

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

Presentation 'Tagamet' Tablets, PL 0002/0063, each containing 200 mg cimetidine. 112 (treatment pack), £16.30; 500, £72.75. 'Tagamet' Syrup, PL 0002/0073, containing 200 mg cimetidine per 5 ml. 200 ml, £7.86.

Indications Duodenal ulcer, benign gastric ulcer, reflux oesophagitis.

Dosage Duodenal ulcer: Adults, 400 mg b.d., with breakfast and at bedtime, or 200 mg t.d.s. with meals and 400 mg at bedtime

(1.0 g/day) for at least 4 weeks (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).

Potential of oral anticoagulants and phenytoin (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 gynecomastia, reversible liver damage, confusional states (usually in the elderly or very ill), interstitial nephritis, acute pancreatitis.

Legal category POM 1:2.82.

SK&F
a SmithKline company

Smith Kline & French Laboratories Limited, Welwyn Garden City, Hertfordshire AL7 1EY. © 1982 Smith Kline & French Laboratories Limited
'Tagamet' is a trade mark

TG:AD1161/2





"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.



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

Just published!

Third Edition of GASTROENTEROLOGY

(Concise Medical Textbook)

By

Ian A. D. Bouchier MD, FRCP(Lond), FRCP(Edin)
Professor of Medicine, University of Dundee
and Honorary Consultant Physician, Ninewells
Hospital and Medical School, Dundee.

This well-established text on gastrointestinal,
liver and pancreatic disease has proved of
great value to undergraduates at senior clinical
level and postgraduates working for higher
degrees. In this third edition the subject matter
has been rearranged and much new material
added. Although essentially a clinical
approach to gastroenterology, basic pathology
as well as physiological aspects of
gastrointestinal function are discussed, and
increased emphasis has been put on the
surgical approach to gastrointestinal diseases.

"... it is a book to be read with great pleasure
and to be recommended." *British Journal of
Hospital Medicine (of the 2nd edition)*

"... it still remains essentially a small book,
but manages to include all the essentials of
gastroenterology in a very readable form and
well reflects the author's wide experience."
Gut (of the 2nd edition)

1982 · 3rd edition · 398 pp · 120 illus · paperback · £8.00



**BAILLIÈRE
TINDALL**

Greycoat House, 10 Greycoat Place
London SW1P 1SB

Price subject to change without notice



A NEW WAVE IN GALLSTONE TREATMENT

- * For the dissolution of cholesterol stones in a functioning gall bladder.
- * Reported effective in up to 80% of appropriate patients.
- * Diarrhoea is very uncommon.
- * No adverse reports on liver function.
- * Simple dosage aids patient compliance.

Destolit*
URSODEOXYCHOLIC ACID
DISSOLVES GALLSTONE PROBLEMS



Presentation: Plain white tablet containing 150mg ursodeoxycholic acid. **Uses:** DESTOLIT is indicated for the dissolution of radiolucent (ie non-radio opaque) cholesterol gallstones in patients with a functioning gallbladder. **Dosage:** The daily dose for most patients is 3 or 4 tablets of 150mg according to body weight. This dose should be divided into 2 administrations after meals, with one administration always to be taken after the evening meal. A daily dose of about 8 to 10mg/kg will produce cholesterol desaturation of bile in the majority of cases. The duration of treatment required to achieve gallstone dissolution will usually not be extended beyond 2 years and should be monitored by regular cholecystograms. Treatment should be continued for 3-4 months after the radiological disappearance of the gallstones. Any temporary discontinuation of treatment, if prolonged for 3-4 weeks, will allow the bile to return to a state of supersaturation and will extend the total time required for litholysis. **Contra-indications, Warnings etc.:** In common with all drugs, it is advised that ursodeoxycholic acid should not be given during the first trimester of pregnancy. In cases of conception during treatment, therapy should be discontinued. Active gastric or duodenal ulcers are contra-indications, as are hepatic and intestinal conditions interfering with the enterohepatic circulation of bile acids. Excessive dietary intake of calories and cholesterol should be avoided, a low cholesterol diet will probably improve the effectiveness of DESTOLIT tablets. It is also recommended that drugs known to increase cholesterol elimination in bile, such as oestrogenic hormones, oral contraceptive agents and certain blood cholesterol lowering agents should not be prescribed concomitantly. **Side effects:** DESTOLIT is normally well tolerated. Diarrhoea has been found to occur only occasionally. No significant alterations have so far been observed in liver function. **Overdosage:** It is unlikely that overdosage will cause serious adverse effects. **Legal category:** POM. **Package quantities:** Blister packs of 60 tablets. **Basic N.H.S. cost:** £19.40 per 60 tablets (Nov. 1981). **Product licence number:** 0341/0022. **Lepetit Pharmaceuticals Limited**, Meadowbank, Bath Road, Hounslow, Middlesex TW5 9QY. A subsidiary of The Dow Chemical Company. DESTOLIT* is a trade mark of The Dow Chemical Company. Further information on request.



**"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
1/2-1 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



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

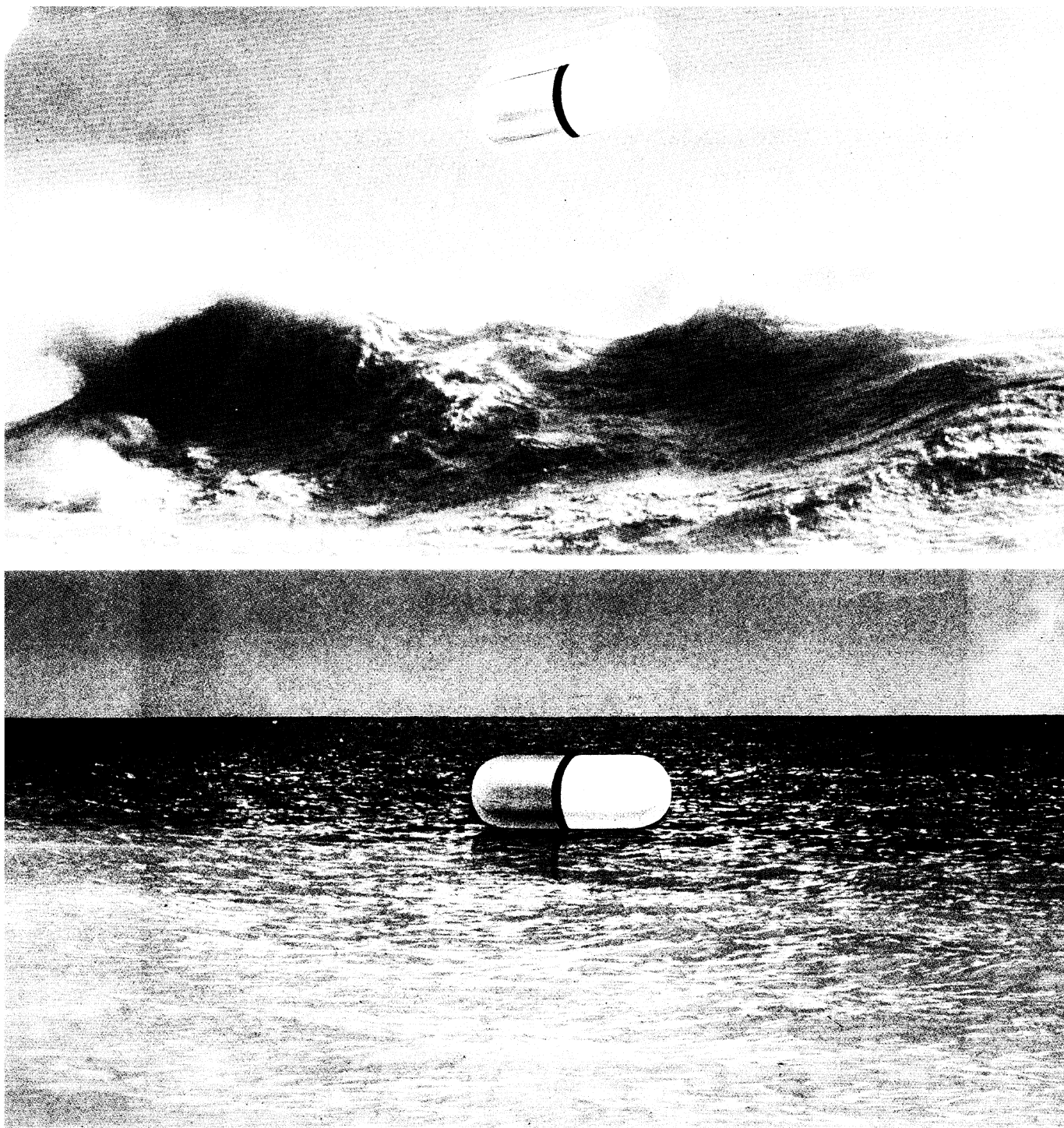
drowsiness, muscle weakness, dryness of the mouth, blurring of vision, constipation and hesitancy of micturition.

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



COLPERMIN CALMS THE IRRITABLE BOWEL

enteric-coated peppermint oil

Now for the first time, the well-proven therapeutic agent peppermint oil, can be delivered direct to the colon.

Colpermin, a newly developed enteric-coated capsule, delivers the oil precisely

where it is needed. This provides an improved, rapid, and highly effective method of relieving spasmodic pain, distension and disturbed bowel habit - the dominant symptoms of the irritable bowel syndrome.

Presentation: Enteric coated gelatine capsule. Each contains 0.2 ml standardised peppermint oil B.P. Ph. Eur. **Uses:** For the treatment of symptoms of discomfort and of abdominal colic and distension experienced by patients with irritable bowel syndrome. **Dosage and Administration:** One capsule three times a day, preferably before meals and taken with a small quantity of water. The capsules should not be taken immediately after food. The dose may be increased to two capsules, three times a day when discomfort is more severe.

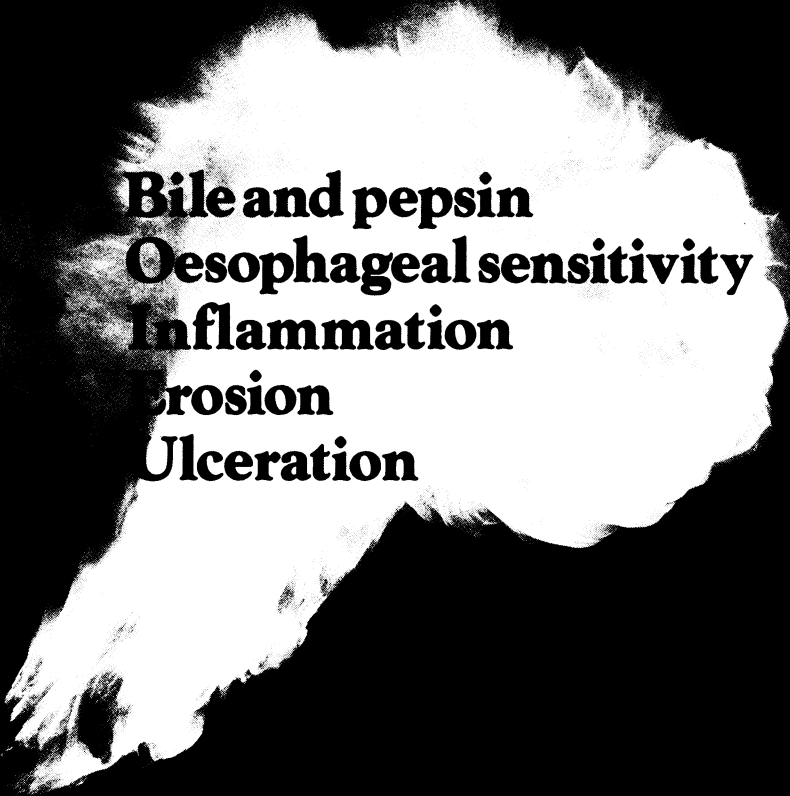
The capsules should be taken until symptoms resolve, usually within one or two weeks. At times when symptoms are more persistent, the capsules can be continued for longer periods of between 2 to 3 months. There is no experience in the use of these capsules in children under the age of 15 years. **Contraindications, Warnings, etc. Precautions:** The capsule should not be broken or chewed. Patients who already suffer from heartburn, sometimes experience an exacerbation of these symptoms when taking the capsule.

Treatment should be discontinued in these patients. **Adverse effects:** Heartburn, sensitivity reactions to menthol which are rare, and include erythematous skin rash, headache, bradycardia, muscle tremor and ataxia. **Product Licence:** PL 0424/0009. **Basic NHS Cost:** £10.00 per 100. UK and Foreign Patents pending. Colpermin is a trade mark of Tillotts Laboratories. Further information is available from Tillotts Laboratories, Henlow Trading Estate, Henlow, Beds.

Tillotts
LABORATORIES

Reflux oesophagitis

more than a little bit of acid



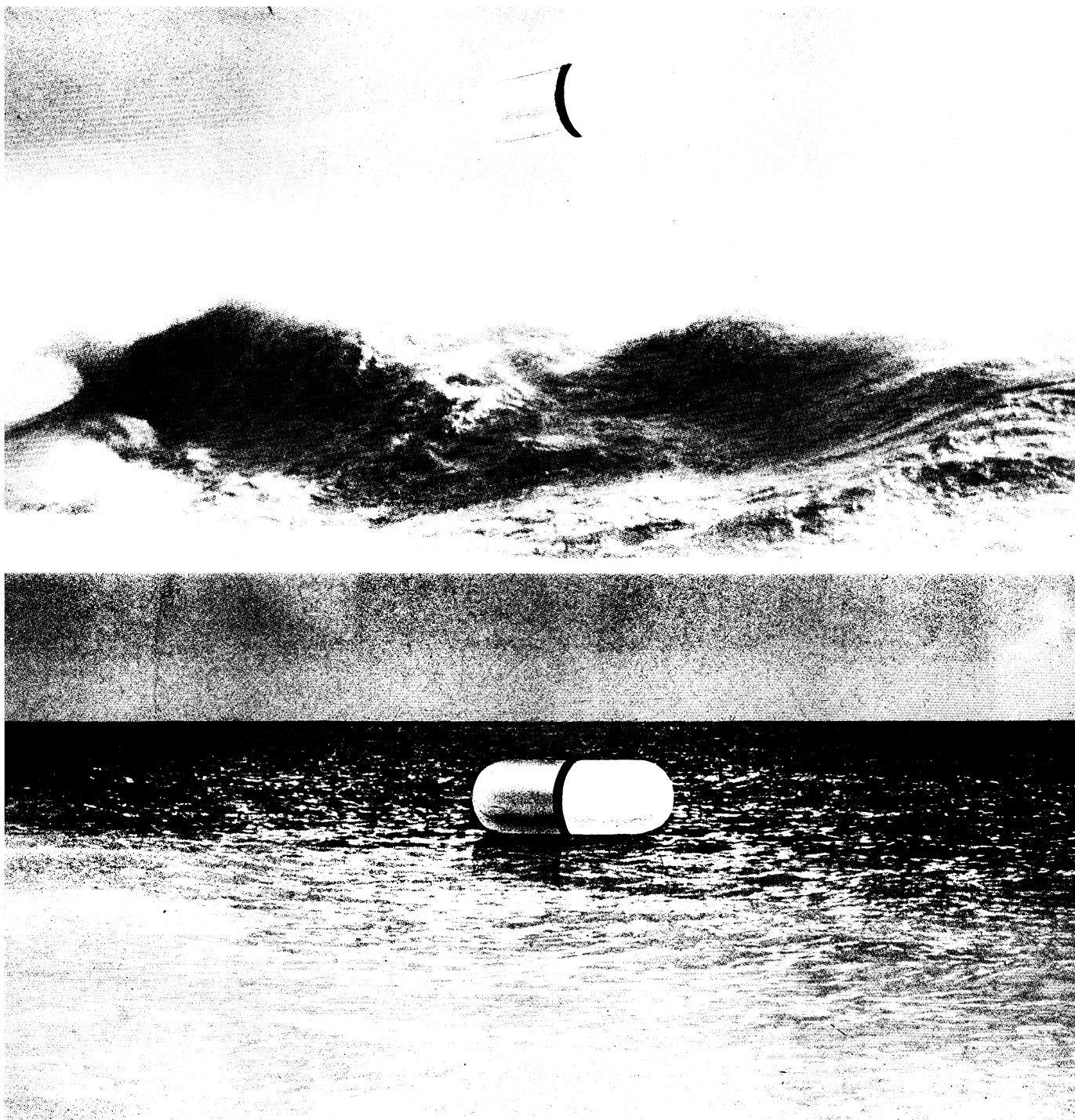
**Bile and pepsin
Oesophageal sensitivity
Inflammation
Erosion
Ulceration**

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**



COLPERMIN CALMS THE IRRITABLE BOWEL

enteric-coated peppermint oil

Now for the first time, the well-proven therapeutic agent peppermint oil, can be delivered direct to the colon.

Colpermin, a newly developed enteric-coated capsule, delivers the oil precisely

where it is needed. This provides an improved, rapid, and highly effective method of relieving spasmodic pain, distension and disturbed bowel habit - the dominant symptoms of the irritable bowel syndrome.

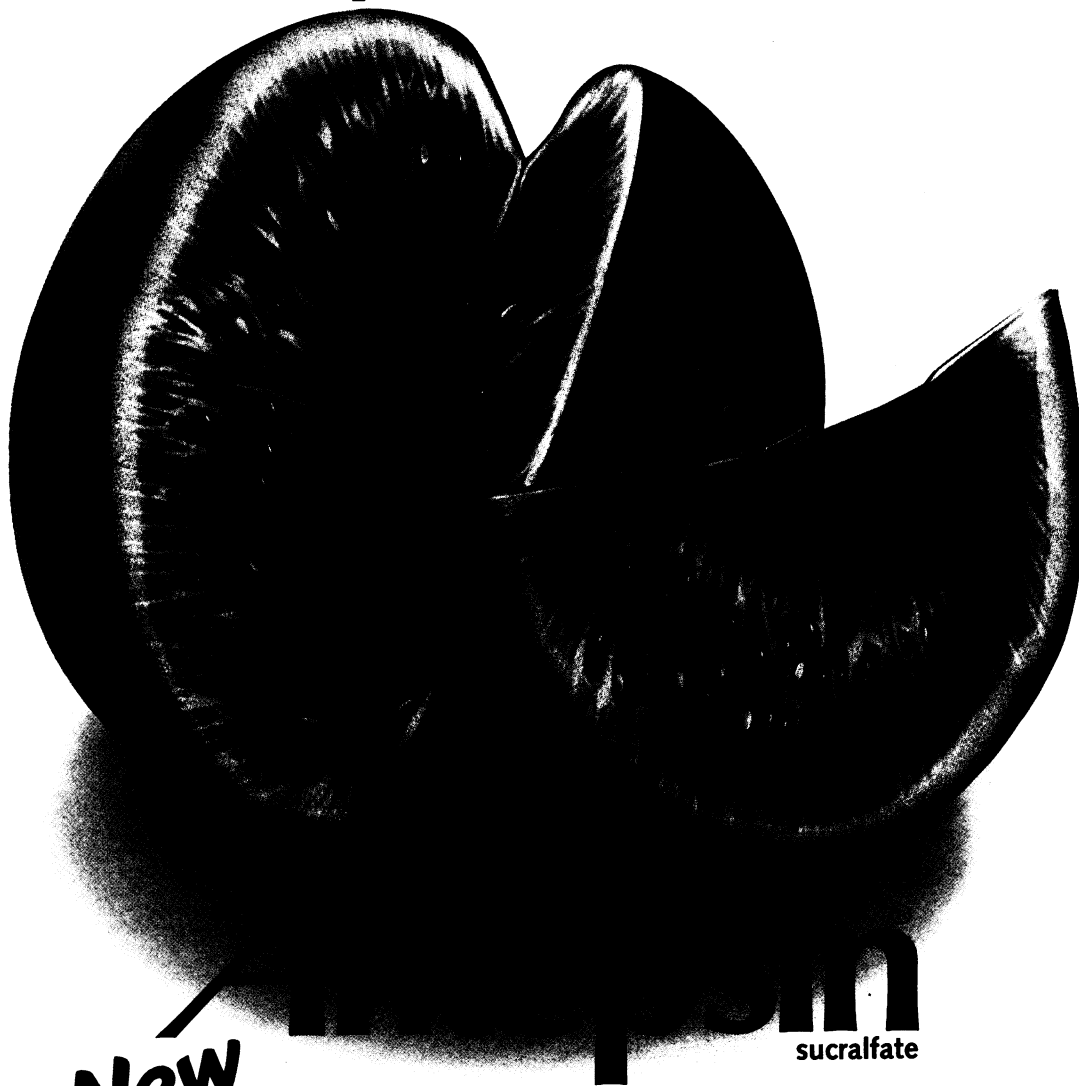
Presentation: Enteric-coated gelatine capsule. Each contains 0.2 ml standardised peppermint oil B.P. Ph. Eur. **Uses:** For the treatment of symptoms of discomfort and of abdominal colic and distension experienced by patients with irritable bowel syndrome. **Dosage and Administration:** One capsule three times a day, preferably before meals and taken with a small quantity of water. The capsules should not be taken immediately after food. The dose may be increased to two capsules, three times a day when discomfort is more severe.

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Treatment should be discontinued in these patients. **Adverse effects:** Heartburn, sensitivity reactions to menthol which are rare, and include erythematous skin rash, headache, bradycardia, muscle tremor and ataxia. **Product Licence:** PL 0424 0009. **Basic NHS Cost:** £10.00 per 100. UK and Foreign Patents pending. Colpermin is a trade mark of Tillotts Laboratories. Further information is available from Tillotts Laboratories, Henlow Trading Estate, Henlow, Beds.

Tillotts
LABORATORIES

A fresh approach to peptic ulcers



New

non-systemic ulcer healer

Prescribing Information

Presentation Antepsin Tablets 1 gram are white, oblong, biconvex, uncoated tablets scored and embossed 1239 on one side and Ayerst on the other. Each tablet contains 1 gram sucralfate. **Uses** For the treatment of duodenal ulcer, gastric ulcer and chronic gastritis. **Dosage and Administration** For oral administration. **Adults** - Usual dose 1 gram 4 times a day. Maximum daily dose 8 grams. Four to six weeks treatment is usually needed for ulcer healing but up to twelve weeks may be necessary in resistant cases. Antacids may be used as required.

* ANTEPSIN is a registered Trade Mark.

for relief of pain. **Contra-Indications, Precautions, Warnings, etc.** **Contra-Indications** There are no known contra-indications. **Precautions** 1. Concomitant administration with some oral anti-infectives such as tetracyclines may interfere with absorption of the latter. 2. The product should only be used with caution in patients with renal dysfunction. 3. As with all medicines, Antepsin should not be used in early pregnancy unless considered essential. **Side Effects** A low incidence of mild side effects, e.g. constipation, has been reported. **Legal Category** POM. **Package Quantities** Antepsin 1 gram - Securitainers of 100. **Pharmaceutical Precautions** No special

Further information is available on request to the Company.

requirements for storage are necessary. **Product Licence Numbers** PL No. 0607/0045 PA No. 149/4/2. **Basic N.H.S. Price** Average daily cost 50p



Ayerst Laboratories Ltd.,
South Way, Andover, Hampshire SP10 5LT.
Telephone: 0264 58711.

Distributors in Ireland: Ayerst Laboratories Ltd.,
765 South Circular Road, Islandbridge, Dublin 8.



COLPERMIN CALMS THE IRRITABLE BOWEL

enteric-coated peppermint oil

Now for the first time, the well-proven therapeutic agent peppermint oil, can be delivered direct to the colon.

Colpermin, a newly developed enteric-coated capsule, delivers the oil precisely

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Tillotts
LABORATORIES

The fast, simple and promote peptic

PRESCRIBING INFORMATION: DOSAGE AND ADMINISTRATION: THE USUAL ADULT DOSE IS ONE 150mg TABLET TWICE DAILY. IT IS NOT NECESSARY TO TIME THE DOSE IN RELATION TO MEALS. IN MOST CASES OF DUODENAL ULCER AND BENIGN GASTRIC ULCER, HEALING WILL OCCUR IN FOUR WEEKS. PATIENTS WITH A HISTORY OF RECURRENT ULCER MAY HAVE AN EXTENDED COURSE OF ONE TABLET DAILY AT BEDTIME. FOR REFLUX OESOPHAGITIS THE RECOMMENDED COURSE FOR ADULTS IS ONE TABLET TWICE DAILY FOR UP TO EIGHT WEEKS. **SIDE EFFECTS:** NO SERIOUS ADVERSE EFFECTS HAVE BEEN REPORTED IN PATIENTS TREATED WITH ZANTAC TABLETS. **PRECAUTIONS:** WHERE GASTRIC ULCER IS SUSPECTED, THE POSSIBILITY OF MALIGNANCY SHOULD BE EXCLUDED BEFORE THERAPY IS INSTITUTED. PATIENTS RECEIVING PROLONGED TREATMENT SHOULD BE EXAMINED PERIODICALLY. DOSAGE SHOULD BE REDUCED IN THE PRESENCE OF SEVERE

And specific way to ulcer healing



80% ulcers healed in one month¹

Rapid relief of pain, rapid healing of the ulcer.

No dosage simpler in peptic ulcer treatment

Specifically developed as b.d. treatment.

The benefits of highly specific H₂ blockade

Zantac treatment has not been shown to affect the central nervous system,^{1,2} to exert anti-androgenic effects^{3,4} or to cause drug interaction⁵.

NEW

Zantac

RANITIDINE

A British advance from Glaxo

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 £274.3. PRODUCT
LICENCE NUMBER 4/0279. FURTHER INFORMATION ON ZANTAC (TRADE MARK) IS AVAILABLE FROM: GLAXO LABORATORIES LTD., GREENFORD, MIDDX. UB6 0HE.
REFERENCES: 1. DATA ON FILE, GLAXO GROUP RESEARCH. 2. BORIES, P. *ET AL.* LANCET 1980; 2 (8197): 755. 3. PEDEN, N. R. *ET AL.* ACTA ENDOCRINOLOGICA 1981; 96:
564-568. 4. NELIS, G. E. AND VAN DE MEENE, J. G. C. POSTGRAD. MED. J. 1980; 56: 478-480. 5. HENRY, D. A. *ET AL.* BR. MED. J. 1980; 2: 775-777.

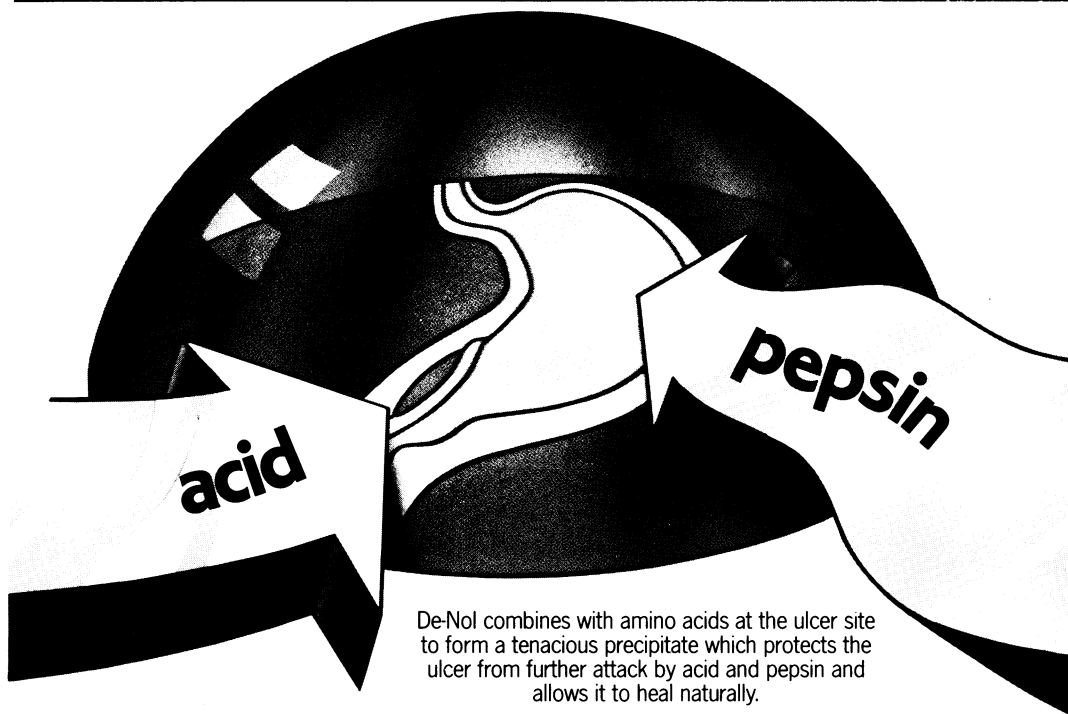
Glaxo

DE-NOL[®]

Tri-potassium di-citrato bismuthate (colloidal bismuth subcitrate)

protects longer

In both gastric and duodenal ulcer, De-Nol is just as effective as cimetidine,^{1,4} has a non-systemic mode of action and has a lower relapse rate in duodenal ulcer.¹



De-Nol combines with amino acids at the ulcer site to form a tenacious precipitate which protects the ulcer from further attack by acid and pepsin and allows it to heal naturally.

References: 1. Martin et al, Lancet **1**, 7-10(1981). 2. Kang et al, Aust.N.Z.Med. **10**, 111(1980). 3. Cowen et al, Aust.N.Z.Med. **10**, 364(1980). 4. Tanner et al, Med.J.Aust. **1**, 1-2(1979).

Prescribing information De-Nol contains 120mg tri-potassium di-citrato bismuthate (as Bi₂O₃) 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 on theoretical grounds in cases of severe renal insufficiency and in pregnancy. De-Nol may inhibit the efficacy of orally administered tetracyclines. Blackening of the stool can occur and darkening of the tongue has been reported. 28 day (560ml) treatment pack £10.19. P/L No. 0166/5204.

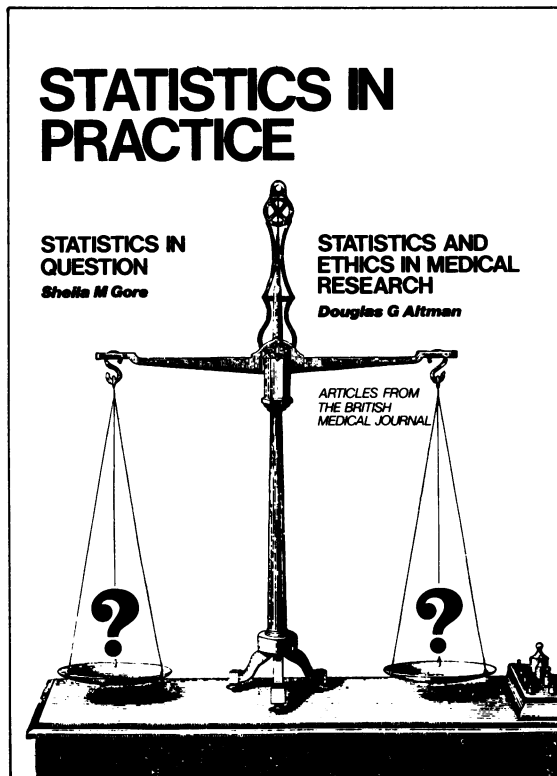
Brocades|Great Britain|Limited Brocades House, Pyrford Road, West Byfleet, Surrey.

STATISTICS IN PRACTICE

No doctor can afford to ignore statistics: most modern medical research uses statistics. This important and authoritative book, which is a collection of articles that have appeared in the BMJ, provides clear information on designing studies, applying statistical techniques, and interpreting studies that use statistics. It can be easily understood by those with no statistical training and should be read by all those who want to keep abreast of new developments.

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March 1982

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