

Confident prescribing demands a solid basis

Your decision to prescribe 'Tagamet' is supported by more than just highly effective therapy. Since its introduction in 1976 'Tagamet' has generated more experience than most other standard therapies.

Your patient is probably not concerned that he is just one of an estimated 15,000,000 who have now been treated with 'Tagamet' worldwide; that the use of 'Tagamet' is being systematically monitored on a scale probably larger than that of any other drug; nor that nearly 4,000 publications reflect the status of 'Tagamet' as one of the

most widely studied drugs in medical history.

All of these facts determine your confidence when you decide to prescribe 'Tagamet'.

Your patient's concern is simply that it works.

Tagamet
cimetidine



puts you in control of gastric acid

Prescribing Information

Presentations 'Tagamet' Tablets, PL 0002/0063, each containing 200 mg cimetidine. 500, £64.75. 'Tagamet' Syrup, PL 0002/0073, containing 200 mg cimetidine per 5 ml. 200 ml, £6.29.

Indications Duodenal ulcer, benign gastric ulcer, reflux oesophagitis.

Dosage Duodenal ulcer: Adults, 200 mg t.d.s. with meals and 400 mg at bedtime (1.0 g/day) for at least 4 weeks; 400 mg b.d., with breakfast and at bedtime, is also effective (for full instructions see

Data Sheet). To prevent relapse, 400 mg at bedtime or 400 mg morning and at bedtime for at least 6 months. Benign gastric ulcer: Adults, 200 mg t.d.s. with meals and 400 mg at bedtime (1.0 g/day) for at least 6 weeks (for full instructions see Data Sheet). Reflux oesophagitis: Adults, 400 mg t.d.s. with meals and 400 mg at bedtime (1.6 g/day) for 4 to 8 weeks.

Cautions Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anticoagulants and some benzodiazepines

(see Data Sheet). Prolonged treatment: observe patients periodically. Exclude malignancy in gastric ulcer. Care in patients with compromised bone marrow (see Data Sheet). Avoid during pregnancy and lactation.

Adverse reactions Diarrhoea, dizziness, rash, tiredness. Rarely, mild gynaecomastia, reversible liver damage, confusional states (usually in the elderly or very ill), interstitial nephritis, acute pancreatitis. 23:3:81



Smith Kline & French Laboratories Limited, Welwyn Garden City, Hertfordshire AL7 1EY. © 1981 Smith Kline & French Laboratories Limited
'Tagamet' is a trade mark.

TG-AD1161



Glaxo



PRESCRIBING INFORMATION: DOSAGE AND ADMINISTRATION: ADULTS: TABLETS 150 mg TWICE DAILY FOR FOUR WEEKS FOR DUODENAL ULCER AND BENIGN GASTRIC ULCER. PATIENTS WITH A HISTORY OF RECURRENT ULCER MAY HAVE AN EXTENDED COURSE OF ONE TABLET DAILY FOR REFLUX OESOPHAGITIS. THE RECOMMENDED COURSE IS ONE TABLET TWICE DAILY FOR UP TO EIGHT WEEKS. IN PATIENTS WITH VERY HIGH GASTRIC ACID SECRETION (EG ZOLLINGER-ELLISON SYNDROME) THE STARTING DOSE IS 150 mg THREE

Now Gastric acid

TIMES DAILY AND THIS MAY BE INCREASED, AS NECESSARY, TO WITHIN THE RANGE 600 TO 900 mg PER DAY INJECTION. ZANTAC MAY BE GIVEN AS A SLOW INTRAVENOUS INJECTION OF 50 mg WHICH MAY BE REPEATED EVERY SIX TO EIGHT HOURS OR AS AN INTRAVENOUS INFUSION AT A RATE OF 25 mg PER HOUR FOR TWO HOURS REPEATABLE AT SIX TO EIGHT HOUR INTERVALS. **SIDE EFFECTS:** NO SERIOUS ADVERSE EFFECTS HAVE BEEN REPORTED. **PRECAUTIONS:** WHERE GASTRIC ULCER IS SUSPECTED, THE POSSIBILITY OF MALIGNANCY SHOULD BE EXCLUDED BEFORE THERAPY IS INSTITUTED. PATIENTS RECEIVING PROLONGED TREATMENT SHOULD BE OBSERVED PERIODICALLY. DOSAGE SHOULD BE REDUCED IN THE

PRESENCE OF SEVERE RENAL IMPAIRMENT (SEE DATA SHEET). AS WITH ALL DRUGS, ZANTAC SHOULD BE USED DURING PREGNANCY AND NURSING ONLY IF STRICTLY NECESSARY. **CONTRA-INDICATIONS:** THERE ARE NO KNOWN CONTRA-INDICATIONS TO THE USE OF ZANTAC. **BASIC NHS COST** (EXCLUSIVE OF VAT) 60 TABLETS £27.43, BOX OF 5 x 5 ml AMPOULES £3.21. PRODUCT LICENCE NUMBERS 150 mg TABLETS 4 0279 50 mg 5 ml AMPOULES 4 0280. FURTHER INFORMATION ON ZANTAC (TRADE MARK) IS AVAILABLE FROM: GLAXO LABORATORIES LIMITED, GREENFORD, MIDDLESEX UB6 0HE.

Zantac is the new histamine H_2 -antagonist from Glaxo, developed to add important benefits to the treatment of acid peptic disease.

Highly effective

Zantac's molecular structure confers important advantages in terms of specificity and duration of action.

Primarily however, Zantac promotes rapid, effective ulcer healing with sustained pain relief, both day and night.

Simple dosage regimens

Zantac was specially developed for B.D. dosage. The recommended treatment course for duodenal ulcer and benign gastric ulcer, is one 150 mg tablet twice daily for four weeks.

For extended maintenance therapy, the dosage is just one tablet taken nightly.

In the management of reflux oesophagitis, one tablet twice daily, for up to eight weeks, is recommended.

Highly specific action

Due to its innovatory molecular structure, Zantac does not cause problems with endocrine or gonadal function, or adverse effects on the central nervous system – even in elderly patients.

Similarly, as Zantac does not interfere with liver enzyme function, there are no unwanted effects on the metabolism of drugs such as diazepam and warfarin which may be prescribed concomitantly.

Zantac Injection ampoules are also available, containing 50 mg ranitidine in 5 ml for intravenous injection or infusion, for use in acute cases where oral therapy is inappropriate.

has a new H_2 blocker to worry about.

Zantac

RANITIDINE

HEALING OF PEPTIC ULCER

"by restoring gastric
physiology to normal"¹

"Carbenoxolone . . . acts by restoring gastric physiology to normal in strengthening the mucosal barrier, rather than by creating a non-physiological situation of hypochlorhydria, such as antacids and H₂ receptor antagonists produce."¹

1. XI Int. Cong. Gastroenterology,
Hamburg, June 1980.

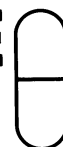
- Increased mucus production
- Reduced epithelial cell loss
- Reduced peptic secretion and activity



BIOGASTRONE
carbenoxolone
for gastric ulcer



DUOGASTRONE
carbenoxolone
for duodenal ulcer



Further information available from Winthrop Laboratories, Surbiton-upon-Thames, Surrey KT6 4PH. See prescribing data overleaf.

WINTHROP

BIOGASTRONE

carbenoxolone
for gastric ulcer

Carbenoxolone sodium BP 50 mg tablets.
PL 0071/5902. Bottles of 100. Basic NHS cost: 1
week's treatment £2.21 (21 tablets) – £4.42 (42
tablets).

Adult dose: 2 tablets t.i.d. after meals for the first
week then 1 tablet t.i.d. until ulcer is healed
(usually 4-6 weeks).

DUOGASTRONE

carbenoxolone
for duodenal ulcer

Carbenoxolone sodium BP. 50 mg
position-release capsules. Bottles of 28.
PL 0071/5903. Basic NHS cost: 1 day's treatment
(4 capsules) 85p.

Adult dose: 1 capsule swallowed whole and
unbroken with liquid q.i.d., 15-30 minutes before
meals. Patients may continue to take antacids
but anticholinergic drugs should be
discontinued. Treatment should continue for 6-12
weeks.

Safety factors: Biogastrone and Duogastrone

Contra-indications. Severe cardiac, renal or
hepatic failure. Patients on digitalis therapy,
unless serum electrolyte levels are monitored
weekly and measures taken to prevent the
development of hypokalaemia.

Precautions. Special care should be exercised
with patients pre-disposed to sodium and water
retention, potassium loss and hypertension (e.g.
the elderly and those with cardiac, renal or
hepatic disease) since carbenoxolone can
induce similar changes. Regular monitoring of
weight and blood pressure, which should
indicate such effects, is advisable for all patients.
A thiazide diuretic should be administered if
oedema or hypertension occurs.
(Spironolactone should not be used because it
hinders the therapeutic action of
carbenoxolone). Potassium loss should be
corrected by the administration of oral
supplements. No teratogenic effects have been
reported with carbenoxolone sodium, but
careful consideration should be given before
prescribing Biogastrone, Duogastrone or
Pyrogastone for women who may become
pregnant.

Biogastrone and Duogastrone are registered
trade marks.

Made under licence from Biorex Laboratories,
Brit. Pat. No. 1093286.

Further information available from Winthrop
Laboratories, Surbiton-upon-Thames, Surrey
KT6 4PH.

WINTHROP

Gastrointestinal and Related Hormones

*The Proceedings of a Symposium organised by
The Association of Clinical Pathologists*

Edited by G. Walters and S. R. Bloom

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of the gut: general and evolutionary aspects of
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Clinical features and diagnosis of alimentary
endocrine tumours ●

**Price: Inland £5.00;
Abroad US\$12.50,
including postage**

Payment must be enclosed with order or a surcharge of 50p
will be made for rendering invoices and statements.

The Publisher, *Journal of Clinical Pathology*
BMA House, Tavistock Square, London
WC1H 9JR



"WHAT GOES UP MUST COME DOWN"

Presentation White odourless aerosol foam containing hydrocortisone acetate 10%. **Uses** Anti-inflammatory corticosteroid therapy for the topical treatment of ulcerative colitis, proctosigmoiditis and granular proctitis. **Dosage and administration** One applicatorful inserted into the rectum once or twice daily for two or three weeks and every second day thereafter. Shake can vigorously before use (illustrated instructions are enclosed in each pack). Satisfactory response usually occurs within five to seven days. **Contra-indications and**

Warnings, etc. Local contra-indications to the use of intrarectal steroids include obstruction, abscess, perforation, peritonitis, fresh intestinal anastomoses and extensive fistulas. General precautions common to all corticosteroid therapy should be observed during treatment with 'Colifoam'. Treatment should be administered with caution in patients with severe ulcerative diseases because of their predisposition to perforation of the bowel wall. Safety during pregnancy has not been fully established. **Pharmaceutical**



WRONG.

Isaac Newton got it wrong. At least as far as COLIFOAM is concerned.

In a comparative trial (Ruddell WSJ et al. Gut 1980; 21:885) involving 30 patients with distal colitis: "Eight patients in the enema group reported difficulty in retaining the treatment, whereas none of the 15 patients receiving the foam [COLIFOAM] experienced any difficulty..."

COLIFOAM is far more convenient and far more comfortable to administer.

It is also highly effective. In the same

trial, COLIFOAM was shown to provide a slightly better objective improvement. The patients themselves reported an extremely significant preference ($p < 0.05$) for the modern COLIFOAM treatment.

Surprisingly, these superior benefits do not mean that it is more expensive. In fact, COLIFOAM can cost up to 34% less per dose than a standard proprietary enema*.

In terms of sheer convenience, patient comfort, cost and comparative efficacy – there is no better choice of treatment than COLIFOAM.

*based on one application daily.



Colifoam

hydrocortisone acetate foam.

A CHANGE FOR THE BETTER IN DISTAL INFLAMMATORY BOWEL DISEASE.

precautions Do not refrigerate, incinerate or puncture the aerosol can. Shake vigorously before use. Keep out of reach of children. **Package quantities** Aerosol canister containing 20g. (14 applications) plus a plastic applicator and illustrated leaflet. One applicatorful of 'Colifoam' provides a dose of approximately 90–110mg. of hydrocortisone acetate, similar to that used in a retention enema for the treatment of ulcerative colitis, sigmoiditis and proctitis.

Product licence no. 0036/0021.

Basic NHS Cost 20g (14 applications) plus applicator, £7.58.

Further information is available on request.

Stafford-Miller Ltd.,

Professional Relations Division,
Hatfield, Herts. AL10 0NZ.





"I feel I'm so full I could burst!
With this overblown stomach I'm cursed."
The Doctor smiled sweetly,
Then murmured discreetly,
"Well, we'd better try Maxolon first."

For relief from
heartburn and flatulence

Maxolon

metoclopramide

PRESCRIBING INFORMATION

Indications

Dyspepsia, heartburn and flatulence associated with the following conditions e.g. Reflux oesophagitis, Gastritis, Hiatus hernia, Peptic ulcer.

Adult Dosage (oral)

Adults 10mg
1 tablet or 10ml syrup 3 times a day.
Young adults (15-20 years) 5-10mg
½-1 tablet or 5-10ml syrup 3 times a day commencing at the lower dosage.

Note: Total daily dosage of Maxolon, especially for children and young adults should not normally exceed 0.5mg/kg body-weight.

Side-effects and Precautions

There are no absolute contra-indications to the use of Maxolon. Various extra-pyramidal reactions to Maxolon, usually of the dystonic type, have been reported. The incidence of these reactions in children and young adults may be increased if daily dosages higher than 0.5mg/kg body-weight are administered. The majority of reactions occur within 36 hours of starting treatment and the effects usually disappear within 24 hours of withdrawal of the drug. Should treatment of a reaction be required, an anticholinergic anti-Parkinsonian drug or a benzodiazepine may be used. Since extra-pyramidal symptoms may occur with both Maxolon and phenothiazines, care should be exercised in the event of both drugs being prescribed concurrently.

Raised serum prolactin levels have been observed during metoclopramide therapy; this effect is similar to that noted with many other compounds. Maxolon's action on the gastro-intestinal tract is antagonised by anticholinergics. Although animal tests in several mammalian species have shown no teratogenic effects, treatment with Maxolon is not advised during the first trimester of pregnancy.

Following operations such as pyloroplasty or gut anastomosis Maxolon therapy should be withheld for three or four days as vigorous muscular contractions may not help healing.

Availability and NHS Prices

Tablets 10mg (£7.70 for 100).
Syrup 5mg/5ml (£2.78 for 200ml).
A paediatric liquid presentation and ampoules for injection are also available.
Average daily cost of Maxolon tablets 23p.
Prices correct at January 1981.

Further information is available on request to the company.



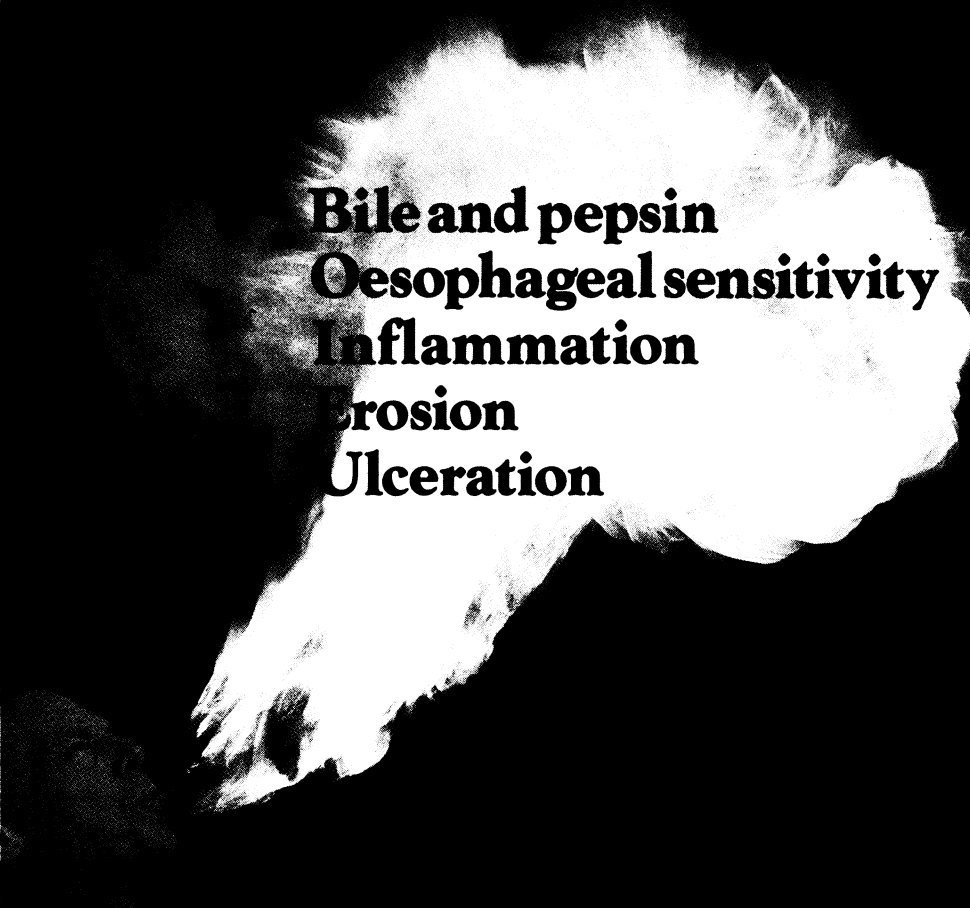
Beecham Research Laboratories

Brentford, England.
Maxolon and the BRL logo are trade marks.

PL 0038/0095 0098 5040 5041.

BRL 4026

Reflux oesophagitis **more than a little bit of acid**



Bile and pepsin
Oesophageal sensitivity
Inflammation
Erosion
Ulceration

PYROGASTRONE

carbenoxolone/magnesium trisilicate/dried aluminium hydroxide gel

more than an antacid
-a positive healing treatment

Pyrogastrone is a registered trade mark. Made under licence from Biorex Laboratories, Brit. Pat. No. 1390683. Full information from Winthrop Laboratories, Surbiton-upon-Thames, Surrey. **WINTHROP**

**Can De-Nol.....
heal peptic ulcers as
effectively as cimetidine
with a lower relapse rate,
an established safety
record and at an
economic price?**

De-Nol

Tripotassium dicitrato bismuthate.

can.

For further information contact:

Brocades Great Britain Ltd
Brocades House, Pyrford Road West Byfleet
Surrey KT14 6RA. Telephone: Byfleet 45536.

References Kang, J.Y. & Piper, D.W., Aust. N.Z. Med., 10, 111 (1980). Tanner et al, Med. J. Aust., 1, 1-2 (1979). Cowen et al, Aust. N.Z. Med., 10, 364-365 (1980). Martin et al, Lancet, 3rd January 1981, 7-10. Martin, D.F., Mod. Med., April 1980.

De-Nol contains 120mg tri-potassium di-citrate bismuthate (as Bi_2O_3) per 5ml. For the treatment of gastric and duodenal ulcers. Oral administration, usually 5ml diluted with 15ml water four times a day on an empty stomach, half an hour before each of the three main meals and two hours after the last meal of the day. Contra-indicated theoretically in cases of severe renal insufficiency and in pregnancy. De-Nol may inhibit the efficacy of orally administered tetracyclines. Blackening of the stool usually occurs and darkening of the tongue has been reported. 28 day (560ml) treatment pack £10.19 P/L No. 0166/5024.



Ease the spasm. Ease the mind.

LIBRAXIN

clidinium bromide and chlordiazepoxide

Clidinium bromide to calm the gut. Chlordiazepoxide to calm the mind.

Indications For the control of hypersecretion, hypermotility and emotional factors associated with gastro-intestinal disorders, such as nervous dyspepsia, peptic ulcer, cardiospasm, pylorospasm, nervous or irritable colon.

Dosage 1 or 2 tablets three or four times daily. In elderly patients, it is recommended that the initial dose be 1 tablet twice daily.

Contra-indications Because of its anticholinergic effects, Libraxin should not be given to patients suffering from glaucoma or prostatic enlargement.

Precautions Patients should avoid alcohol while under treatment with Libraxin, since the individual

ROCHE

response cannot be foreseen. Patients' reactions (driving ability, operation of machinery, etc.) may be modified to a varying extent, depending on dosage and individual susceptibility. The established medical principle of prescribing medicaments in early pregnancy only when absolutely indicated should be observed.

Side-effects Side-effects are infrequent and are controlled by reduction of dosage. They include

drowsiness, muscle weakness, dryness of the mouth, blurring of vision, constipation and hesitancy of micturition.

Presentation Libraxin tablets containing 5mg chlordiazepoxide and 2.5mg clidinium bromide in packings of 100 and 500.

Basic NHS Cost 1 tablet 3 times daily 7.4p/day ex 500 pack.

Licence Number 0031/5024

Licence Holder Roche Products Limited, PO Box 8 Welwyn Garden City, Hertfordshire AL7 3AY
Libraxin is a trade mark