

# duphalac<sup>®</sup> in lactulose liver failure

*Duphalac (lactulose) is now well established as a valuable agent in the treatment of portal-systemic encephalopathy. A recent review in Gut\* describes its role in these terms.*

"Lactulose is a useful addition to the existing treatment of cirrhotic patients with neuropsychiatric disorders. Most patients respond particularly those with mild and relatively stable symptoms; such patients may receive lactulose indefinitely, and enjoy improved tolerance of dietary protein . . . . . lactulose is free from significant side effects, and therefore falls into place as a valuable alternative to antibiotics when prolonged therapy is required". \*Gut, 1970, 11: 1043-1048

**The following work on Duphalac in portal systemic encephalopathy has been published:**

Treatment of chronic portal-systemic encephalopathy with lactulose *Lancet*, 1966, 1: 890-892

Portal-systemic encephalopathy treated with lactulose (letter) *Lancet*, 1966, 2: 281

Treatment of hepatic system encephalopathy with lactulose *Medical Journal of Australia*, 1968, 2: 160-163

Treatment of portacaval encephalopathy by lactulose *Presse medicale*, 1968, 76: 1675-1676

Cirrhosis, hyperammonaemia and lactulose *Tijdschrift voor Gastro-Enterologie*, 1968, 11: 123-139

Lactulose in the treatment of chronic portal-systemic encephalopathy: a double-blind clinical trial *New England Journal of Medicine*, 1969, 281: 408-412

Long-term treatment of portal-systemic encephalopathy with lactulose *Australasian Annals of Medicine*, 1969, 18: 117-123

Die Behandlungen des chronischen Coma hepaticum mit Laktulose *Therapeutische Umschau und medizinische Bibliographie*, 1969, 26: 275-277

Lactulose treatment of chronic hepatoportal encephalopathy: a clinical and electroencephalographic study *Acta medica Scandinavica*, 1970, 187: 337-346

The value of EEG frequency analysis in hepatic encephalopathy *J. Ryl. Coll. Surg. Edinb.*, 1970, 15: 151-157

Some observations on the effects of treatment with lactulose on patients with chronic hepatic encephalopathy *Quarterly Journal of Medicine*, 1970, 39: 245-263

A controlled clinical trial of lactulose in hepatic encephalopathy *Gastroenterology*, 1970, 59: 827-832

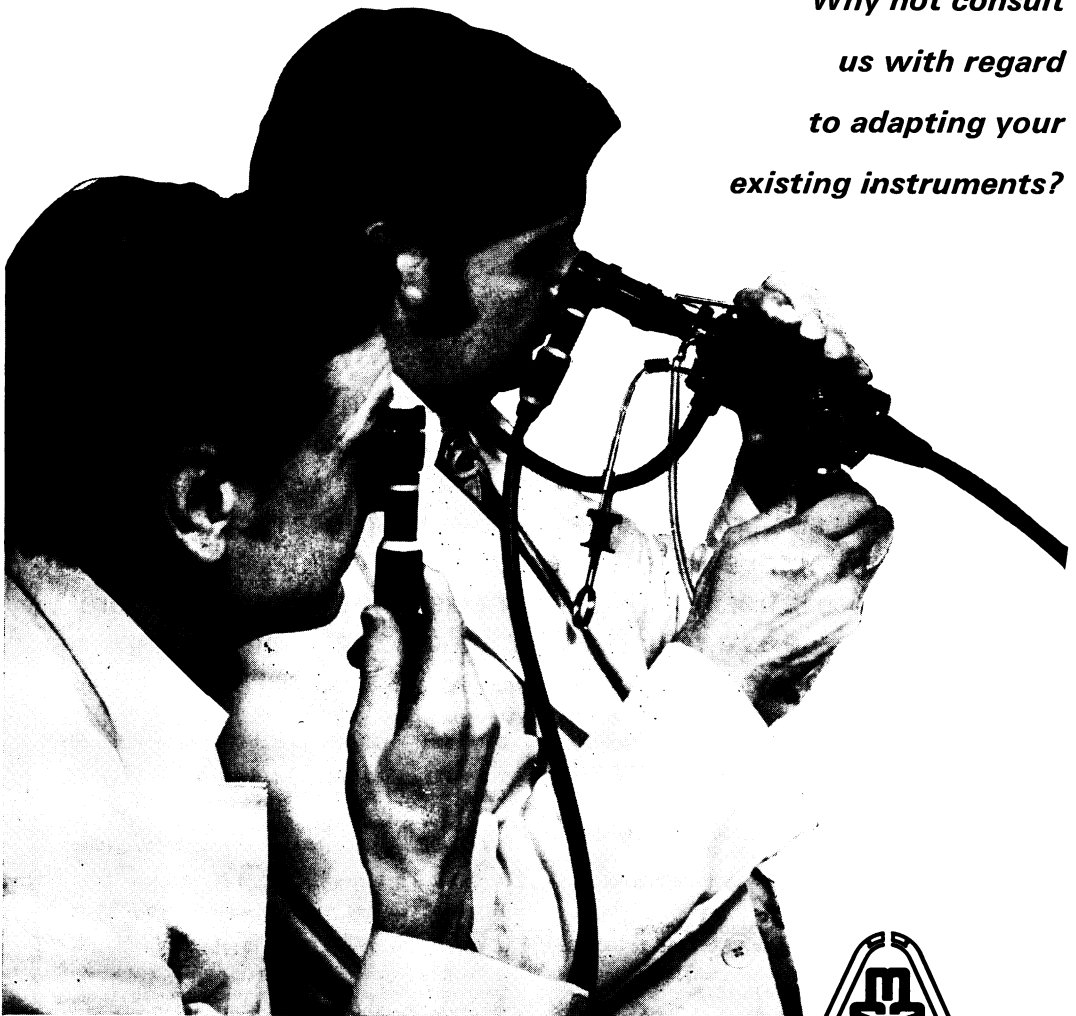
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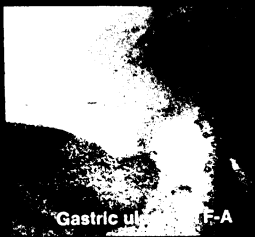
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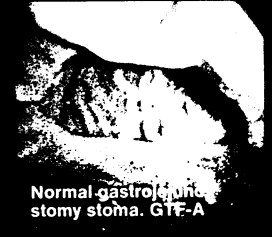
Gastric cancer. GTF-A



Ulcer crater of the stomach. GTF-A



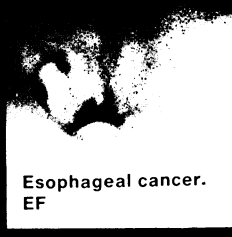
Gastric ulcer, lesser curvature. GTF-B



Normal gastrojejunostomy stomach. GTF-A



Polypoid lesions in the stomach. GTF-A



Esophageal cancer. EF



Reflux esophagitis. EF



Esophageal varix. EF



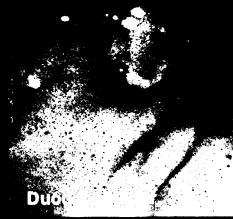
Diverticulum of water drainage. EF



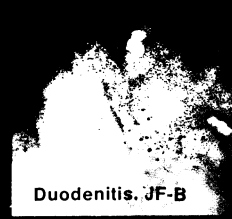
Cancerous papilla. JF-B



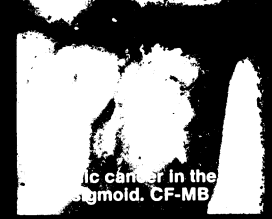
Bleeding ulcer. JF-B



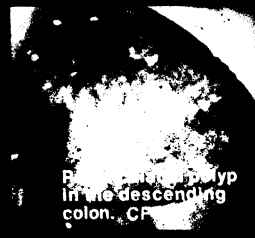
Duodenum. JF-B



Duodenitis. JF-B



Polypoid cancer in the sigmoid. CF-MB



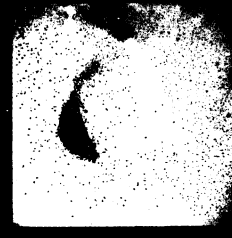
Polypoid lesion in the descending colon. CF-MB



Neoplasm in the colon. CF-MB



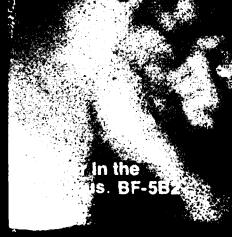
Polypoid lesion in the colon. CF-MB



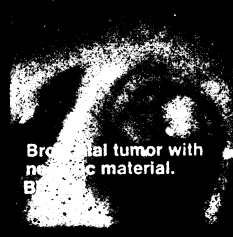
Melanotic colon. CF-MB



Normal bronchus. BF-5



Tumor in the bronchus. BF-5B2



Bronchial tumor with necrotic material. BF-5B2

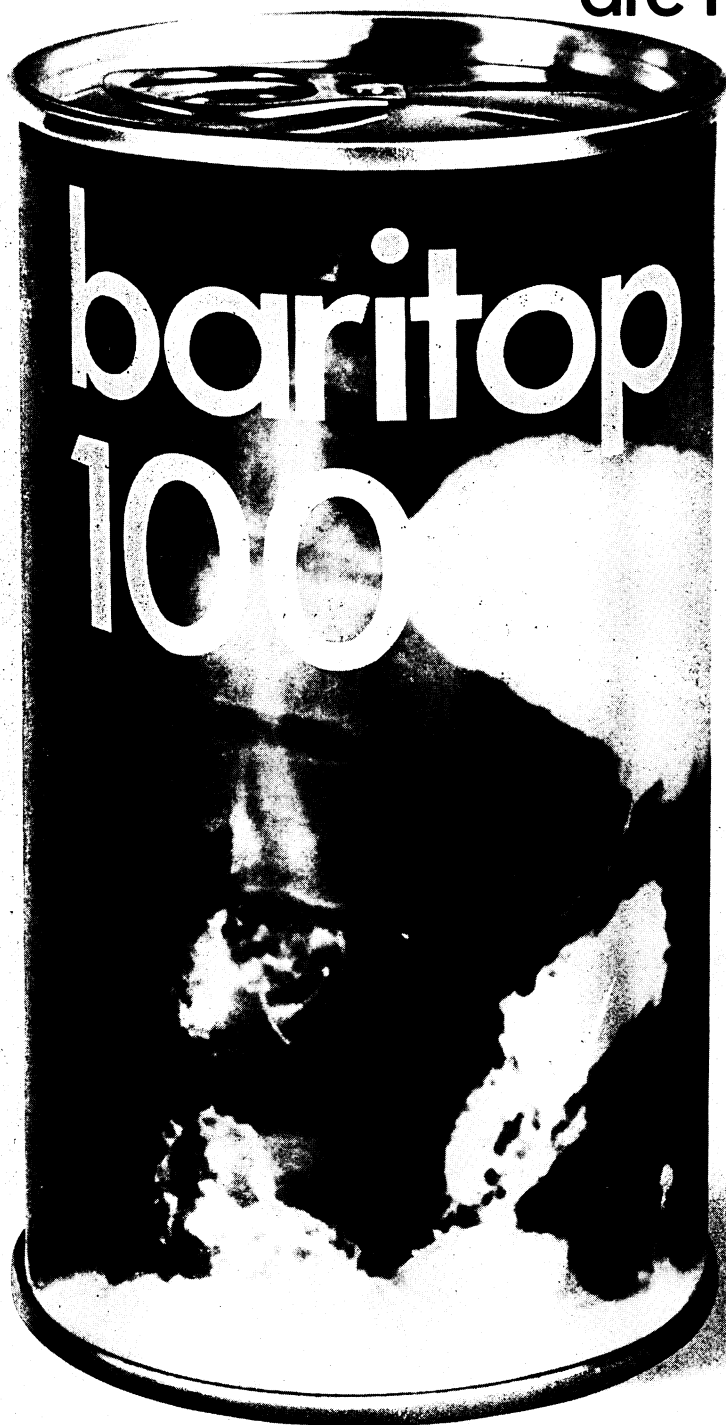


Normal vocal cord. BF-5B2



Hepatic duct. BF-5B2

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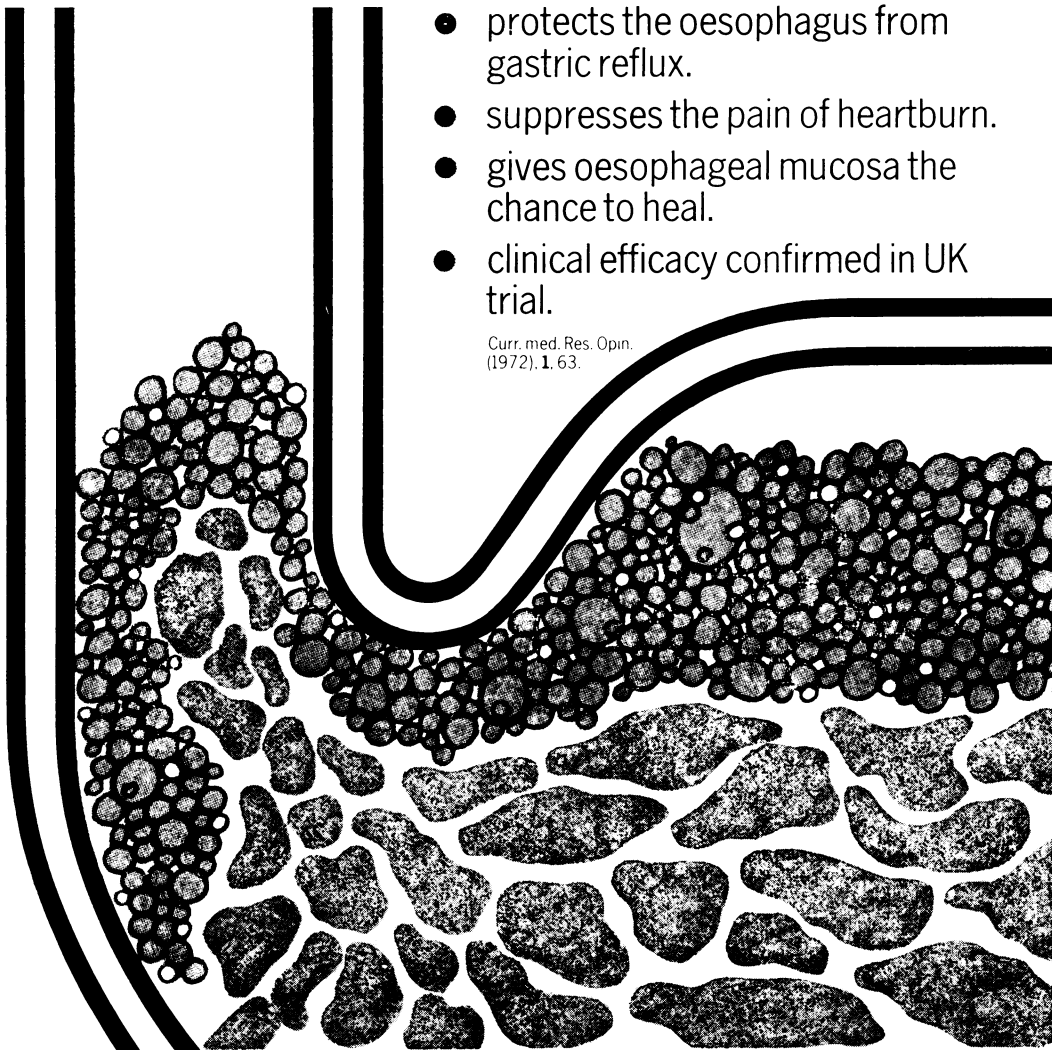
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Curr. med. Res. Opin.  
(1972), 1, 63.



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Q

**How much Caved-S can an intractable duodenal ulcer patient take?**

A

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The Practitioner

June 1973 Vol. 210 pp. 820-823

\* This dosage regimen was established in a recent trial of Caved-S on patients all with intractable duodenal ulcer and a history of more than six relapses in the year prior to the trial. Of twenty patients receiving 12 Caved-S tablets a day for 16 weeks, 12 had no relapse in a full year's follow-up, and the other 8 had two or one relapse in the follow-up year. All these patients had actually been referred for surgery, but surgery was avoided in all cases. Another similar group of 20 patients received 8 Caved-S tablets a day for 8 weeks - the condition of patients selected was too serious for controls with a placebo. Of this second group 3 had no relapse, 7 up to two relapses, and 10 up to 4 relapses in a year's follow-up.

No significant side effects occurred. Only one patient discontinued treatment, and he later resumed treatment successfully.

The authors conclude:

"Caved-S . . . should be given in high dosage before surgery is attempted in patients with duodenal ulcer who fail to respond to a low dose or other treatments."

# Caved-S

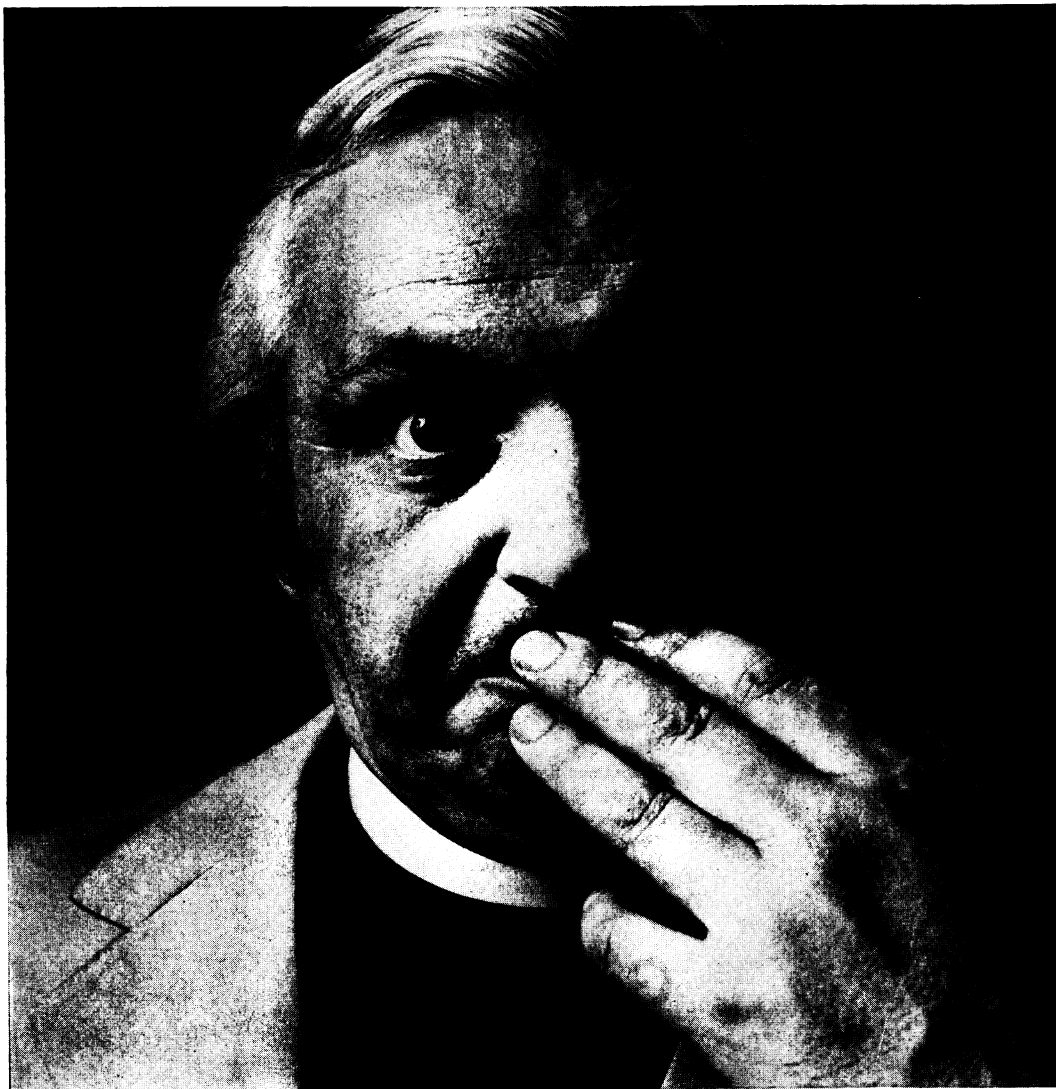
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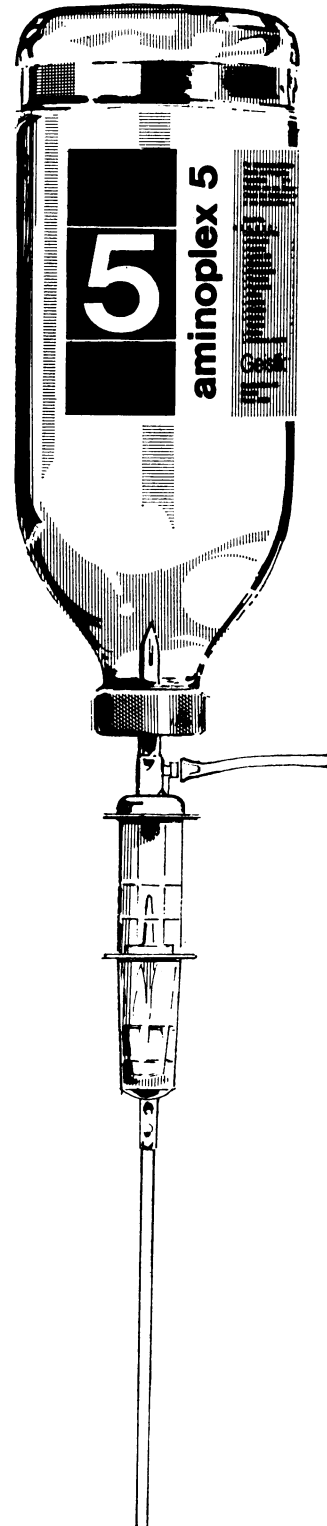
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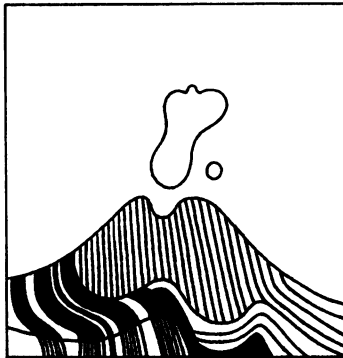


The Queen's Award to Industry 1972 to Biorex Laboratories Limited for Technological Innovation in the Development and Production of the drug carbenoxolone sodium for the treatment of ulcers. Made under licence from Biorex Laboratories London

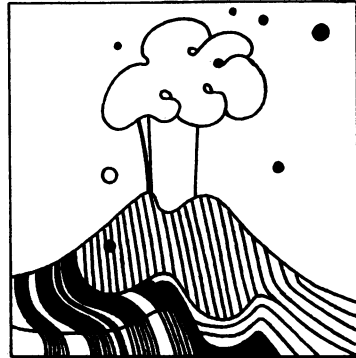
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J4368

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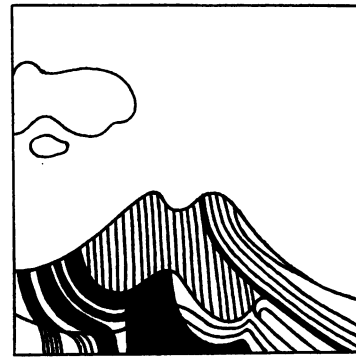
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General Practitioner, April 7 (1972).

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Lancet (1973), I, 698

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# Digestion

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