

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 Mayelos usually of the dystopic type house.

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

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 PL0038/0095 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.

Presentation White odourless aerosol foam containing hydrocortisone acetate PhEur 10% 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. 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



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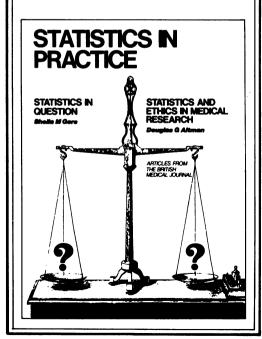
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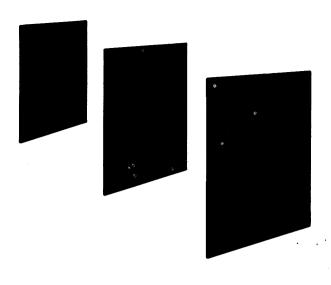
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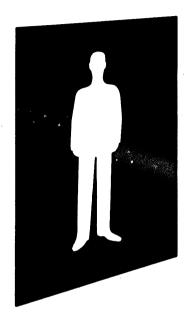
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Zantac m





Zantac maintained 86% of patients symptom-free and ulcer-free on a one tablet a day dosage for a period of 12 months?

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No serious adverse effects have been reported to date in patients treated with Zantac Tablets. There has been no clinically significant interference with endocrine, gonadal or liver function, nor has the drug adversely affected the central nervous system even in elderly patients³

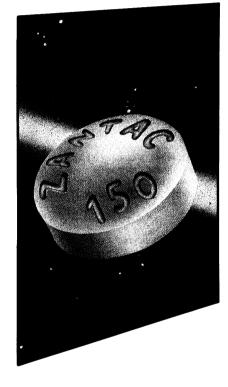
Simple dosage for all indications

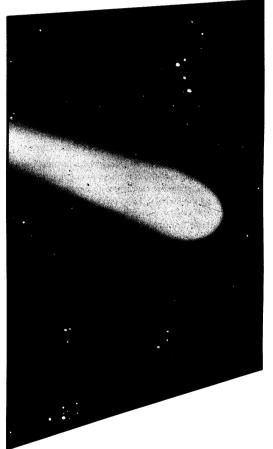
Zantac's unique molecular structure means rapid, effective ulcer healing is achieved on a simple b.d. dosage; patients are maintained symptom-free and ulcer-free on just

Simply right in peptic ulcer treatment Simply right in maintenance

aintains patients ulcer-free on one

tablet daily





one tablet at night.



Prescribing information



Uses Indications: Zantac Tablets are indicated for the treatment of duodenal ulcer, benign gastric ulcer, post-operative ulcer, reflux oesophagitis and the Zollinger-Ellison syndrome. Mode of action: Zantac is a highly effective, rapidly acting histamine H₂-antagonist. It inhibits basal and stimulated secretion of gastric acid, reducing both the volume and the acid and pepsin content of the secretion. Zantac has a relatively long duration of action and so a single dose effectively suppresses gastric acid secretion for twelve hours.

Dosage and administration Adults: The usual dosage is one 150mg tablet twice daily, taken in the morning and before retiring. It is not necessary to time the dose in relation to meals. In most cases of duodenal ulcer, benign gastric ulcer and post-operative ulcer, healing occurs in four weeks. In the small number of patients whose ulcers have not fully healed, healing usually occurs after a further course of treatment. Maintenance treatment at a reduced dosage of one 150mg tablet at bedtime is recommended for patients who have responded to short-term therapy, particularly those with a history of recurrent ulcer.

In the management of reflux oesophagitis, the recommended course of treatment is one 150mg tablet twice daily for up to 8 weeks. In patients with Zollinger-Ellison syndrome, the starting dose is 150mg three times daily and this may be increased, as necessary, to 900mg per day. *Children:* Experience with Zantac Tablets in children is limited and such use has not been fully evaluated in clinical studies. It has, however, been used successfully in children aged 8-18 years in doses up to 150mg twice daily without adverse effect.

Contra-indications There are no known contra-indications to the use of Zantac Tablets.

Precautions Treatment with a histamine H₂-antagonist may mask symptoms associated with carcinoma of the stomach and may therefore delay diagnosis of the condition. Accordingly, where gastric ulcer is suspected the possibility of malignancy should be excluded before therapy with Zantac Tablets is instituted. Ranitidine is excreted via the kidney and so plasma levels of the drug are increased and prolonged in patients with severe renal failure. Accordingly, it is recommended that the therapeutic regimen for Zantac in such patients be 150mg at night for 4 to 8 weeks. The same dose should be used for maintenance treatment should this be deemed necessary. If an ulcer has not healed after treatment for 4 to 8 weeks and the condition of the patient requires it, the standard dosage regimen of 150mg twice daily should be instituted, followed, if need be, by maintenance treatment at 150mg at night.

Although the incidence of adverse reactions in clinical trials of one year's duration and longer has been very low and no serious side effects have been reported with Zantac treatment, care should be taken to carry out periodic examinations of patients on prolonged maintenance treatment with the drug as a safeguard against the occurrence of unforeseeable consequences of drug treatment. Like other drugs, Zantac should be used during pregnancy and nursing only if strictly necessary. Zantac is secreted in breast milk in lactating mothers but the clinical significance of this has not been fully evaluated.

Side effects No serious adverse effects have been reported to date in patients treated with Zantac Tablets. There has been no clinically significant interference with endocrine, gonadal or liver function, nor has the drug adversely affected the central nervous system even in elderly patients.

Further information *Drug interactions*: Ranitidine does not inhibit the cytochrome P450-linked mixed function oxygenase enzyme system in the liver and therefore does not interfere with the effects of the many drugs which are metabolised by this enzyme system. For example, there is no interaction with warfarin or diazepam.

Pharmacokinetics: Absorption of ranitidine after oral administration is rapid and peak plasma concentrations are usually achieved within two hours of administration. Absorption is not impaired by food or antacids. The elimination half-life of ranitidine is approximately two hours. Ranitidine is excreted via the kidneys mainly as the free drug and in minor amounts as metabolites. Its major metabolite is an N-oxide and there are smaller quantities of S-oxide and desmethyl ranitidine. The 24-hour urinary recovery of free ranitidine and its metabolites is about 40% with orally administered drug. Use in renal transplants: Zantac has been used without adverse effect in patients with renal transplants.

Product licence number 4/0279. Basic NHS cost (exclusive of VAT) 60 tablets £27.43.

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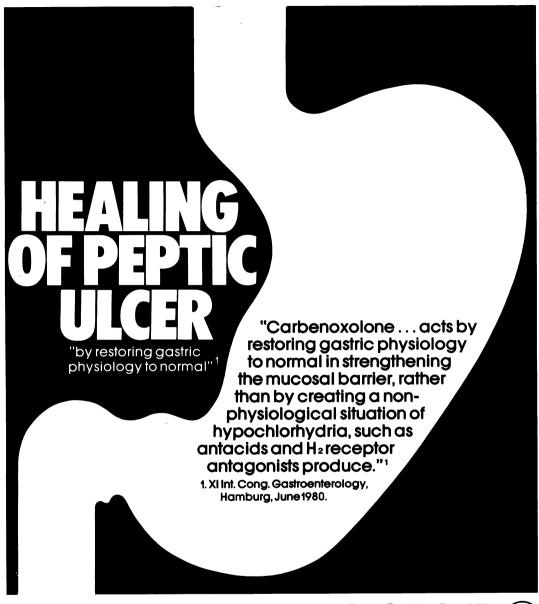
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- Increased mucus production
- Reduced epithelial cell loss
- Reduced peptic secretion and activity



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DUOGASTRONE carbenoxolone for duodenal ulcer

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BIOGASTRONE

carbenoxolone for gastric ulcer

Carbenoxolone sodium BP 50 mg tablets. PL 0071/5902. Bottles of 100. Basic NHS cost: 1 week's treatment £2.63 (21 tablets) – £5.26 (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) £1.01.

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 or amiloride should not be used because they hinder 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 or Duogastrone for women who may become pregnant.

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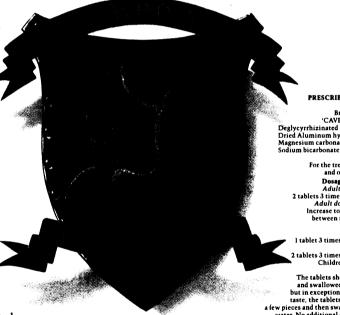
CAVED-S® does what no other ulcer therapy can do: it increases the number of mucussecreting cells1 with virtually no side effects.2 This protects the gastric mucosal barrier against damaging agents 3, 4, 5 and reduces ulcer recurrence.6

An 88% healing rate in 12 weeks7 has been reported. Studies also confirm that CAVED-S offers comparable efficacy to cimetidine in healing gastric ulcers7 and comparable efficacy to ranitidine in healing duodenal ulcers.6

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Dosage and Administration:
Adult dose for gastric ulcer:
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Adult dose for duodenal ulcer:
Increase to 2 tablets 6 times a day between meals when necessary.
Prophylactic dose:
Gastric ulcer:

l tablet 3 times a day, between meals.

I tablet 3 times a day, between meals.

Duodenal ulez:
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
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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.

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to provide
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PDS (Polydioxanone) Monofilament Synthetic Absorbable Suture is prepared from the polyester poly (p-dioxanone). The empirical molecular formula of the polymer is (C₄H₆O₃)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.

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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 AdministrationBy 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.

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Further Information

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Dosage Usual dosage: Adults, Duodenal ulcer, 400 mg b.d. with breakfast and at bedtime, or 200 mg t.d.s. and 400 mg at bedtime (1.0 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

N.B. For full dosage instructions see Data Sheet.

Cautions Impaired renal function: reduce dosage (see Data Sheet). Potentiation 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

TG:AD1152

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.

Legal category POM.



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CAVED-S® does what no other ulcer therapy can do: it increases the number of mucussecreting cells1 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 weeks7 has been reported. Studies also confirm that CAVED-S offers comparable efficacy to cimetidine in healing gastric ulcers7 and comparable efficacy to ranitidine in healing duodenal ulcers.6

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and aspirin plus bile acid-induced gastric lesions,
and aspirin plus bile acid-induced gastric lesions,
and aspirin absorption in rats, abstracted.



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

"The Mucosal Shield" for peptic ulcers



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

PRESCRIBING INFORMATION

Presentation: Brown tablets embossed 'CAVED-S', each containing: Deglycyrrhizinated Liquorice 380 mg 380 mg Dried Aluminum hydroxide gel Magnesium carbonate 100 mg Sodium bicarbonate

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

and other allied conditions.

Dosage and Administration:
Adult dose for gastric ulcar:
2 tablets 3 times a day between meals.
Adult dose for duodenal ulcar:
Increase to 2 tablets 6 times a day
between meals when necessary.

Prophylactic dose:

Castric ulcar.

Gastric ulcer: I tablet 3 times a day, between meals.

Duodenal ulcer:
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 two pieces and then swallowed with a drink of water. No additional antacids are necessary.

Contra-indications, warnings, etc: Rare cases of mild diarrhoes 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.



Gastroenterology 82:1134, 1982. 5. Morris TJ,
Calcraft BJ, Rhodes J, et al: Effect of a
deglycyrrhizinised liquoric compound in the
gastric mucosal barrier of the dog. Digestion
11:355-363, 1974. 6. McAdam WAP, 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 subsequent maintenance therapy. Gut



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 (½ 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 22.63. Full prescribing information is available on request. Regulan and Gold Cross are trademarks.

RE: JA13 January 1983



Mediaeval Crusades





Era of Richard III

Bodily defence still relies on shields

NOW! A natural mucosal shield helps heal peptic ulcers!

CAVED-So does what no other ulcer therapy can do: it increases the number of mucussecreting cells1 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 weeks7 has been reported. Studies also confirm that CAVED-S offers comparable efficacy to cimetidine in healing gastric ulcers7 and comparable efficacy to ranitidine in healing duodenal ulcers.6

REFERENCES:

REFERENCES:

1. Van Marie 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 uler. Digestion
4:264-268, 1971. 3. Rees WDW, Rhodes J, Wright
IE, 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 RJ, et al: The effect of deglycyrrhinized liquorite on the occurrence of aspirin rhinized liquorice on the occurrence of aspirin and aspirin plus bile acid-induced gastric lesions, and aspirin absorption in rats, abstracted,



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

"The Mucosal Shield" for peptic ulcers



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

PRESCRIBING INFORMATION

'CAVED-S' each containing: Deglycyrrhizinated Liquorice Dried Aluminum hydroxide gel 380 mg 100 mg 200 mg Magnesium carbonate

100 mg

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 plcer

1 tablet 3 times a day, between meals.

Duodenal ulcer: tablets 3 times a day, between meals. Children's dosage 10-14 years:

Inluren's dosage 10-18 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—£22.76 600's-£22.76 PL0424/5000.

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and Caved-S in duodenal ulcer treatment. and Caved-5 in duodenal ulcer treatment, abstracted, Proceedings, World Congress of Gastroenterology, Stockholm, June 1982. 7. Morgan AG, McAdam WAF, Pacsoo C: oparison between cimetidine and Caved-5 in the treatment of gastric ulceration, and subsequent maintenance therapy. Gut 23:545-551, 1982.

A fresh approach to peptic ulcers



Prescribing Information

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 sucraflate. Uses for the treatment of diudonfaul user, 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 upto twelve weeks may be necessary in resistant cases. Antacids may be used as required.

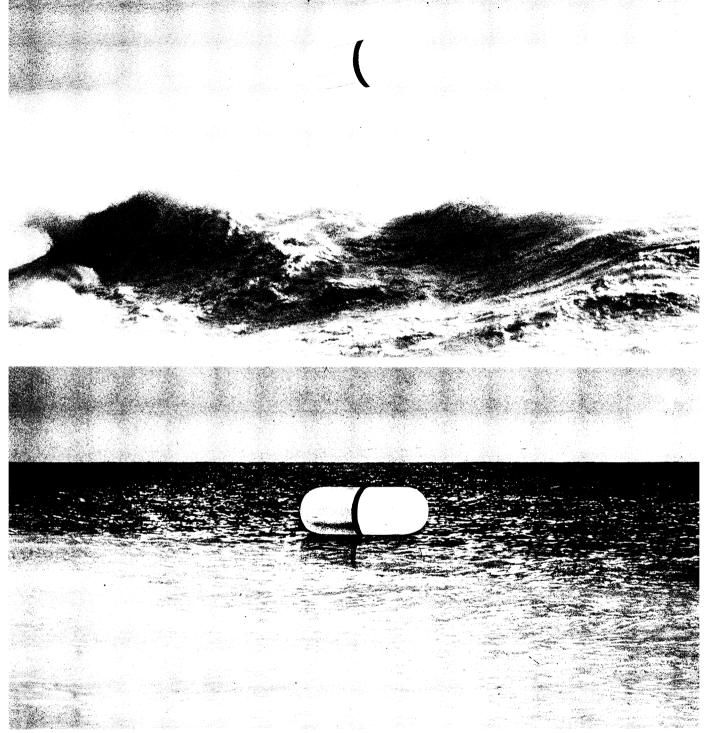
for reliet of pain Contra-Indications, Precautions, Warnings, etc. Contra-Indications There are no known contraindications, Precautions 1 Concomitant administration with some oral anti-infectives such as tetracyclines may interfere with absorption of the latter 2. The product should only be used with caution in patients with renal dysfunction 3.48 with all medicines, Antiepsin should not be used merily pregnancy unless considered essential. Side this been reported Legal Category POM, Package Quantities Anlepsin 1 gram — Securitainers of 100. Pharmaceutical Precautions No special

Average daily cost 50p



Ayerst Laboratories Ltd., Ayerst Laboratories Ltd., South Way, Andover, Hampshire SP10 5LT. Telephone: 0.264 58711 Distributors in Ireland: Ayerst Laboratories Ltd., 765 South Circular Road, Islandbridge, Dublin 8

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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 entericcoated 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 perpermint oil 8.P., Ph. Eur. Uses. For the treatment of symptoms of discomfort and of abdommal colic and distension experienced by patients with initiable bowel syndrome. Dosage and Administration: One capsule three times a day preferable before meals and latent with a small quantity of water. The capsules should not be taken immediately water food increased to two capsules, there 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 hearthour, 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, headach bradycardia, music termon and ataxas Product License, PL 0423-0003 Basic NHS Cost. \$1000 per 100. UK and Foreign Patents pending. Colpermin is a tade mark of Tillotts Laborationes. Further information is available from Tillotts Laborationes Hornio Trading Estate, Henlow Beds. European Patent No. 0103-334. UK Patent No. 2 000 011





gastro-intestinal disorders, such as nervous dyspepsis

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 gatients suffering from glaucoma or prostatic enlargemen

Precautions Patients should avoid alc under treatment with Libraxin, since the

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

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

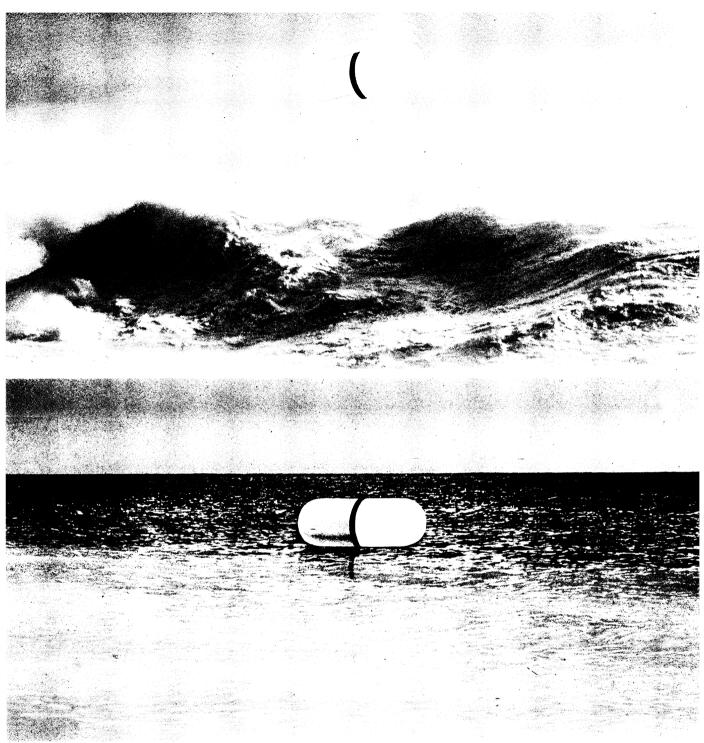
Presentation. Libraxin tablets containing Smg chlordiazepoxide and 2.5mg clidinium bromide in packings of 100 and 500.

Basic NHS Cost #tablet 3 times daily 10.2p/day

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

J486062/283

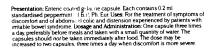


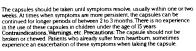
COLPERMIN CALMS THE IRRITABLE BOWEL

enteric-coated peppermint oil

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

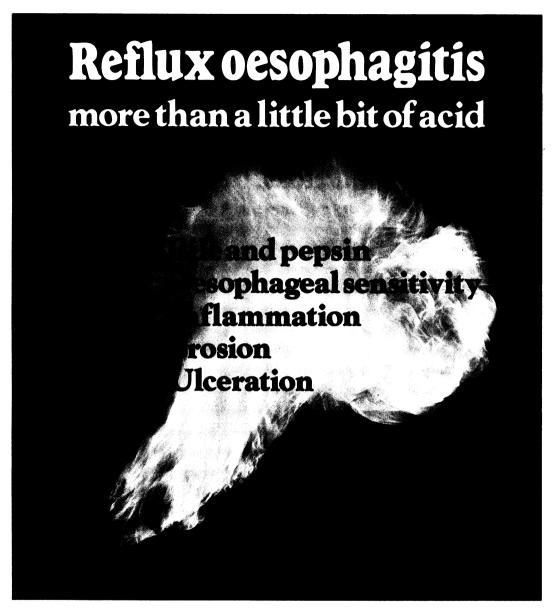
Colpermin, a newly developed entericcoated capsule, delivers the oil precisely where it is needed. This provides an improved, rapid, and highly effective method of relieving spasmodic pain, distension and disturbed bowel habit - the dominant symptoms of the irritable bowel syndrome.





Treatment should be discontinued in these patients. Adverse effects: Heartburn, sensitivity reactions to menthol which are rare, and include erythematous skin rash, headache, bradycarda, muscle temora and ataxia. Product Licence. PI, 0424/0009. Basic NNS Cost: 510.00 per 100. UK and Foreign Patients pending. Colpernin is a trade mark of Tillots Laboratories. Further information is available from Tillotts Laboratories. Further information is available from Tillotts Caboratories. Henlow Tadding Estate. Henlow Beds. European Patent No. 0.1006.





PYR') GASTRONE

carbenoxolone/magnesium trisilicate/dried aluminium hydroxide gel

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P.O. Box CH-4009 Basel (Switzerland)

S. Karger Publishers, Inc. 150 Fifth Avenue, Suite 1105 New York, NY 10011 (USA) Bibliographic data

1983: Volumes 26, 27, 28 4 issues per volume Language: English ISSN 0012-2823

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