Gut September 1977 I



## "It is concluded that maintenance treatment of ulcerative colitis with sulphasalazine (salazopyrin) should be continued indefinitely unless contraindicated by side effects." I

The results of the above controlled trial carried out at the Nuffield Department of Clinical Medicine, Radcliffe Infirmary, Oxford are all the more welcome as earlier trials of cortisone<sup>2</sup> and prednisone3 at standard dosages have shown them to be ineffective in reducing the number of recurrences of ulcerative colitis.

"Fortunately, Sulphasalazine tablets, 0.5 grams 4 times a day will prevent relapses in the majority of patients with colitis, and only a few patients cannot tolerate this relatively small dose, which can be continued indefinitely since we do not know when, if ever, it can be safely stopped".4

Salazopyrin (sulphasazine) is available as the plain 0.5g. tablet, 0.5g. EN-tab and as an 0.5g. suppository.

Literature and detailed information on Salazopyrin are available on request.

"The patients who received dummy tablets had more than four times the relapse rate of those receiving sulphasalazine".1 (Salazopyrin).

maintained Relanced 12-1

"A striking difference in the relapse rate".

Both groups of patients had been satisfactorily maintained for 1-5 years on Salazopyrin prior to the study, in which they took Salazopyrin or placebo for 6 months.

- 1. Gut (1973) 14 923 926 2. Brit. med. J. (1959) 1 387 394 3. Lancet (1965) 1 188 189 4. General Practitioner (1972) April 7 p11

Salazopyrin is a registered trade mark.

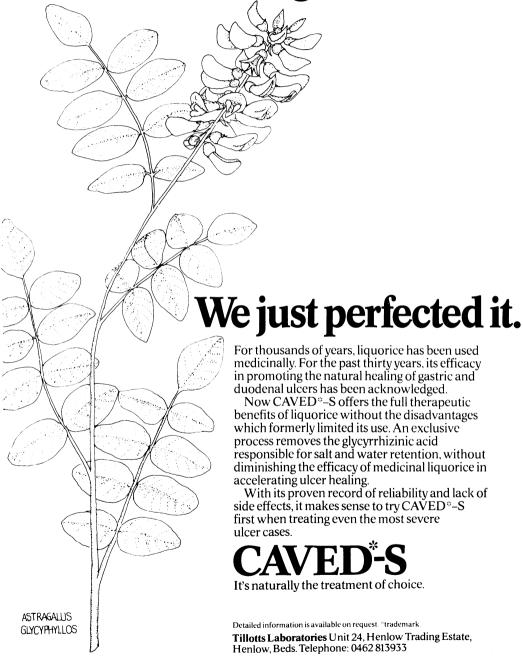
Further information on request from:-Pharmacia (Great Britain) Ltd. Paramount House,

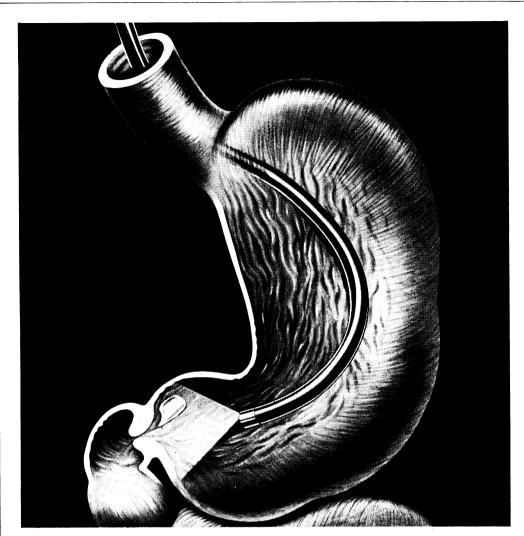
75 Uxbridge Road, London W5 5SS.

Telephone: 01-579 0102/7



## Nature nearly discovered a cure for duodenal and gastric ulcers.





## De-Nol passes the acid test for ulcer therapy

Healing of the ulcer and prompt relief of symptoms are two of the main aims of ulcer therapy. Endoscopically controlled clinical trials from centres around the world show that De-NoI meets these aims, confirming the benefits of De-NoI therapy.

- \* De-NoI heals up to 90% of gastric and duodenal ulcers
  - Endoscopy confirms that De-Nolincreases the rate of ulcer healing.
- \* De-Nol gives early relief of pain Patients generally obtain relief of symptoms within the first few days of treatment.
- \* De-Nol is free from serious side effects Over a quarter of a million courses of De-Nol have now been prescribed.
  - R, De-Noi Treatment Pack

## **De-Nol**\*unique therapy for gastric and duodenal ulcers

# tri-potassium di-citrato bismuthate

O Brocades Great Britain Ltd. West Byfleet, Surrey, KT14 6RA Byfleet. 45536



## ... you can insist on Hollister\* appliances

You know that a critical part of postoperative stoma care is getting the patient to adapt mentally. If this fails, the surgical effort is poorly rewarded since the patient will never fully recover or lead a normal life. A leaky, uncomfortable or cumbersome appliance can cause endless problems — right from the beginning.

Hollister\* holds the key by taking care of stoma problems before they start.

Appliances changed in minutes
 Integral Karaya
 Seal prevents leakage
 Hypo-allergenic adhesive is firm
 Odourproof for 4–5 days
 T sizes of each type



Because we feel that stoma patients need all-round care we provide a free Stoma Care Advisory Service. This is for doctors, nurses, appropriate hospital staff and the patients themselves. Help and advice is just a phone call away on Sheerness 3371. For more details please return the coupon.

Abbott Laboratories Limited Queenborough, Kent, ME11 5EL Please send me your special 'Ostomy Guide' booklet, details of Hollister Ostomy products, and an invitation to see a film on stoma care.  Name
Address
H0333



## Reduces gas and secretion.

## New data now available.

## 1 Healing

Further experience in clinical trials confirms that 4-8 weeks "Tagamet' treatment achieves remarkable results in duodenal ulcer 1.2.3 gastric ulcer, 2.4.6 and reflux oesophagitis.2.5

Overall	TAGAMET	PLACEBO
Experience	% healed	- % healed
Duodenal Ulcer	77% of 803 patients	41% of 252 patients
Gastric	79% of 130	45% of 64
Ulcer	patients	patients
Reflux	62% of 39	9% of 23
Oesophagitis*	patients	patients

\*includes oesophageal ulcers and erosions: complete healing or marked improvement.

In addition to complete healing (proven endoscopically), early and dramatic symptomatic relief is achieved in most patients. With its convenient dosage and low incidence of side effects, 'Tagamet' is well suited to everyday treatment.

### 2 Recurrence

A group of duodenal ulcer patients was followed for periods of up to 6 months after completing 4-6 weeks 'Tagamet' treatment. Preliminary results show that the incidence of relapse was no greater than in a similar group who had healed their ulcers on placebo.2.7



Artist's impression of H<sub>2</sub> receptor antagonist acting at receptor site in gastric mucosa.

#### 3 Maintenance

377 chronic duodenal ulcer patients, who had healed their ulcers after 4-6 weeks treatment were entered into controlled, double-blind maintenance trials. They were maintained on 'Tagamet' or placebo therapy, at a reduced dosage, for periods of up to 6 months. Results from these ongoing studies have shown that only 5.7% of the 'Tagamet' group relapsed <sup>7</sup> compared with 42.1% of the group who were maintained on placebo.

1. Oral cimetidine in severe duodenal ulceration, (1977) Lancet, i, 4. 2. Data on file (March 1977), Smith Kline & French.

3. The effect of cimetidine on duodenal ulceration. (1977). The Second International Symposium on Histamine H<sub>2</sub> Receptor Antagonists Excerpta Medica, p.260.

4. Treatment of gastric ulcer by cimetidine. (1977) ibid. p.287.

5. Cimetidine in the treatment of oesophagitis.

(1977) ibid. p.297. 6. Healing of gastric ulcer during treatment with cimetidine. (1976) Lancet, **i**, 337.

7. Long-term treatment with cimetidine in duodenal ulceration (1977) Lancet, i, 900.

'Tagamet' (cimetidine) is available as 200mg film-coated tablets, 200mg/5ml syrup and 200mg/2ml ampoules.

Full prescribing information is available from Smith Kline & French Laboratories Limited, a SmithKline company, Welwyn Garden City, Hertfordshire, AL? IEY Tagamet' is a trade mark

(cimetidine, SK&F) The H<sub>2</sub> receptor antagonist Reduces gastric acid secretion

SK&F



# When dyspepsia repeats.... Maxolon

Unlike the traditional antacid therapies.

Maxolon protects the gastric mucosa from over-long exposure to gastric acid¹ by promoting normal peristalsis and gastric emptying<sup>2,3</sup>. By restoring the stomach's normal control, symptoms described by the patient as fullness, pain, heartburn and discomfort can be effectively treated and their recurrence prevented.<sup>4</sup>

To the patient, Maxolon is the simple and convenient therapy to replace his repetitive antacid prescriptions.

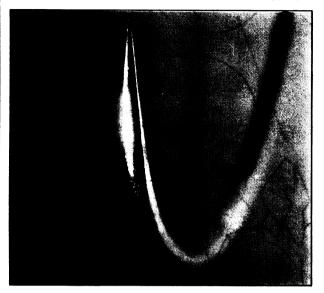
1 Gut, (1969), 10, 678-680. 2. Postgrad. med. J., (1973), 49, (Suppl), 29. 3 Gut, (1974), 15, 462-467. 4. Brit. med. J., (1971), 2, 25



Full prescribing information is available on request. Maxolon\* (metoclopramide) is a product of

Beecham Research Laboratories, Brentford, England

## CONTROLLING SUTURE PLACEMENT

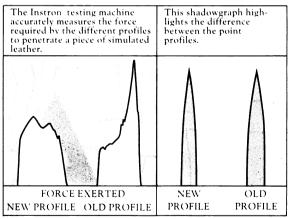


The ability to control the passage of a needle through tissue is of particular importance in the placement of gastrointestinal sutures.
Realising this, ETHICON\* developed a needle the penetration of which was not only substantially improved, but significantly smoother than previous

needles of this type. A modification in the body design of the needle also improved stability in the needle holder. These factors now offer the surgeon a

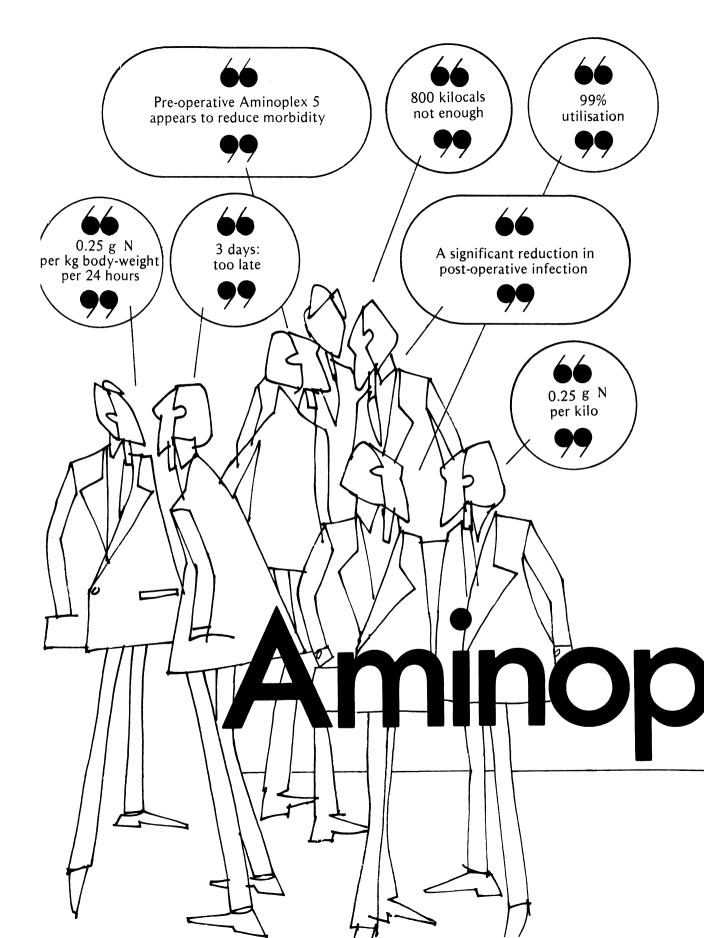
dramatic increase in the ability to control suture placement and are of special advantage when suturing deep or confined anatomical areas.

MEETING THE CHALLENGE Suture requirements and wound closure techniques are constantly subject to re-evaluation



and change. At ETHICON we are very much a part of this process and welcome the challenge it offers. We put our considerable research, development and manufacturing resources to work to produce still better needle designs and suture materials.

## ETHICO N SERVICE TO SURGERY



## Nutrition: recovery

"The practical advantage of intravenous feeding solutions which contain amino acids and calorie source in the same bottle is that of simplicity. The use of a 'one bottle' solution does not remove the responsibility for assessing the requirements of a patient, neither does it prevent the meeting of those requirements"

— a principle supported by more biochemistry on more ill patients than any other regime of parenteral nutrition

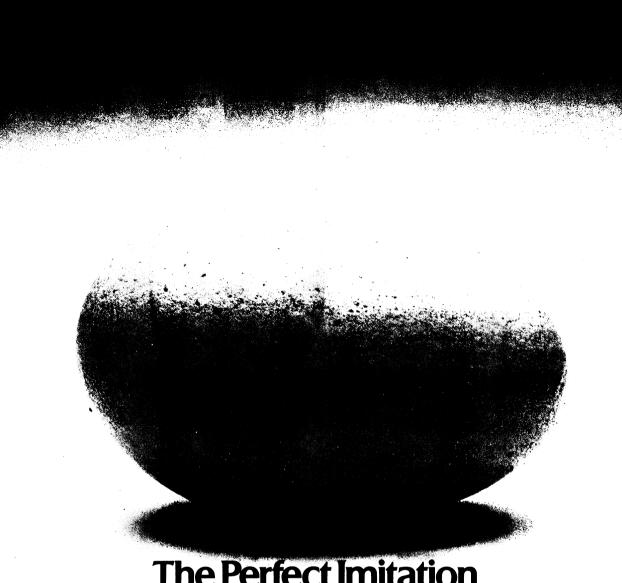
ex 5



Geistlich Chester Newton Bank Long Lane Chester CH2 3QZ

Telephone Chester 47534





## The Perfect Imitation

#### **Vamin**

The amino acid solution closely resembling W.H.O. egg protein standard.

The complete amino acid solution containing all 18 essential and nonessential L-form amino acids.

## Intralipid

The isotonic fat emulsion derived from soya beans.

The most concentrated, safe, source of energy available for nutrition.

Simultaneous infusion of Intralipid and Vamin is the complete way to fulfil metabolic needs, maintain positive nitrogen balance and establish a good nutritional state.

KabiVitrum %

KabiVitrum Ltd., Bilton House, Uxbridge Road, Ealing, London W5 2TH. Telephone 01-567 4717. Full prescribing information available on request.



XI Gut September 1977



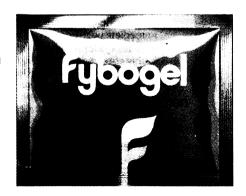
## DOROTHY'S REFINED HABITS HAVE LED TO A SERIOUS PROBLEM.

Many patients suffer from serious conditions such as haemorrhoids, diverticular disease, irritable colon or anal fissure, which may be associated with long standing dietary constipation.

These problems won't be resolved overnight. Fybogel, by quickly restoring natural fibre to the diet, relieves the constipation and rapidly improves the symptoms of the condition.



Fybogel sachets contain 3.5 g Ispaghula husk BPC Full prescribing information is available on request from Reckitt & Colman Pharmaceutical Division. Hull HU8 7DS Fybogel is a registered trademark Pt. No 0044/0041.



the natural way to end dietary constipation

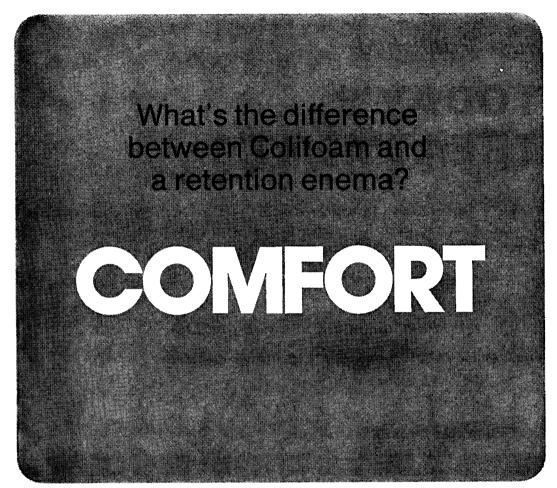
# ANAEROBIC INFECTIONS FIGURE SUPPOSITORIES are now available

'Flagyl' (metronidazole) has been shown to be the agent of choice for the specific chemotherapy of anaerobic bacterial infections both in treatment<sup>1-13</sup> and for prevention.<sup>2,5,14,15</sup>

'Flagyl' Suppositories may now be prescribed for adults and children whenever oral medication is inappropriate before abdominal and gynaecological surgery and during the immediate post-operative period.

This dosage form has proved to be highly effective in preventing and treating anaerobic sepsis after appendicectomy, colonic surgery, gynaecological and obstetric procedures. Among several hundred patients who received such rectal therapy no local or systemic adverse reaction was reported.

T.J. Am., Tred. d. .., 230, 11 oc., 15 to 15 to 15 to 16 to



Colifoam is a foam aerosol with special applicator, for treating ulcerative colitis and proctitis. Its active principle is hydrocortisone 10%, Trials<sup>1,2,3,4</sup> have shown that Colifoam is just as effective as retention enemas, but

much more comfortable

for patients. They prefer Colifoam
because it avoids the need
to instil large volumes
of liquid into the rectum,
it's quick and simple to
apply, and it's easily
retained without embarrassing
leakage or staining.

## **COLIFOAM**

hydrocortisone acetate foam

Further information and a data sheet available on request from: The Professional Relations Division, Stafford-Miller Limited, Hatfield, Herts.

## Stafford-Miller

1. Practitioner, Accepted for publication 2. Rosser, R.G. Treatment of Proctosigmoiditis Scientific Exhibit presented at 121st Annual Convention of the American Medical Association, June 1972 3. Kratzer, G.L. (1970) *Amer.J.clin.Res.* 1, 111 4. Scherl, N.D. and Scherl, B.A. (1973) *Dis.colon.Rectum.* Mar/Apr.

## Just Published

# TODAY'S TREATMENT/2

The first volume of *Today's Treatment* has proved a best-seller. Doctors clearly welcome its down-to-earth advice on the selection of effective remedies for common disorders. The second volume, just published, covers endocrine and metabolic diseases, cardiovascular disorders, and the alimentary system. Again the chapters are based on articles first published in the *BMJ*; and the advice provides busy practitioners with a reliable working manual.

ISBN 0 7279 0025 0 Demy Octavo Paperback 216 pages

Price: Inland £4.00; Abroad US \$10.00, including postage

#### STILL AVAILABLE—TODAY'S TREATMENT/1

This first volume contains articles published in the *BMJ* in 1974-75 on disorders of the skin and blood, and on psychiatric and neurological diseases. These simple clear accounts of assessment and management provide all the information needed for a rational choice of the best treatment for each individual patient.

ISBN 0 7279 0010 2 Demy Octavo Paperback 385 pages

Price: Inland £4.00; Abroad US \$10.00, including postage

Payment must be enclosed with order or a surcharge of 30p will be made for rendering invoices and statements

#### Order your copies now from

The Publisher, BRITISH MEDICAL JOURNAL, BMA House, Tavistock Square, London WC1H 9JR or through any leading bookseller

Gut September 1977 XV

## ANNALS OF THE RHEUMATIC DISEASES Volume 36 Supplement Number 1

## DETECTION AND MEASUREMENT OF CIRCULATING SOLUBLE ANTIGEN-ANTIBODY COMPLEXES AND ANTI-DNA ANTIBODIES

## Edited by R. N. Maini and E. J. Holborow

A supplement to the Annals of Rheumatic Diseases based on workshops to promote wider knowledge of laboratory methods available for measuring circulating immune complexes and anti-DNA antibodies has recently been published.

The supplement is in two parts. 15 methods for detecting soluble immune complexes are described in Section A, including the following: detection by electron microscopy, ultracentrifugation, anti-complementary activity, 125-I-Clq binding activity, binding to Clq-coated tubes, inhibition of complement dependent rosette formation, polyethylene glycol fractionation, rheumatoid factors and Clq precipitation, C3 activity associated with macromolecules, inhibition of agglutination of IgG-coated particles by rheumatoid factor or Clq, cryoprecipitation, radio-bioassay using macrophages, platelet aggregation and inhibition of antibody-mediated lymphocyte cytotoxicity. Authors include: Almeida, Stanworth, Mowbray, Lambert, Hayward, Hay, Zubler, Winchester, Williams, Masson, Cream, Holborow, Penttinen, Panayi and Soothill.

Section B is divided into three parts. The first contains the details and evaluation of a joint experiment for the detection of anti-DNA antibodies conducted by 12 laboratories in Europe and USA on a panel of 8 sera. The following laboratories were represented: Aarden (Amsterdam), Barnett (Los Angeles), Federlin (W. Germany), Hughes (London), Johnson (Taplow), Lambert (Geneva), Maini (London), Schur (Boston), Steward (London), Stollar (Boston), Tan (La Jolla), Talal (San Francisco). In the second part the methods used by the participants are described. In the third Dr. Barnett, who has a long association with this field, presents a personal view on the present state and future developments in the clinical application of tests for anti-DNA antibodies.

## Price: Inland £4.50; Abroad: US \$11.25 including postage

Payment must be enclosed with order or a surcharge of 30p will be made for rendering invoices and statements

#### ORDER YOUR COPY NOW FROM

The Publisher, ANNALS OF THE RHEUMATIC DISEASES, B.M.A. House, Tavistock Square, London WC1H 9JR

# STATISTICS by T. D. V. SWINSCOW AT SQUARE ONE

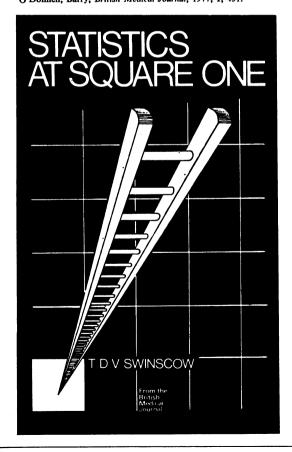
#### from the British Medical Journal

The statistical testing of data is indispensable in many types of medical investigation and a help on countless occasions in clinical practice. This book provides step-by-step instruction. Subjects covered include standard deviation,  $\chi^2$  tests, t tests, non-parametric tests, and correlation. The book includes sections on Fisher's exact probability test and rank correlation not published in the *B.M.J.* series. Methods specially adapted to pocket calculators.

"The ability to put symbols in sequence may well be one of the greatest advances in man's development... This excellent and attractive volume will give you an idea into which category an article or projected article fits. The ink you save may be your own. It is superb value."

O'Donnell, Barry, British Medical Journal, 1977, 1, 451.

"... the reader is introduced to the most important statistical concepts in a concise, straightforward manner. Dr. Swinscow's commonsense approach to his subject is outlined in the introduction..."
Murray, J. J., British Dental Journal, 1977, 142, 81.



First edition sold out. Second edition, revised and extended, now available.

PRICE: Inland £2.00 Overseas US\$5.00

Payment must be enclosed with order or a surcharge of 30p will be made for rendering invoices and statements

#### **ORDER YOUR COPY NOW**

From: The Publisher, British Medical Journal, BMA House, Tavistock Square, London WC1H 9JR

or through any leading bookseller

#### **GASTROENTEROLOGY**

an integrated approach

Edited by Iain E. Gillespie and T. J. Thomson

Second edition 304 pages illustrated £3.95 ISBN 0 443 01457 4

Gastroenterology is one of the most appropriate clinical subjects for an integrated approach, since patients with gastrointestinal disorders may require the help of experts in several medical disciplines.

In this edition the content has been updated throughout. Several new subjects are covered, including the diagnostic and management problems encountered by the general practitioner. Greater emphasis is given to the psychological disturbances which manifest themselves in symptoms referrable to the gastrointestinal tract.

The clinical application of new methods of investigation and management are stressed throughout the book, ensuring that all the information given is of practical value to the reader.

To be published December, 1977

#### **GUT HORMONES**

Edited by Stephen R. Bloom

600 pages approx £15.00 approx ISBN 0 443 01662 3

A completely comprehensive review of all aspects of gastrointestinal hormones. 85 of the world authorities in this field combine to produce an intelligible, fully up-to-date, but wide-ranging analysis of the subject and its actual and potential importance to clinicians.

23 Ravelston Terrace

Edinburgh EH4 3TL



## **Disorders of Protein Metabolism**

The Proceedings of a Symposium organized by the Association of Clinical Pathologists

Editors' foreword  $\bullet$  Antibody structure  $\bullet$  Immunoglobulin formation in B lymphoid cells  $\bullet$  Turnover of plasma proteins  $\bullet$  The use of electroimmunoassay for determining specific proteins as a supplement to agarose gel electrophoresis  $\bullet$  Protein profiles derived by automated immune precipitation  $\bullet$  Radioimmunoassay of IgE and IgE antibody and its clinical application  $\bullet$  Activation of complement in relation to disease  $\bullet$  Protein analyses in myelomatosis  $\bullet$  IgM paraproteins  $\bullet$   $\gamma$ - and  $\mu$ -Heavy chain diseases and related disorders  $\bullet$  Alpha-chain disease  $\bullet$  Benign paraproteinaemias  $\bullet$  Immune deficiency diseases  $\bullet$  Variations of immunoglobulins in disease  $\bullet$  Human tumour-associated and tumour-specific antigens: Some concepts in relation to clinical oncology.

PRICE: Inland £2.50; Abroad US\$6.25 including postage

This publication can be ordered now from: The Publishing Manager

## JOURNAL OF CLINICAL PATHOLOGY

B.M.A. House, Tavistock Square, London, WC1H 9JR