Reflux controlled!

Heartburn and regurgitation; strengthening the lower oesophageal sphincter should be the primary goal of medical treatment.

* Maxolon is clinically effective in increasing sphincter tone.[1,2,3,4,5,6,7]
* Maxolon reduces frequency and duration of reflux.[3,4]
* Maxolon eliminates or alleviates even severe symptoms.[8,9,10,11]

Maxolon–controlling heartburn by tightening the sphincter.

Prescribing Information

Indications

Heartburn, dyspepsia and flatulence associated with the following conditions e.g. Reflux oesophagitis, Gastritis, Hiatus hernia, Peptic ulcer. Nausea and vomiting associated with e.g. Gastro-intestinal disorders.

Adult dosage (Oral, IM or IV)

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

Adults: 10 mg three times daily

Young Adults (15-20 years): 5-10 mg three times daily, commencing at the lower dosage

For dosage in children, please consult Data Sheet.

Side effects and precautions

There are no absolute contra-indications to the use of Maxolon.

If vomiting persists the patient should be re-assessed to exclude the possibility of an underlying disorder, e.g. cerebral irritation.

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 0.5 mg/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 since vigorous muscular contractions may not help healing.

Availability and NHS prices

Tablets 10 mg (£9.78 for 100).
Syrup 5 mg/5 ml (£3.36 for 200 ml).
Ampoules for injection 10 mg (£2.69 for 10).
Paediatric Liquid 1 mg/1 ml (£1.52 for 15 ml).
Prices correct at August 1982.

Further information is available on request to the company

Beecham Research Laboratories
Brentford, England

PL 0038/0095 0098 5040 5041.

Maxolon and the BRL logo are trade marks

References: 1. Br Med J (1979) **1**: 3-4, **2.** Gut (1973) **14**: 275-279, **3.** Gut (1973) **14**: 380-382, **4.** Gastroenterology (1975) **68** (5): 1114-1118, **5.** Gastroenterology (1976) **70** (4): 484-487, **6.** Anaesth Intens Care (1978) **6** (1): 26-29, **7.** Gastroenterology (1980) **78** (5) pt 2: 1292, **8.** Tijdschr Gastro-Enterol (1977) **20** (3): 155-162, **9.** Dt Z Verdau-u-Stoffwechselkr (1981) **41**: 13-17, **10.** Postgrad Med J (July Suppl. 1973) 104-106, **11.** Z Gesund Inn Med. (1981): 122-124.

BRL 4033

Gastrozepin is a selective antimuscarinic agent which provides balanced control of gastric secretion without markedly affecting other peripheral receptor sites. This gastro-selective action means that, in practice, Gastrozepin is a well-tolerated drug which heals peptic ulcers.

Gastrozepin DOES NOT . . .
- **rely on acid reduction alone**
- **rely on pepsin reduction alone**
- **rely on mucosal protection alone**
- **profoundly affect intragastric pH**

Gastrozepin DOES . . .
- **relieve daytime pain**
- **relieve night-time pain**
- **reduce antacid intake**
- **heal peptic ulcers with one 50 mg tablet b.d.**

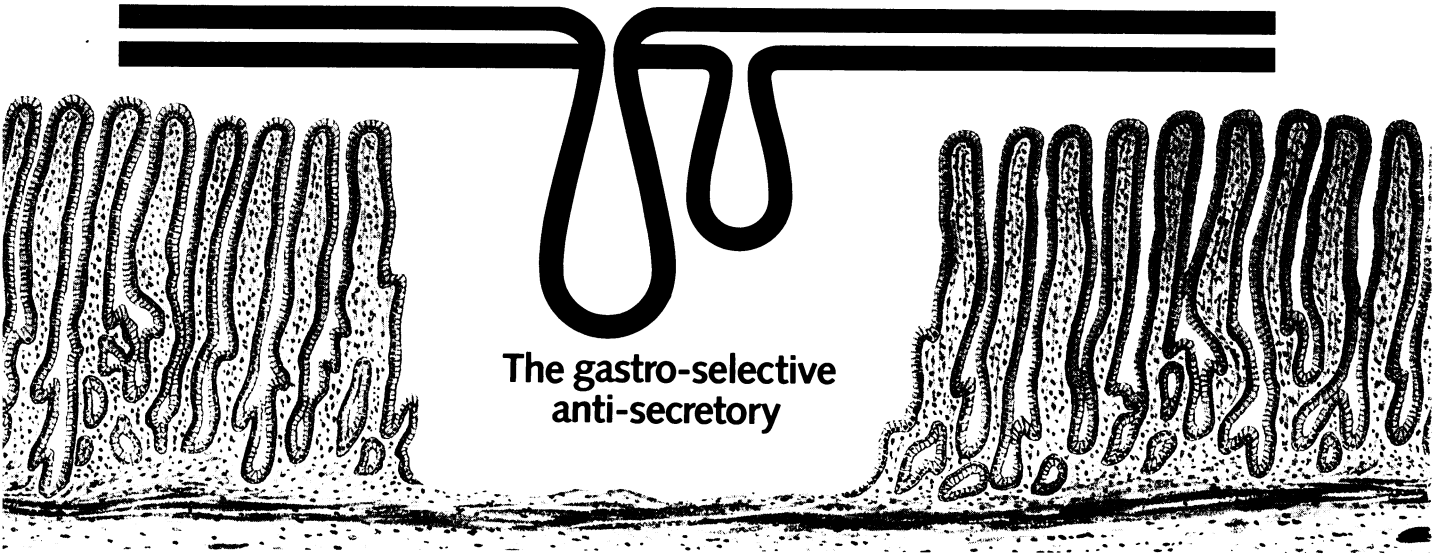
For the treatment of peptic ulcer

Twice daily

GASTRO SELECTIVE

Gastrozepin®

pirenzepine



The gastro-selective anti-secretory

Prescribing Information; Presentation: White tablets each containing 50 mg of pirenzepine dihydrochloride scored on one face with "G" on one side of the score and "50" on the other. The obverse is impressed with the symbol ℬ **Uses:** Gastrozepin is indicated in the treatment of gastric and duodenal ulcers. **Dosage:** 50 mg at bedtime and in the morning before meals. In severe cases the total daily dose may be increased to 150 mg in divided doses. Continuous therapy may be recommended for up to three months. **Contra-indications, Warnings etc:** Interaction with sympathomimetics and monoamine oxidase inhibitors and Gastrozepin is a theoretical possibility. Gastrozepin is not recommended during pregnancy although in animal experiments no teratogenic effects were noted. Breast milk concentration after therapeutic doses is unlikely to affect the infant. *Side effects:* occasionally transitory dry mouth and accommodation difficulty may occur. Treatment of overdosage: entirely symptomatic. There is no specific antidote. **Basic NHS price:** 50 mg tablets, 60 £20.50. **Product Licence No.:** 50 mg tablets, PL0014/0260.

ℬ Further information is available on request
The Boots Company PLC Nottingham

Gastrozepin® Trade Mark

"Cimetidine ['Tagamet'] remains the drug of first choice both for symptomatic relief and for ulcer healing."

Tagamet
cimetidine

puts you in control of gastric acid
THOROUGHLY EXPLORED

Reference: 1. Gazzard B. Do any drugs actually cure ulcers? General Practitioner 1983 January, 26-44

Prescribing Information

Presentations - Tagamet Tablets PL 0002/0092, each containing 400 mg cimetidine: 56 £16.61. Tagamet Tablets PL 0002/0063, each containing 200 mg cimetidine: 500 £74.15. Tagamet Syrup PL 0002/0073, containing 200 mg cimetidine per 5 ml: 200 ml £5.17. **Indications** - Duodenal ulcer, benign gastric ulcer, recurrent and stomal ulceration, oesophageal reflux disease. Other conditions where reduction of gastric acid is beneficial: prophylaxis of stress-induced gastrointestinal haemorrhage and of acid aspiration (Mendelsons's syndrome), malabsorption and ileal loss in short bowel syndrome, Zollinger-Ellison syndrome. **Dosage** - Usual dosage: Adults: Duodenal ulcer 400 mg b.d. with breakfast and at bedtime, or 200 mg t.d.s. with meals and 400 mg at bedtime; 1.6 g/day for at least 4 weeks. To prevent relapse: 400 mg at bedtime or 400 mg morning and at bedtime for at least 6 months. Benign gastric ulcer 200 mg t.d.s. with meals and 400 mg at bedtime; 1.6 g/day for at least 6 weeks. Oesophageal reflux disease: 400 mg t.d.s. with meals and 800 mg at bedtime; 1.6 g/day for 4 to 8 weeks. Prophylaxis of stress-induced gastrointestinal haemorrhage: as for acid reduction to maintain intragastric pH above 4. Prophylaxis of aspiration syndrome: 400 mg 90-120 minutes before induction of [illegible] anaesthesia; 400 mg at start of labour then 200 mg every [illegible] hours to maximum 1.6 g. Do not use Tagamet syrup. Zollinger-Ellison syndrome: up to 2400 mg/day in divided doses. Reduction of stomal ulceration and short bowel syndrome: 400 mg t.d.s. and [illegible]. **Contraindications** - [illegible]. **Cautions** - [illegible]. **Adverse reactions** - [illegible]. **Legal category** - [illegible].

SK&F SMITH KLINE & FRENCH LABORATORIES LIMITED, Welwyn Garden City, Hertfordshire AL7 1EY

TG/AD/43/1

For those who can't make a meal of it

3 SACHETS DAILY

EASY MIX

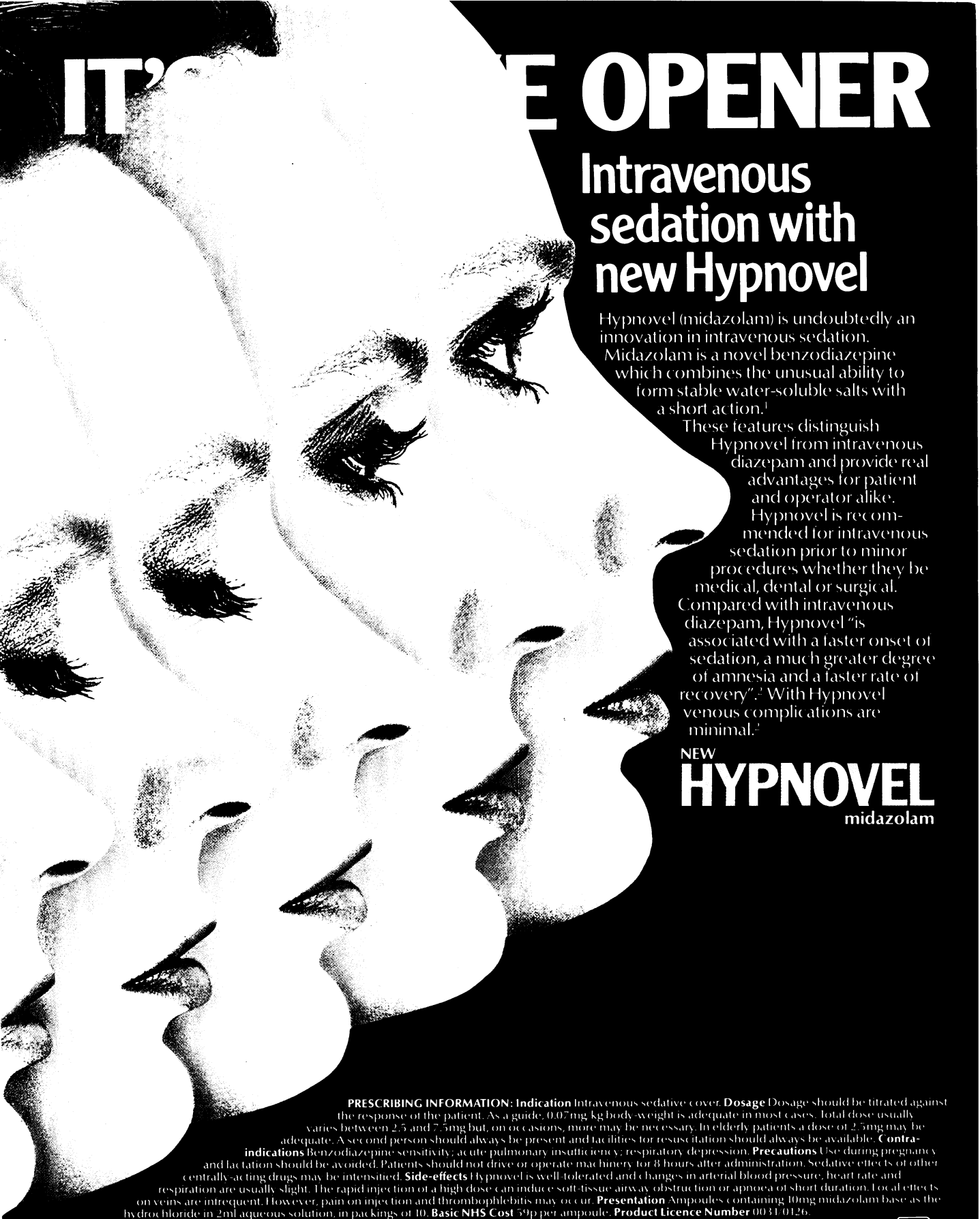
Ispaghula Husk B.P.

for the bulk of dietary constipation

Prescribing Information. Presentation Premeasured, single-dose sachet containing 6.4 g of beige rough ground powder. Active ingredient — 56% (3.6 g) Ispaghula Husk B.P. **Uses** For the treatment of constipation and patients requiring a high fibre regimen. **Dosage and Administration** 1. Pour measured dosage into a glass. 2. Slowly add 150 ml (¼ pt) COOL water. 3. Drink entire contents immediately. An additional glass of liquid may be taken if needed. *Adults and children over 12 years.* The usual dosage is the entire contents of one sachet taken one to three times daily. *Children* A reduced dosage based upon the age and size of the child should be given. 6-12 years ½-1 level 5 ml teaspoonful one to three times daily. **Contraindications:** Intestinal obstruction, faecal impaction, hypersensitivity to ispaghula. **Warnings and Precautions:** Intestinal atony or stenosis, diabetes. Should be taken as a liquid suspension and drunk immediately after mixing. **Adverse effects:** Allergy and gastrointestinal obstruction or impaction have been reported with hydrophilic mucilloid preparations. **Product Licence Holder and Number** G.D. Searle & Co. Ltd. 0020/0087 **Basic N.H.S. cost** Box of 30 sachets £2.63. Full prescribing information is available on request. Regulan and Gold Cross are trademarks.

RE: JA13 January 1983

GOLD CROSS *Gold Cross Pharmaceuticals Division of G. D. Searle and Co. Ltd. P.O. Box 53, Lane End Road, High Wycombe, Bucks HP12 4HL. Telephone: High Wycombe 21124*



IT'S E OPENER

Intravenous sedation with new Hypnovel

Hypnovel (midazolam) is undoubtedly an innovation in intravenous sedation. Midazolam is a novel benzodiazepine which combines the unusual ability to form stable water-soluble salts with a short action.[1]

These features distinguish Hypnovel from intravenous diazepam and provide real advantages for patient and operator alike.

Hypnovel is recommended for intravenous sedation prior to minor procedures whether they be medical, dental or surgical.

Compared with intravenous diazepam, Hypnovel "is associated with a faster onset of sedation, a much greater degree of amnesia and a faster rate of recovery".[2] With Hypnovel venous complications are minimal.[2]

NEW
HYPNOVEL
midazolam

PRESCRIBING INFORMATION: Indication Intravenous sedative cover. **Dosage** Dosage should be titrated against the response of the patient. As a guide, 0.07mg/kg body-weight is adequate in most cases. Total dose usually varies between 2.5 and 7.5mg but, on occasions, more may be necessary. In elderly patients a dose of 2.5mg may be adequate. A second person should always be present and facilities for resuscitation should always be available. **Contra-indications** Benzodiazepine sensitivity; acute pulmonary insufficiency; respiratory depression. **Precautions** Use during pregnancy and lactation should be avoided. Patients should not drive or operate machinery for 8 hours after administration. Sedative effects of other centrally-acting drugs may be intensified. **Side-effects** Hypnovel is well-tolerated and changes in arterial blood pressure, heart rate and respiration are usually slight. The rapid injection of a high dose can induce soft-tissue airway obstruction or apnoea of short duration. Local effects on veins are infrequent. However, pain on injection and thrombophlebitis may occur. **Presentation** Ampoules containing 10mg midazolam base as the hydrochloride in 2ml aqueous solution, in packings of 10. **Basic NHS Cost** 59p per ampoule. **Product Licence Number** 0031/0126.

Roche Products Limited, PO Box 8, Welwyn Garden City, Hertfordshire AL7 3AY. Hypnovel is a trade mark.

References 1. Anaesthesia, 1980, 35: 454. 2. Anaesthesia, 1982, 37: 1002.

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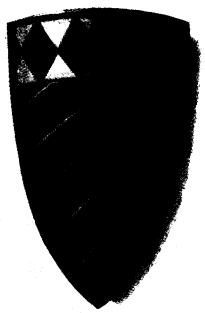
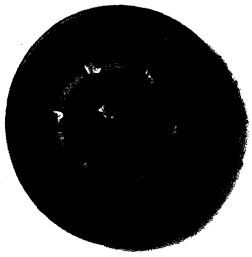
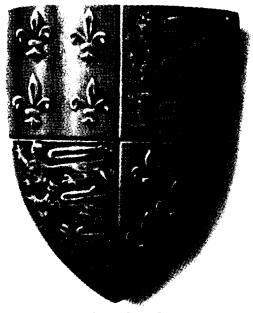
ROCHE



Renaissance

Mediaeval Crusades





Era of Richard III

Bodily defence still relies on shields

NOW! A natural mucosal shield helps heal peptic ulcers!

CAVED-S* does what no other ulcer therapy can do: it increases the number of mucus-secreting cells[1] with virtually no side effects.[2] This protects the gastric mucosal barrier against damaging agents [3,4,5] and reduces ulcer recurrence.[6]

An 88% healing rate in 12 weeks[7] has been reported. Studies also confirm that CAVED-S offers comparable efficacy to cimetidine in healing gastric ulcers[7] and comparable efficacy to ranitidine in healing duodenal ulcers.[6]

PRESCRIBING INFORMATION

Presentation:
Brown tablets embossed 'CAVED-S', each containing:

Deglycyrrhizinated Liquorice	380 mg
Dried Aluminum hydroxide gel	100 mg
Magnesium carbonate	200 mg
Sodium bicarbonate	100 mg

Indications:
For the treatment of peptic ulcer and other allied conditions.

Dosage and Administration:
Adult dose for gastric ulcer:
2 tablets 3 times a day between meals.
Adult dose for duodenal ulcer:
Increase to 2 tablets 6 times a day between meals when necessary.
Prophylactic dose:
Gastric ulcer:
1 tablet 3 times a day, between meals.
Duodenal ulcer:
2 tablets 3 times a day, between meals.
Children's dosage 10-14 years: half adult dose.
The tablets should be lightly chewed and swallowed with a drink of water, but in exceptional cases of objection to taste, the tablets should be broken into a few pieces and then swallowed with a drink of water. No additional antacids are necessary.

Contra-indications, warnings, etc:
Rare cases of mild diarrhoea can occur. No other side-effects have been reported.
Caved-S should be used with caution in pregnancy.

Basic NHS Price:
60's—£2.83
240's—£10.12
600's—£22.76
PL0424/5000.

CAVED-S®

(deglycyrrhizinated liquorice, alum hydrox gel, mag carb, sod bic)

"The Mucosal Shield" for peptic ulcers

Tillotts LABORATORIES

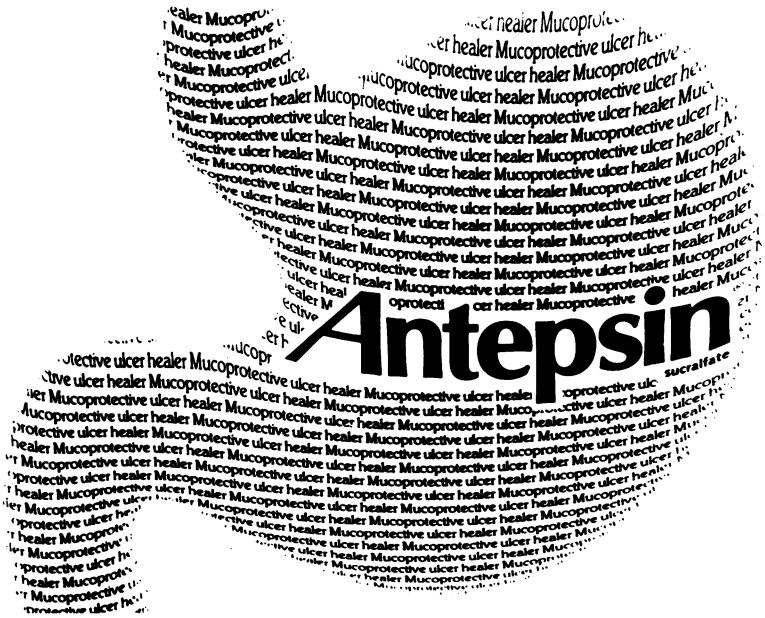
Henlow Trading Estate, Henlow, Bedfordshire. SG16 6DS.
Telephone 0462 813933 Telex: 82313 Tillab G.

REFERENCES:
1. Van Marle J, Aarsen PN, Lind A, et al: Deglycyrrhizinised liquorice (DGL) and the renewal of rat stomach epithelium. *Eur J Pharmacol* 72:219-225, 1981. 2. Cooke WM, Baron JH: Metabolic studies of deglycyrrhizinated liquorice in two patients with gastric ulcer. *Digestion* 4:264-268, 1971. 3. Rees WDW, Rhodes J, Wright JE, et al: Effect of deglycyrrhizinated liquorice on gastric mucosal damage by aspirin. *Scand J Gastroenterol* 14:605-607, 1979. 4. Morgan RJ, Nelson LM, Russell RI, et al: The effect of deglycyrrhinized liquorice on the occurrence of aspirin and aspirin plus bile acid-induced gastric lesions, and aspirin absorption in rats, abstracted. *Gastroenterology* 82:1134, 1982. 5. Morris TJ, Calcraft BJ, Rhodes J, et al: Effect of a deglycyrrhizinised liquorice compound in the gastric mucosal barrier of the dog. *Digestion* 11:355-363, 1974. 6. McAdam WAF, Morgan AC, Pacsoo C, et al: A comparison between ranitidine and Caved-S in duodenal ulcer treatment, abstracted. Proceedings, World Congress of Gastroenterology, Stockholm, June 1982. 7. Morgan AG, McAdam WAF, Pacsoo C: Comparison between cimetidine and Caved-S in the treatment of gastric ulceration, and subsequent maintenance therapy. *Gut* 23:545-551, 1982.

Antepsin®

Sucralfate

Mucoprotective ulcer healer



Non-systemic action

Fast pain relief
Excellent healing rates

Prolonged remission
Low incidence of side effects

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 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 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.

® ANTEPSIN is a registered Trade Mark.

Further information is available on request to the Company.

Ayerst International
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.

Presentation White odourless aerosol foam containing hydrocortisone acetate PhEur 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. Satisfactory response usually occurs within five to seven days. **Contra-indications, 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 disease because of their predisposition to perforation of the bowel wall. Safety during pregnancy has not been fully established. **Pharmaceutical 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. **Basic NHS cost** 20g (14 applications) plus applicator, £7.58. **Product licence no.** 0036/0021. **References** 1. Ruddell WSJ et al. Gut 1980; 21: 885–889. 2. O'Donoghue D. Modern Medicine. December 1981; 45. 3. Source: MIMS Nov. 1982. Further information is available on request.
Stafford-Miller Ltd, Professional Relations Division, Hatfield, Hertfordshire AL10 0NZ.

IT WORKS

COLIFOAM is as effective as traditional steroid enemas.[1,2]

It has also been shown to have inherently superior retentive properties.

PATIENTS

COLIFOAM is known to be more comfortable, convenient and acceptable to the patient.

It causes less distress on administration and less interference in patient activity.

IN DISTAL INFLAMMATORY BOWEL DISEASE

COLIFOAM

hydrocortisone acetate foam

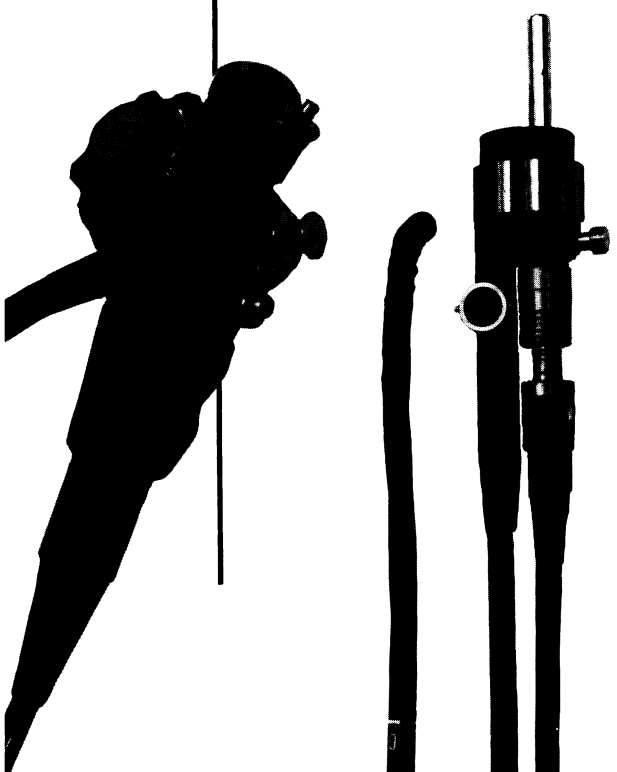
WELL WORTH LOOKING INTO!

Superb Fujinon endoscopic equipment backed by Pyser low-cost personal after-sales service

* 12 modern instruments – all with 105° ultra wide view.
* Range includes 3 colonoscopes, 2 choledoscopes, 4 panendoscopes, 2 duodenoscopes and a sigmoidoscope.
* Advanced features include electronically controlled water/air/suction valves – no contamination or blockage.
* Comprehensive range of high technology accessories for each instrument.
* Range of adaptors allows full interchangeability with other makes of instrument.

PYSER AFTER-SALES SERVICE IS WORTH LOOKING INTO, TOO!

* Low-cost repair/replacement – speedy, efficient and above all, reliable.
* Free in-hospital maintenance as part of 12-month guarantee on new equipment.



Ask for our representative to call and provide you with full details of the range of Fujinon endoscopes, coupled with the very special Pyser after-sales service.

FUJINON **Pyser –**

clearly the better team.

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Middlesex HA1 1BQ
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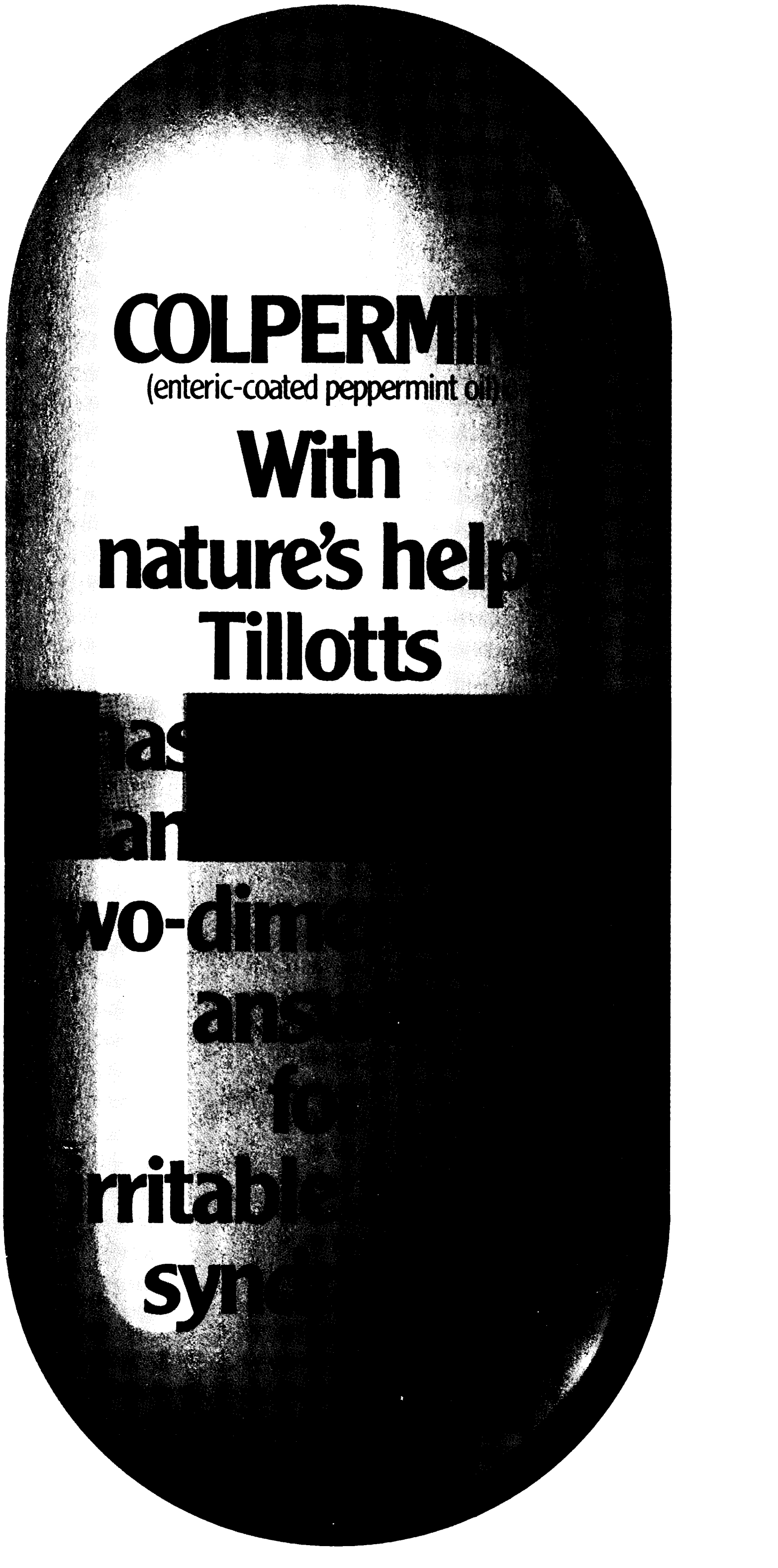


COLPERMIN™

(enteric-coated peppermint oil)

An exclusive two-dimensional remedy for irritable bowel syndrome

Prescribing Information

Presentation: A light blue/dark blue enteric-coated hard gelatin capsule size 1, with a green band between cap and body. Each capsule 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. The enteric-coating of the capsule delays release of the peppermint oil until it reaches the distal small bowel. The oil exerts a local effect of colonic relaxation and a fall of intracolonic pressure.

Dosage and Administration: For oral administration.
Adult dose: 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 capsules should not be broken or chewed because this would release the peppermint oil prematurely, possibly causing local irritation of the mouth and oesophagus. 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. Treatment of overdosage: If capsules have been recently ingested, the stomach should be emptied by gastric lavage. Observation should be carried out with symptomatic treatment if necessary.

Pharmaceutical Precautions: Store in a cool place. Avoid direct sunlight.

Legal category: P.

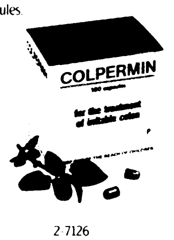
Package quantity: Containers of 100 capsules.

Further information: Nil.

Product Licence: PL 0424/0009.

Basic NHS cost: £10.00 per 100.

European Patent No. 0015334
U.K. Patent No. 2006011
Colpermin is a trade mark of Tillotts Laboratories



REFERENCE:

1. Rees WDW, Evans BK, Rhodes J. Treating irritable bowel syndrome with peppermint oil. Br Med J 2:835-836, 1979

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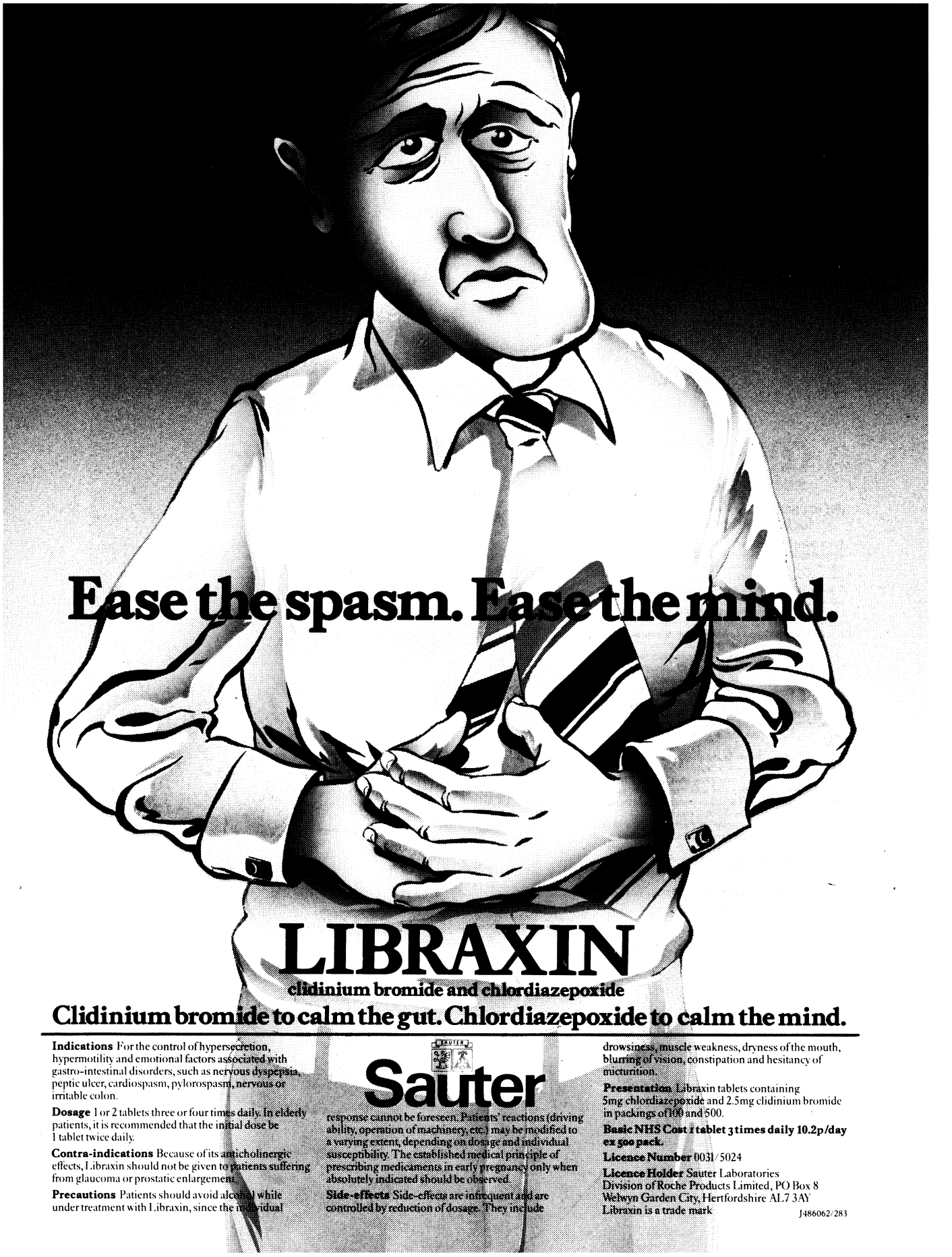


Indications For the control of hypersecretion, hypermotility and emotional factors associated with gastro-intestinal disorders, such as nervous dyspepsia, peptic ulcer, cardiospasm, pylorospasm, nervous or irritable colon.

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 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 10.2p/day ex 500 pack.

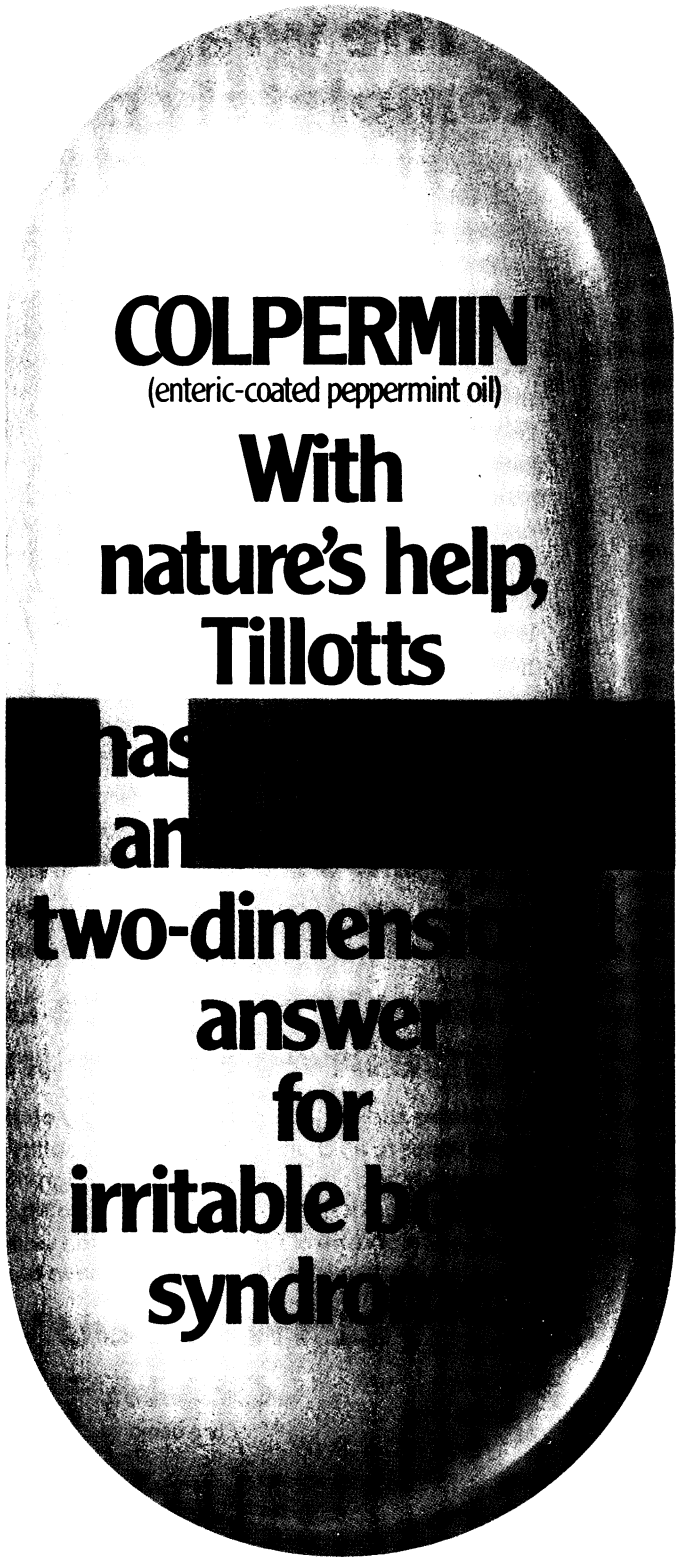
Licence Number 0031/5024

Licence Holder Sauter Laboratories Division of Roche Products Limited, PO Box 8 Welwyn Garden City, Hertfordshire AL7 3AY

Libraxin is a trade mark

Sauter

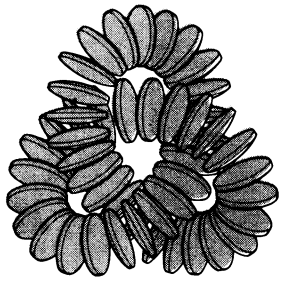
J486062/283


COLPERMIN
(enteric-coated peppermint oil)
With
nature's help,
Tillotts
has
an
two-dimens
answer
for
irritable b
syndro

SALAZOPYRIN® EN
sulphasalazine

HAS TOLERABILITY ALL WRAPPED UP

"Patients in whom sulfasalazine induces dyspeptic symptoms alone can be given EN Salazopyrin (entero-soluble) instead, and no more than 5% of these patients will be so troubled by dyspepsia that the treatment has to be discontinued."
Nielsen, O.H., Scand. J. Gastroenterol., 1982, 17, 389



Get them into the
SALAZOPYRIN habit
DAY AFTER DAY AFTER YEAR
500mg q.i.d. in ulcerative colitis

PRESCRIBING INFORMATION

Dosage and Administration Plain or EN Tabs: In acute moderate attacks 2-4 tablets 4 times a day. In severe attacks give steroids also. Gradually reduce dose after 2-3 weeks to 3-4 tabs/day given indefinitely. Suppositories: Two morning and night reducing dose after 3 weeks with improvement. Enema: One to be given at bedtime. Preparation contains adult dose. Children: Reduce adult dose on basis of bodyweight.

Contra-Indications Sensitivity to salicylates and sulphonamides. Infants under 2 years. Enema: Sensitivity to parabens.

Adverse Reactions Side effects common to salicylates or sulphonamides may occur. Most commonly these are nausea, loss of appetite and raised temperature which may be relieved on reduction of dose: use of EN tablets, enema or suppositories. If serious reactions occur the drug should be discontinued. Rare Adverse Reactions: Haematological: haemolytic anaemia, agranulocytosis, aplastic anaemia. Hypersensitivity: eg rash, fever. Gastrointestinal: eg stomatitis, impaired folate uptake. C.N.S.: eg peripheral neuropathy. Fertility: eg reversible oligospermia. Renal: eg proteinuria, crystalluria. Also: Stevens-Johnson syndrome and lung complications: eg fibrosing alveolitis.

Precautions Care in porphyria, allergic, renal or hepatic disease. Glucose 6-PD deficiency. Blood checks initially and periodically.

Pregnancy and Lactation While the ingestion of drugs in these situations may be undesirable, the severe exacerbations of the disease which can occur commends the continuance of therapy. Long clinical usage and experimental studies have failed to reveal teratogenic or icteric hazards. The amounts of drug present in the milk should not present a risk to a healthy infant.

Packages and Prices Plain Tablets (0.5g) 100 & 500: £6.70 for 100. EN Tablets (0.5g) 100 & 500: £8.70 for 100. Suppositories (0.5g) 10 & 50: £2.80 for 10. Enemas (3.0g) 7: £12.10 for 7.
Product Licence Numbers Plain Tablets 0009/5006. EN Tablets 0009/5007. Suppositories 0009/5008. Enema 0009/5009.

Pharmacia

Further information is available on request
Pharmacia Limited, Pharmacia House,
Midsummer Boulevard, Milton Keynes, MK9 3HP
Telephone Milton Keynes (0908) 661101

COLPERMIN™

(enteric-coated peppermint oil)

An exclusive two-dimensional remedy for irritable bowel syndrome

Prescribing Information

Presentation: A light blue/dark blue enteric-coated hard gelatin capsule size 1, with a green band between cap and body. Each capsule 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. The enteric-coating of the capsule delays release of the peppermint oil until it reaches the distal small bowel. The oil exerts a local effect of colonic relaxation and a fall of intracolonic pressure.

Dosage and Administration: For oral administration.
Adult dose: 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 capsules should not be broken or chewed because this would release the peppermint oil prematurely, possibly causing local irritation of the mouth and oesophagus. 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. Treatment of overdosage: If capsules have been recently ingested, the stomach should be emptied by gastric lavage. Observation should be carried out with symptomatic treatment if necessary.

Pharmaceutical Precautions: Store in a cool place. Avoid direct sunlight.

Legal category: P

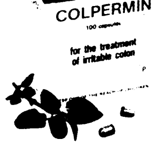
Package quantity: Containers of 100 capsules.

Further information: Nil.

Product Licence: PL 0424/0009.

Basic NHS cost: £10.00 per 100

European Patent No. 0015334
U.K. Patent No. 2 006 011
Colpermin is a trade mark of Tillotts Laboratories



REFERENCE:

1. Rees WDW, Evans BK, Rhodes J. Treating irritable bowel syndrome with peppermint oil. Br Med J 2 835-836, 1979

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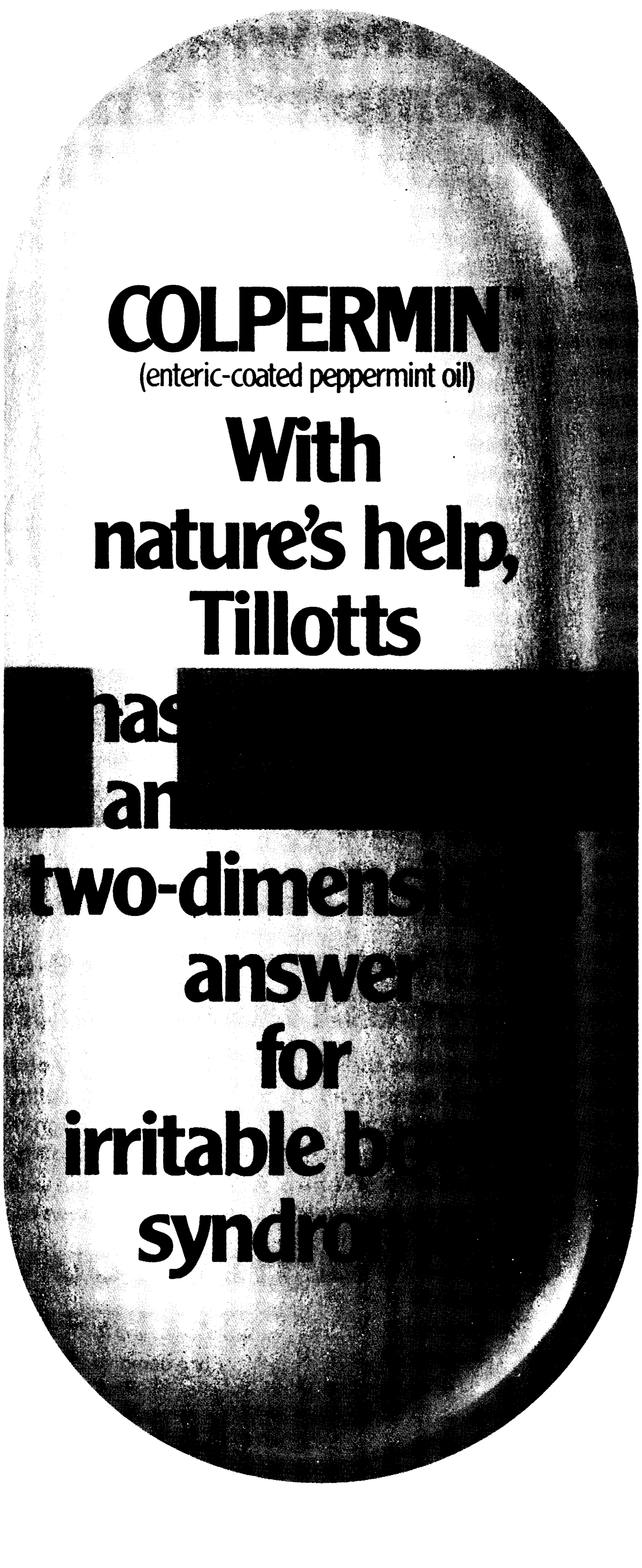
Tillotts LABORATORIES

2-7126

Henlow Trading Estate Henlow Bedfordshire SG16 6DS
Telephone 0462 813933 Telex 82313 Tillab G



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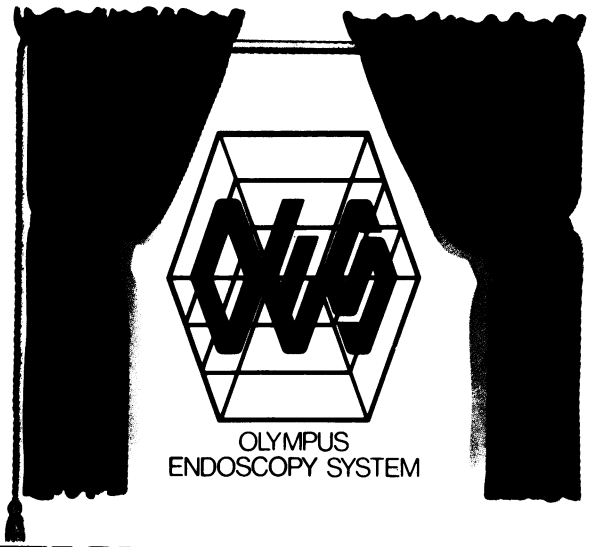

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DATA SHEET

PDS* (Polydioxanone) Sterilised Absorbable Synthetic Suture

Presentation
PDS (Polydioxanone) Monofilament Synthetic Absorbable Suture is prepared from the polyester poly (p-dioxanone). The empirical molecular formula of the polymer is $(C_4H_6O_3)n$. PDS (Polydioxanone) sutures are coloured by adding D & C violet No 2 during polymerisation. These sutures may also be manufactured undyed (clear).

PDS (Polydioxanone) sutures are relatively inert, non-antigenic, non-pyrogenic and elicit only a mild tissue reaction during absorption.

Action
Two important characteristics describe the in vivo behaviour of absorbable sutures. The first of these is tensile strength retention and the second absorption rate or loss of mass.

Data obtained from implantation studies in rats show that, at two weeks post implantation, approximately 70% of the suture strength is retained whilst at four weeks the strength retention is approximately 50%. At eight weeks approximately 14% of the original strength remains. *This indicates a significantly longer period of wound support than previously available with an absorbable suture.*

The absorption or loss of mass is minimal until about the 90th post implantation day and is essentially complete within six months.

Uses
PDS (Polydioxanone) monofilament sutures are intended for use where an absorbable suture or ligature is indicated. They may have particular application where longer wound support is required. See strength retention data above.

Dosage and Administration
By implantation

Contraindications, Warnings, etc
These sutures, being absorbable, should not be used where extended approximation of tissues under stress is required.

As with all monofilament synthetic sutures, care should be taken to ensure proper knot security.

Conjunctival, cuticular and vaginal mucosal sutures could cause localised irritation if left in place for longer than 10 days and should be removed as indicated.

The safety and effectiveness of PDS (Polydioxanone) sutures in neural and cardiovascular tissue have not yet been established. The use of this material in the renal tract is currently under investigation.

Pharmaceutical Precautions
Do not resterilise.

Legal Category P
Pharmacy medicine sold to surgeons and hospitals through surgical dealers.

Package Quantities
The gauge range initially available will be 0.7 metric (6/0) to 4 metric (1). Various lengths of material attached to non traumatic stainless steel needles are packaged in sealed aluminium foil sachets.

This primary pack is contained in a peel-apart secondary pack. The unit of sale is 24 packs contained in a film wrapped drawer style carton.

Further Information
No suture related adverse reactions were reported during clinical trials, although a number of minor reactions were classified as being of unknown cause.

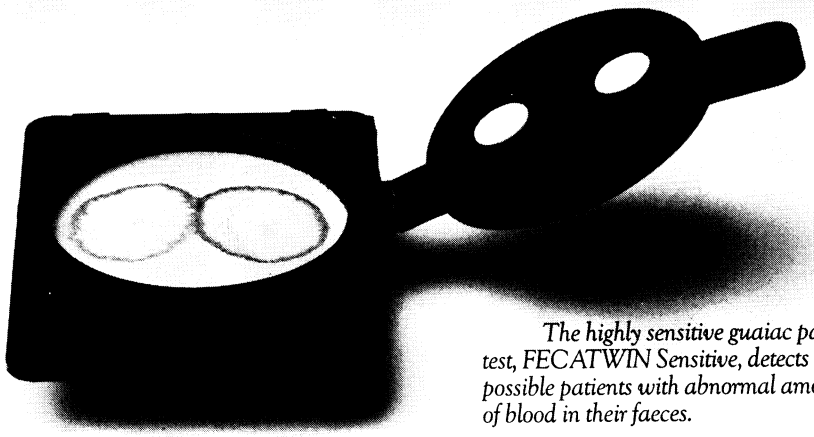
Product Licence Nos PL 0508/0011 (dyed)
PL 0508/0012 (clear)

Br Pat No 1 540 053

ETHICON LTD,
PO BOX 408, BANKHEAD AVENUE
EDINBURGH EH11 4HE

*Trademark

(Date of preparation of Data Sheet — September 1982)



The highly sensitive guaiac paper test, FECATWIN Sensitive, detects all possible patients with abnormal amounts of blood in their faeces.

New Improved Early Diagnosis. Human Specific Faecal Occult Blood Test.

FECA-EIA, a unique immunological test specific for human haemoglobin eliminates false positive results, and only bleeding patients are referred for clinical examinations.

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Start by performing the FECATWIN Sensitive test. This gives positive results in all patients with pathological amounts of blood in faeces.

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FECATWIN Sensitive finds a large proportion of patients bleeding from the upper gastrointestinal tract. Although easy to perform, sensitive guaiac tests can lead to false positive results because of foodstuffs containing dietary blood or peroxidase. A human specific test eliminates this problem.

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FECA-EIA separates the "false" positive results of the guaiac test from the true bleeding patients with an economic lab test specific for human haemoglobin. FECA-EIA increases the productivity of diagnostic work since unnecessary intensive clinical tests are eliminated.

Only patients with pathological amounts of human faecal occult blood need be referred for clinical examinations.

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☐ The FECA-EIA brochure and price list, additional scientific information.

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Position

Establishment

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