCIETY OF NEPHROLOGY are solely those of the individual authors and contributors and not of the American Society of Nephrology or Lippincott Williams & Wilkins. The appearance of advertisements in the Journal is not a warranty, endorsement or approval of the products or services advertised or of their safety. The American Society of Nephrology and the Publisher disclaim responsibility for any injury to persons or property resulting from any ideas or products referred to in the articles or advertisements.
Patients should be informed of the necessity of repeated laboratory tests while they are receiving cyclosporine. Patients should be advised to take the Cyclosporine capsules orally on an empty stomach, 30 minutes before or 2 hours after meals, and to avoid grapefruit juice or grapefruit juice concentrate. Patients should be educated on the importance of remaining on the medication even if feeling well, and that they must not reduce the dose or stop taking the medication abruptly. If a dose is missed, it should be taken as soon as possible (within 4 hours). If more than 4 hours have elapsed, the patient should wait until the next scheduled dose and take the regular dose at that time. It is important that patients understand the importance of not missing any doses, as this may result in decreased effectiveness of the medication.

Patients should be advised to report any adverse reactions or symptoms immediately to their healthcare provider. This includes but is not limited to fatigue, headache, dizziness, nausea, vomiting, diarrhea, constipation, rash, pruritus, stuttering speech, paresthesia, edema, palpitations, tachycardia, blurred vision, altered taste, depression, anxiety, confusion, agitation, and any other symptoms that may be concerning. It is essential for patients to communicate any changes in their condition, as this information is crucial for monitoring their response to cyclosporine treatment and for adjusting the dosage accordingly.

Patients should be informed about the potential for drug interactions with Cyclosporine, as it may affect the metabolism of other medications. They should be advised to inform their healthcare provider of any other medications they are taking, including over-the-counter drugs, herbal supplements, and vitamins. It is important to note that some medications, such as antibiotics, antiepileptic drugs, and antiplatelet agents, may interact with Cyclosporine and increase its blood levels, potentially leading to toxicity. Patients should be advised to consult with their healthcare provider before taking any new medications, to ensure compatibility with Cyclosporine.

Patients should be advised to inform their healthcare provider if they are pregnant or planning to become pregnant, as Cyclosporine is associated with fetal toxicity. Patients should be advised to use alternative contraception during treatment with Cyclosporine and for at least 6 months after discontinuing the medication. Patients should be informed about the serious risks associated with Cyclosporine use during pregnancy, which may include birth defects and other adverse outcomes. They should be advised to avoid breastfeeding while taking Cyclosporine, as it can be excreted in breast milk and may cause harm to the infant.

In conclusion, Cyclosporine is a powerful immunosuppressive agent that is widely used in the treatment of various conditions requiring immune suppression. However, its use may be associated with significant risks and adverse effects. It is important for healthcare providers to carefully monitor patients receiving Cyclosporine and to educate them about the potential risks and benefits of the medication. By doing so, they can help ensure the safe and effective use of Cyclosporine in the management of immune-related diseases.
In kidney, liver, and heart transplant recipients

The Sign of Precision

Specify Neoral®—because tight control is critical
- To maintain each patient within his or her own narrow therapeutic range of a critical drug.²
- To provide consistent cyclosporine exposure
- To avoid the clinical consequences associated with inadvertent switching between formulations that are not bioequivalent*

Specify NEORAL®
cyclosporine capsules and oral solution for microemulsion

⑧ There really is a difference

*Neoral® (cyclosporine for microemulsion) and Sandimmune® (cyclosporine, USP) are not bioequivalent and cannot be used interchangeably without physician supervision.

NOVARTIS

Novartis Pharmaceuticals Corporation
East Hanover, New Jersey 07936

Venessa Underwood, Kidney transplant recipient, January 16, 1979

Neoral provides increased bioavailability with adverse events comparable to those of Sandimmune® when the dosage of the two drugs is adjusted to achieve the same cyclosporine blood trough concentrations. The principal adverse reactions of cyclosporine therapy in transplantation are renal dysfunction, tremor, hirsutism, hypertension, and gum hyperplasia.


©1998 Novartis
Printed in U.S.A.