Clinical test shows
Aveeno® Dry Skin Bar is milder than Dove® Beauty Bar.

- New, improved extra mild formula.
- Ideal for dry skin associated with atopic dermatitis.
- Only leading brand with colloidal oatmeal, nature’s own gentle cleanser.
- Free of fragrances, parabens and dyes that can cause allergic reactions.
- Soap-free formula effectively cleanses without drying sensitive skin.
- Noncomedogenic.

Also available in Combination and Acne-Prone Skin formulas.

Aveeno® Bar for Dry Skin is less irritating than Dove® Beauty Bar.

Aveeno® Bar for Dry Skin causes less redness than Dove® Beauty Bar.

1. Double blind study conducted by an independent test facility. Forearm sites of 40 subjects were washed four times daily for 5 days. TEWL measurements were taken by a ServoMed Evaporometer. Erythema scores were assessed visually. * Dove is a trademark of Lever Brothers Company. © 1995 S.C. Johnson & Son, Inc. All rights reserved.
For many patients...

chickenpox.  
now avoidable...

VARIVAX®
[VARICELLA VIRUS VACCINE LIVE  
(Oka/Merck)]

now available.

Vaccination with VARIVAX may not result in protection of all healthy, susceptible children, adolescents, and adults. The duration of protection of VARIVAX is unknown at present and the need for booster doses is not defined. Please read the Brief Summary of the Prescribing Information on the last page of this advertisement. Before administering the vaccine, please read the full Prescribing Information for VARIVAX.
uncomfortable. unwelcome. unavoidable...until now...

For many patients, VARIVAX® [Varicella Virus Vaccine Live (Oka/Merck)]:

**Efficacy**

The majority of vaccinees in clinical studies who were exposed to wild-type virus were either completely protected from chickenpox or developed a milder form of the disease.

In controlled clinical trials in children: Compared to historical controls...

<table>
<thead>
<tr>
<th>Single dose of VARIVAX in children</th>
<th>% difference from expected attack rates (natural exposure)</th>
<th>Breakthrough cases (vaccinees reporting chickenpox)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Results with current vaccine using 2,900 PFU to 9,000 PFU (n=1,164)</td>
<td>A reduction of approximately 93%</td>
<td>0.2% to 1.0% per year (up to 3 years of follow-up)</td>
</tr>
<tr>
<td>In earlier trials with a vaccine using 1,000 PFU to 1,625 PFU (n=4,142)</td>
<td>A reduction of approximately 67% (57% to 77%)</td>
<td>2.1% to 3.6% per year (up to 6 years of follow-up)</td>
</tr>
</tbody>
</table>

**After household exposure...**

- A single dose of VARIVAX reduced the incidence of chickenpox by 77% in pediatric vaccinees subsequently exposed to chickenpox in a household setting (n=259). 80% did not report chickenpox; 20% reported a mild form of the disease.

**In a placebo-controlled trial...**

- One dose of VARIVAX (at a formulation containing 17,000 PFU) protected 96% to 100% of children over the first 2 years postvaccination.
  - 100% calculated protection rate the first year:
    - 0% contracted chickenpox with VARIVAX (n=491) compared to 8.5% with placebo (n=465)
  - 96% calculated protection rate the second year (n=163 VARIVAX; n=161 placebo)

**Immunogenicity**

In clinical trials, 1 dose maintained varicella antibodies in healthy children for at least 4 years.

<table>
<thead>
<tr>
<th>Years postvaccination</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>% vaccinees with detectable antibody level</td>
<td>98.8% (n=1,822)</td>
<td>98.9% (n=1,069)</td>
<td>97.5% (n=562)</td>
<td>99.5% (n=221)</td>
</tr>
</tbody>
</table>

- A boost in antibody levels was observed in vaccinees following exposure to natural chickenpox, which could account for this apparent persistence of antibody levels. However, the duration of protection from varicella obtained using VARIVAX in the absence of wild-type boosting is unknown.

- Antibody presence over time in healthy children who received 1 dose of VARIVAX in clinical trials

VARIVAX is contraindicated in individuals with a history of hypersensitivity or anaphylactoid reaction to any component of the vaccine including gelatin or neomycin, blood dyscrasias, leukemia, lymphomas of any type, other malignant neoplasms affecting the bone marrow or lymphatic systems, febrile illness, and most primary or acquired immunodeficiency states; and in those receiving immunosuppressive therapy.

VARIVAX should not be administered during pregnancy. Pregnancy should be avoided for 3 months following vaccination.

For a Brief Summary of the Prescribing Information, please see the last page of this advertisement.
In clinical trials of 11,102 children, adolescents, and adults (at formulations ranging from 1,000 to 17,000 PFU)

Frequency of fever, local reactions, or rashes (%) in healthy children, adolescents, and adults monitored for up to 42 days after any dose of VARIVAX

<table>
<thead>
<tr>
<th>Reaction (0–42 days)</th>
<th>CHILDREN after a single dose</th>
<th>ADOLESCENTS and ADULTS after first dose</th>
<th>ADOLESCENTS and ADULTS after second dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever (≥ 102°F [39°C] oral for children, ≥ 100°F [37.7°C] oral for adolescents and adults)</td>
<td>14.7% (n=8,827)</td>
<td>10.2% (n=1,384)</td>
<td>9.5% (n=956)</td>
</tr>
<tr>
<td>Injection-site complaints</td>
<td>19.3% (n=8,916)</td>
<td>24.4% (n=1,606)</td>
<td>32.5% (n=955)</td>
</tr>
<tr>
<td>Varicella-like rash (injection site) Median number of lesions</td>
<td>3.4% (n=8,916)</td>
<td>3.0% (n=1,606)</td>
<td>1.0% (n=955)</td>
</tr>
<tr>
<td>Varicella-like rash (generalized) Median number of lesions</td>
<td>3.8% (n=8,916)</td>
<td>5.5% (n=1,606)</td>
<td>0.9% (n=955)</td>
</tr>
</tbody>
</table>

- Vaccine recipients should avoid close association with susceptible high-risk individuals (e.g., newborns, pregnant women, and immunocompromised persons). The potential risk of transmission of vaccine virus should be weighed against the risk of transmission of natural varicella virus in such circumstances.
- In children and adults, adverse experiences reported at ≥1% frequency included (without regard to causality): upper respiratory illness, cough, irritability/nervousness, fatigue, disturbed sleep, diarrhea, loss of appetite, vomiting, otitis, rash, headache, teething, malaise, abdominal pain, nausea, eye complaints, chills, lymphadenopathy, myalgia, stiff neck, arthralgia, lower respiratory illness, allergic reactions, constipation, itching, and cold/canker sores. In children, pneumonitis and febrile seizures have been reported rarely; a causal relationship has not been established.

As with any vaccine, there is the possibility that broad use of VARIVAX could reveal adverse reactions not observed in clinical trials.

with several benefits.

**Helps prevent disease and work loss**

- Helps reduce costs of work time lost by family members who stay home to care for children with chickenpox.

**VARIVAX is indicated for vaccination against varicella in individuals 12 months of age or older**

- For children 12 months to 12 years of age: one 0.5 mL dose, administered subcutaneously.
- For individuals 13 years of age and older: two 0.5 mL doses, administered subcutaneously (second dose 4 to 8 weeks after initial dose).

Introducing new **VARIVAX**

[VARICELLA VIRUS VACCINE LIVE (Oka/Merck)]

The First Vaccine Against Chickenpox Available In The U.S.

For a Brief Summary of the Prescribing Information, please see the last page of this advertisement. Before administering the vaccine, please read the full Prescribing Information for VARIVAX.
BRIEF SUMMARY

Please read the full Prescribing Information for complete details.

INDICATIONS AND USAGE
VARIVAX® [Varicella Virus Vaccine Live (Oka/Merck)] is indicated for vaccination against varicella in individuals 12 months of age and older.

Reactivation
The duration of protection of VARIVAX is unknown at present and the need for booster doses is not definitively established. Reactivation of latent varicella virus has been observed in vaccinees following exposure to natural varicella as well as following a booster dose of VARIVAX administered four to six years post vaccination. In a highly vaccinated population, immunity for some individuals may wane due to lack of exposure to natural varicella as a result of shifting epidemiology. Post-marketing surveillance studies are ongoing to evaluate the need and timing for booster vaccination.

Vaccination with VARIVAX may not result in protection of all healthy, susceptible children, adolescents, and adults. See [CLINICAL PHARMACOLOGY] section of the full Prescribing Information.

CONTRAINDICATIONS
A history of hypersensitivity to any component of the vaccine, including gelatin.

A history of anaphylactic reaction to neomycin, panethone, or other neomycin derivatives.

Individuals with blood dyscrasias, leukemia, lymphomas, or infectious diseases due to immunodeficiency.

Individuals who have been immunosuppressed for an extended period of time and who can not be reimmunosuppressed.

Individuals who are pregnant or lactating.

Individuals with acute febrile illness or a severe, idiopathic illness.

Individuals who are immunodeficient due to HIV infection.

Individuals who have a history of congenital or hereditary immunodeficiency, unless the immune competence of the potential vaccine recipient is demonstrated.

Active untreated tuberculosis.

Any febrile respiratory illness or other active febrile infection.

Pregnancy: the possible effects of the vaccine on fetal development are not known at this time. However, natural varicella is known to sometimes cause fetal harm. The risk of transplacental infection is greatest in the first trimester. The risk of transplacental infection increases with advancing gestational age.

VACCINATION
VARIVAX can be injected in one dose of 0.5 mL (0.24 mg) either intramuscularly or subcutaneously.

Adults
Adults should be vaccinated with VARIVAX. The dose should be injected intramuscularly into the upper outer quadrant of the buttock.

Administration
Only the VARIVAX single-dose vial should be used for vaccination.

Storage
Store at 2°C to 8°C (36°F to 46°F) in the refrigerator. Do not freeze VARIVAX.

REFERENCES
STADIUM CUPS (6001)
100-249 .................................. .35 EA.
250-499 .................................. .30 EA.
500-999 .................................. .44 EA.
1000+ .................................. .40 EA.
ACRYLIC CLOCKS (6002)
70-99 .................................. .41 EA.
100-499 .................................. .39 EA.
500+ .................................. .55 EA.
COFFEE MUGS (6005)
36-71 .................................. .40 EA.
72-143 .................................. .37 EA.
144-287 .................................. .32 EA.
288+ .................................. .17 EA.
1D TAGS (6012)
250-499 .................................. .38 EA.
500-999 .................................. .39 EA.
1000+ .................................. .48 EA.
SAFETY STRIPS (6013)
1000-4999 .................................. .33 EA.
10000-9999 .................................. .38 EA.
10000+ .................................. .03 EA.
SQUARE BUTTONS (6011)
Packages of 100 100 .................................. .40 EA.
REFRIGERATOR MAGNETS (6006)
100-999 .................................. .39 EA.
1000-1499 .................................. .35 EA.
1500+ .................................. .32 EA.
MAGNETIC FRAMES (6007)
250-499 .................................. .62 EA.
500-999 .................................. .57 EA.
1000-2499 .................................. .52 EA.
2500+ .................................. .48 EA.
STATIC STICKERS (6008)
100-999 .................................. .39 EA.
1000-2499 .................................. .35 EA.
2500+ .................................. .32 EA.
CLIC STIC PENS (6018)
300-1499 .................................. .42 EA.
1500-2499 .................................. .38 EA.
2500+ .................................. .35 EA.
ERASERS (6019)
250-499 .................................. .66 EA.
500-999 .................................. .60 EA.
1000+ .................................. .55 EA.
PENCILS (6020)
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1000-2499 .................................. .20 EA.
2500+ .................................. .17 EA.
MEMO BOARDS (6016)
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500-999 .................................. .78 EA.
1000+ .................................. .65 EA.
RULERS (6017)
350-499 .................................. .41 EA.
500-999 .................................. .36 EA.
1000+ .................................. .32 EA.
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Child Health Month is the best time of the year for promoting the value of prevention. AAP members can be a part of the celebration in October and throughout the year with these fine products carrying the Child Health Month logo. You can also promote your practice by adding your own imprint.

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