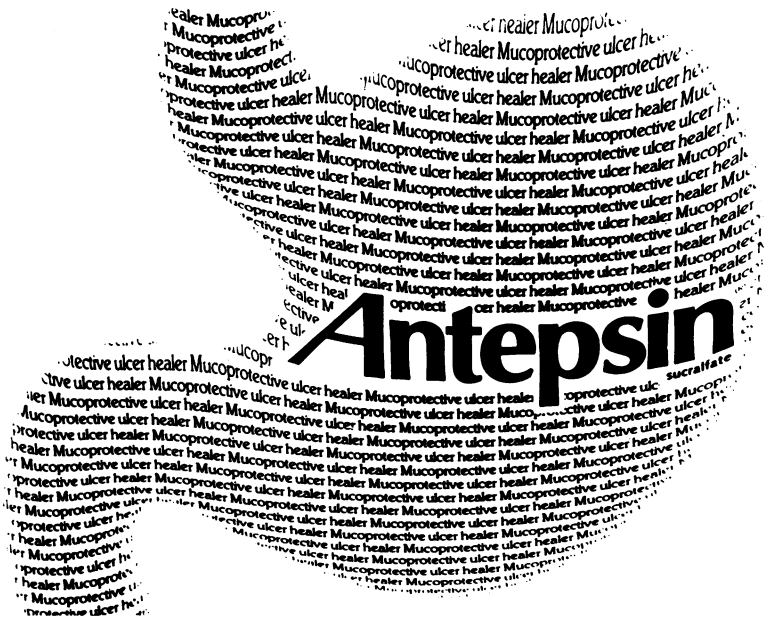
Antepsin®

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.

® ANTEPSIN is a registered Trade Mark.

Further information is available on request to the Company.

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.

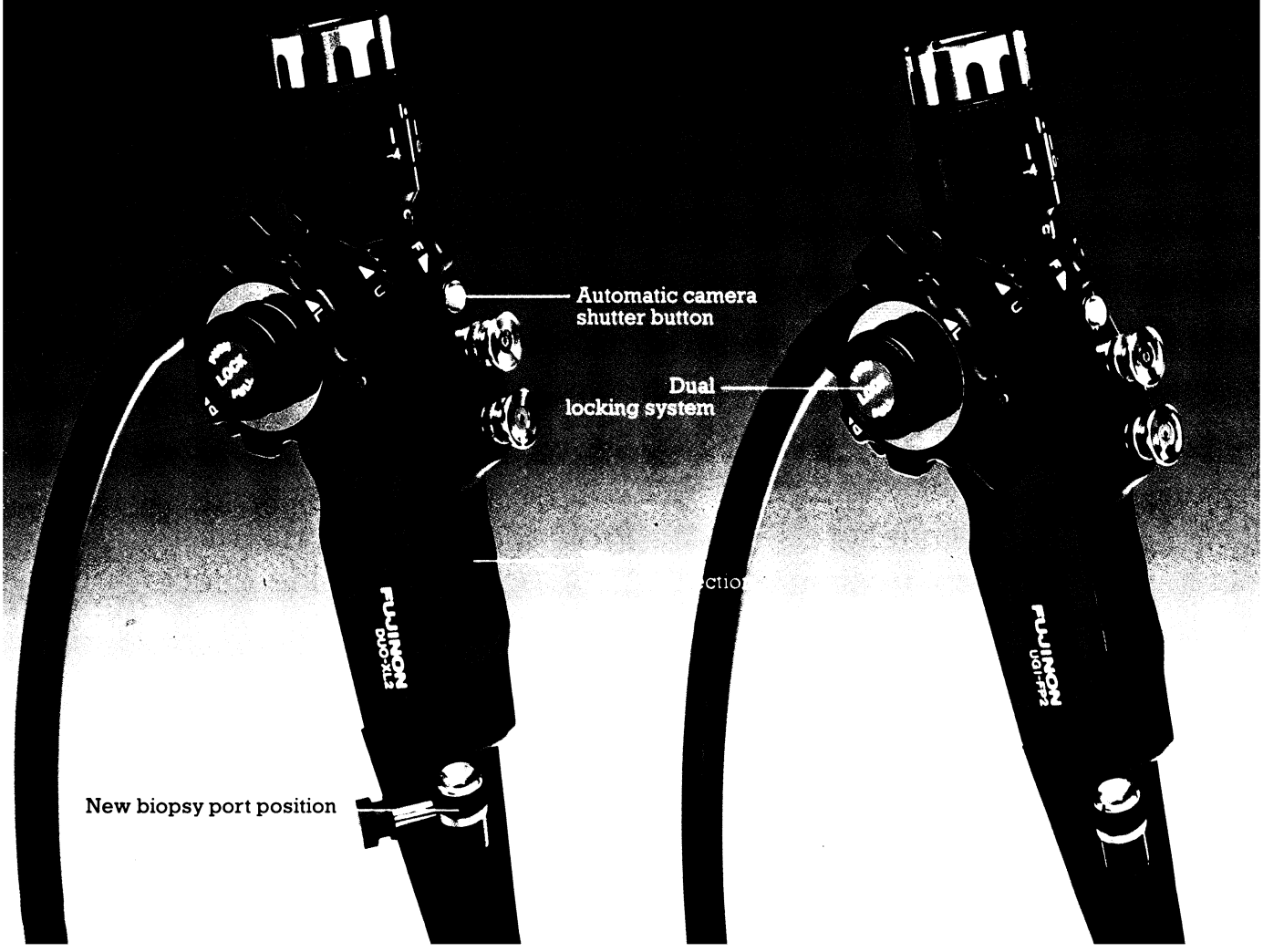
Ayerst International
Ayerst Laboratories Ltd.,
South Way, Andover, Hampshire SP10 5LT.
Telephone: 0264 58711.
Distributors in Ireland: Ayerst Laboratories Ltd.,
765 South Circular Road, Islandbridge, Dublin 8.

Compatibility. Simplicity.

Newly designed operating section
Lighter, thinner, more comfortable to hold, but with control positions you're accustomed to

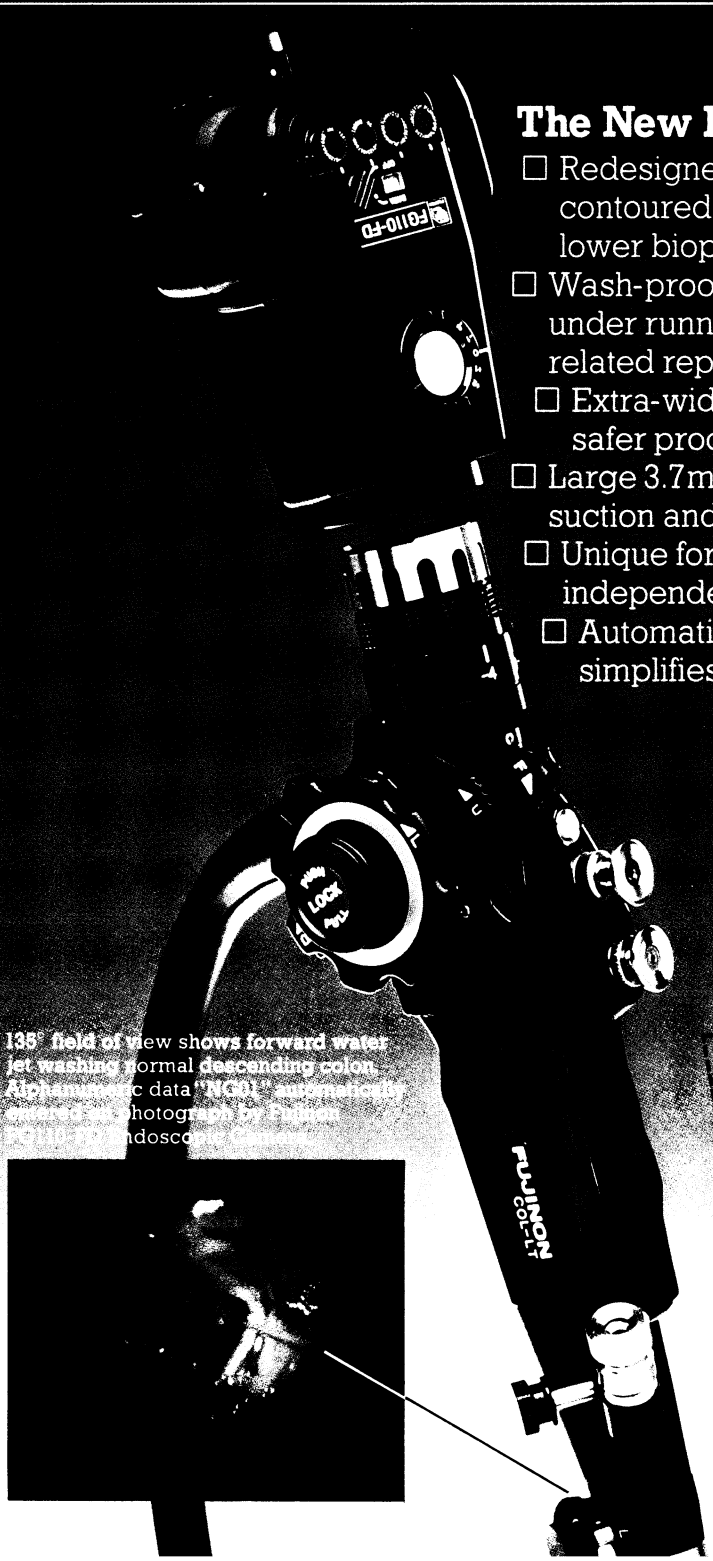
Uncomplicated cleaning
Easily washed under running water or disinfectant-soaked—without numerous and complicated steps

Widest field of view
Exceptional optics combined with widest available field of view—105° for the DUO-XL2/X2 and UGI-FP2, 135° for the COL-LT/COL-MT



Performance.

SYSTEM 2000
FULLY SUBMERSIBLE



The New Fujinon Colonoscope

- ☐ Redesigned operating section is lighter and contoured to the hand, and features a new lower biopsy port position
- ☐ Wash-proof design enables simple cleaning under running water and reduces water-related repairs
- ☐ Extra-wide 135° field of view permits faster, safer procedures
- ☐ Large 3.7mm channel provides increased suction and large-biopsy capability
- ☐ Unique forward water jet allows washing of site independent of normal lens cleaning
- ☐ Automatic scope-mounted shutter release simplifies photographic documentation

135° field of view shows forward water jet washing normal descending colon. Alphanumeric data "ILOU" automatically annotated photograph by Fujinon FQ110-FD endoscopic camera.

☐ Yes, I would like to learn more about the new Fujinon System 2000 GI Endoscopes

Name: _____

Hospital: _____

_____

_____ Telephone: _____

Pyser Limited,
Medical Division,
Fircroft Way,
EDENBRIDGE,
Kent TN8 6HA
Telephone: Edenbridge (0732) 864111
Telex: 95527 OPTSLS-G

FUJINON

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.**

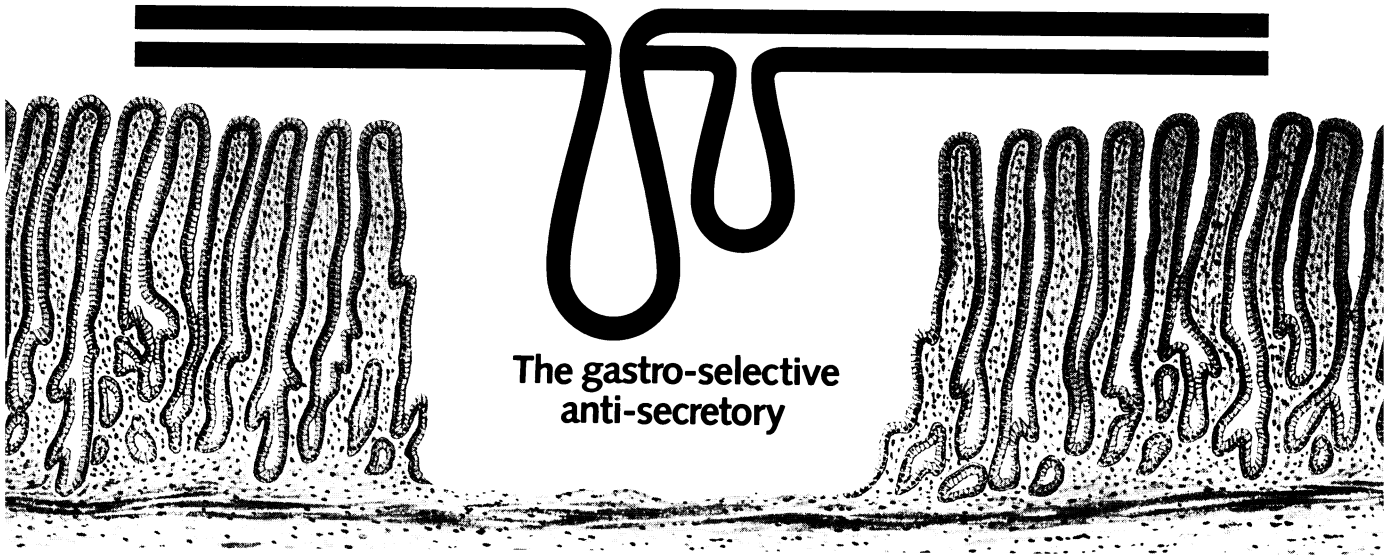
For the treatment of peptic ulcer

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.

Further information is available on request
The Boots Company PLC Nottingham

Gastrozepin® Trade Mark

THE NEW POWER IN ULCER HEALING

A single 800 mg tablet taken at bedtime for four weeks

TAGAMET
CIMETIDINE **800**

In duodenal ulcer

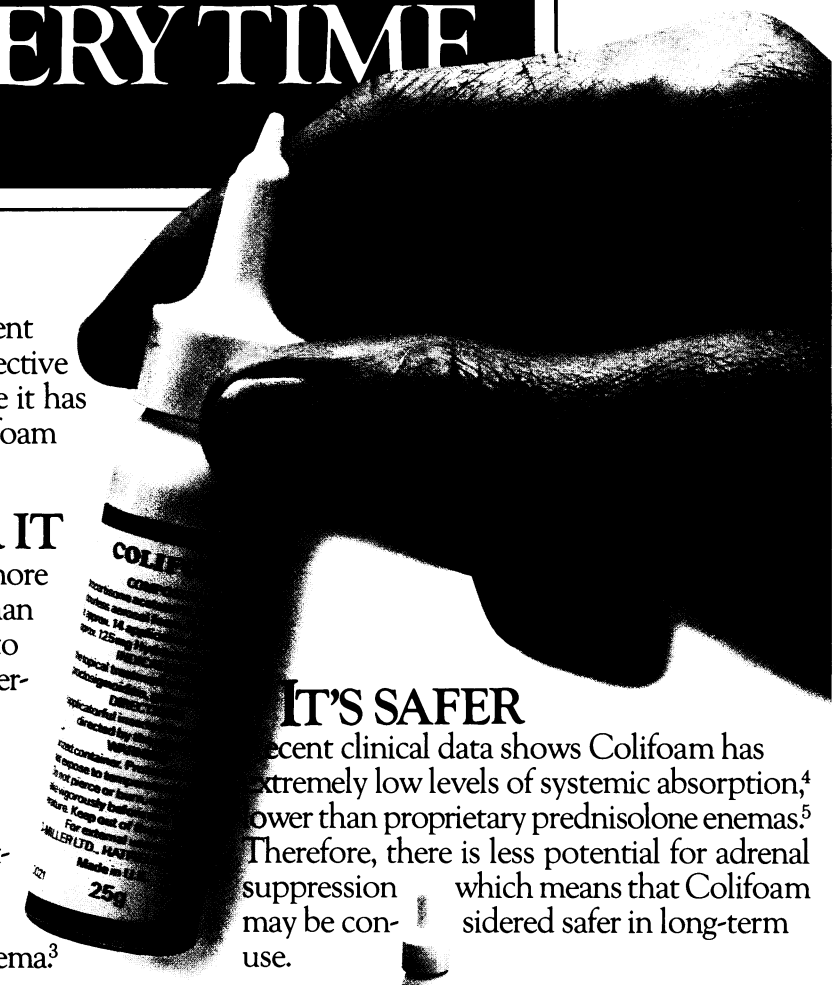
Prescribing Information. Presentations 'Tagamet' Tablets, each containing 800 mg cimetidine (PL 0002/0128: 28 tablets, £16.61) or 400 mg cimetidine (PL 0002/0092: 56 tablets, £16.61). 'Tagamet' Syrup, containing 200 mg cimetidine per 5 ml (PL 0002/0073: 500 ml, £20.43). **Indication** Duodenal ulcer. **Dosage** *Usual dosage:* Adults. *Duodenal ulcer,* 800 mg once a day at bedtime, or 400 mg b.d. with breakfast and at bedtime. To prevent relapse, 400 mg at bedtime or 400 mg morning and at bedtime. *N.B. For full dosage instructions see Data Sheet.* **Cautions** Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anticoagulants, phenytoin and theophylline (see Data Sheet). Prolonged treatment: observe patients periodically. Potential delay in diagnosis of gastric cancer (see Data Sheet). Care in patients with compromised bone marrow (see Data Sheet). Avoid during pregnancy and lactation. **Adverse reactions** Diarrhoea, dizziness, rash, tiredness. Rarely, mild gynaecomastia, reversible liver damage, confusional states (usually in the elderly or very ill), interstitial nephritis, acute pancreatitis, thrombocytopenia. **Legal category** POM. 27.9.84

SK&F

TCS

TG.AD1684

A BETTER CHOICE EVERY TIME



IT WORKS In the treatment of ulcerative colitis, Colifoam is as effective as steroid enemas. At the same time it has been shown that patients find the foam easier to retain.[1, 2]

PATIENTS PREFER IT
Colifoam is far more comfortable, more convenient and more acceptable than enemas. Patients also find it easier to administer and that it causes less interference in their daily lives.

IT COSTS LESS
Surprisingly, despite the fact that it's just as effective and far more comfortable, Colifoam is less expensive. In fact, it can cost up to ⅓ less per dose than a standard proprietary enema.[3]

IT'S SAFER
cent clinical data shows Colifoam has xtremely low levels of systemic absorption,[4] ower than proprietary prednisolone enemas.[5] Therefore, there is less potential for adrenal suppression which means that Colifoam may be considered safer in long-term use.

COLIFOAM

hydrocortisone acetate foam

IN DISTAL INFLAMMATORY BOWEL DISEASE. A BETTER CHOICE EVERY TIME.

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 (illustrated instructions are enclosed with every pack). 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 fistulae. 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** Pressurized container. Protect from sunlight and do not expose to temperatures above 50°C. Do not pierce or burn even after use. Do not refrigerate. Shake vigorously before use. Keep out of reach of children. For external use only. **Legal category POM. Package quantities** Aerosol canister containing 25g (approx. 14 applications). **Basic NHS cost** 25g plus applicator, £7.40. **Further Information** One applicatorful of Colifoam provides a dose of approximately 125mg 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. **References 1.** Ruddell WSJ, et al. Gut 1980; 21: 885–889. **2.** O'Donoghue D. Modern Medicine, December 1981; 45. **3.** Source: Mims. **4.** Barr WH, Kline B, Beightol L, Zfass A, Medical College of Virginia/Virginia Commonwealth University. FDA bioavailability submission document October 1981. **5.** Lee DAH, et al. Gut 1980; 21: 215–218. Further information is available on request. Stafford-Miller Ltd., Professional Relations Division, Hatfield, Herts. AL10 0NZ.

In Irritable Bowel Syndrome

colofac®

mebeverine

Blessed relief

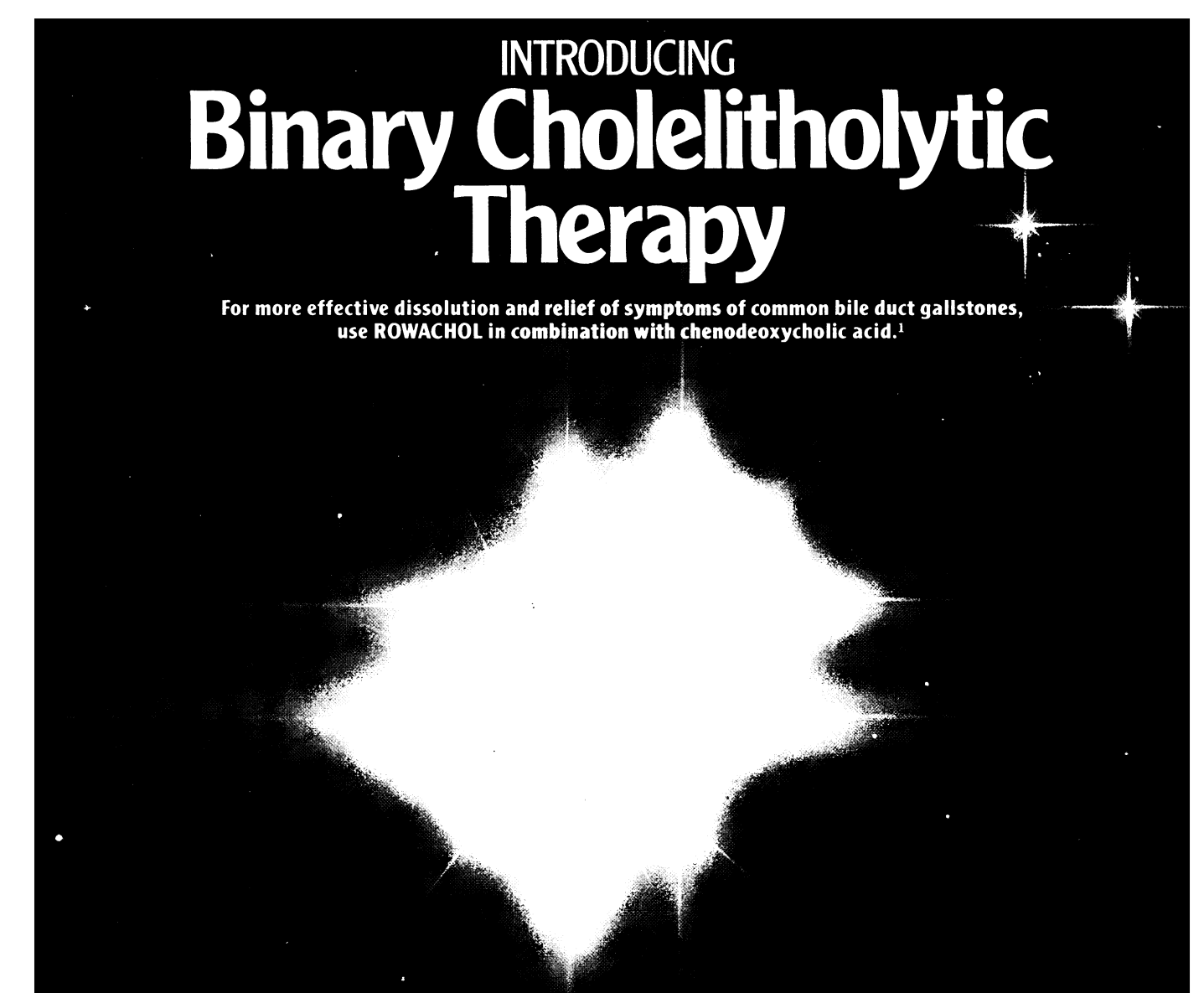
Colofac is also indicated for the relief of gut spasm secondary to diverticular disease.

PRESCRIBING INFORMATION. PRESENTATION: White, sugar-coated tablets each containing 135 mg mebeverine hydrochloride. Available in packs of 100. Basic NHS price £8.35. INDICATIONS: 1. Irritable Bowel Syndrome. 2. Gastro-intestinal spasm secondary to organic diseases. DOSAGE AND ADMINISTRATION: Adults and children ten years and over: One tablet three times a day, preferably 20 minutes before meals. CONTRA-INDICATIONS, WARNINGS, ETC: Animal experiments have failed to show any teratogenic effects. However, the usual precautions concerning the administration of any drug during pregnancy should be observed. PRODUCT LICENCE NO: 512/0044.

duphar Further information is available upon request to the company.
Duphar Laboratories Ltd, Duphar House, Gaters Hill, West End, Southampton SO3 3JD. Tel: (0703) 472281

INTRODUCING
Binary Cholelitholytic Therapy

For more effective dissolution and relief of symptoms of common bile duct gallstones, use ROWACHOL in combination with chenodeoxycholic acid.[1]



As the only adjuvant cholelitholytic agent containing monoterpenes derived from plant essential oils, ROWACHOL not only accelerates the dissolution of gallstones, but also permits reduction of the dose of chenodeoxycholic acid, thus reducing the potential for side effects.[2]

"...we reduced the chenodeoxycholic acid dose requirement by almost two-thirds; this resulted in a great improvement in patient tolerance and reduced by half the total cost of treatment."[2]

ROWACHOL

(MENTHOL, PINENE, MENTHONE, CAMPHENE, BORNEOL, CINEOLE-COMPOUND OF CYCLIC MONOTERPENES) **CAPSULES**

ABBREVIATED PRESCRIBING INFORMATION

ROWACHOL CAPSULES
PRESENTATION
Green enteric coated soft gelatin capsules, each containing
Pinene 17mg, camphene 5mg, cineole 2mg, menthone 6mg, menthol 32mg, borneol 5mg
USES
Adjunct therapy for the dispersal (by dissolution and or expulsion) of stones in the common bile duct. To be used in combination with chenodeoxycholic acid
DOSAGE AND ADMINISTRATION
For oral administration.
Adult dose: 1-2 capsules three times a day before meals. There is no dose recommendation for children
CONTRAINDICATIONS, WARNINGS, ETC.
Caution should be used in patients receiving oral anti-coagulants, or other agents metabolised by the liver, where the dose is critical.
Reduced cholesterol intake in the diet is advisable. Although no teratogenic effects have been reported, Rowachol should not be given in the first trimester of pregnancy.
BASIC NHS PRICE
50 - $5.95
LICENCE HOLDER
Rowa Ltd., Bantry, Co. Cork, Ireland
PL 0007/0002

ROWACHOL LIQUID
PRESENTATION
Pale yellow liquid containing (in olive oil) v/v: menthol 32%, menthone 6%, pinene 17%, borneol 5%, cineole 2%, camphene 5%
USES
Cholelithiasis, biliary and hepatic disorders
DOSAGE AND ADMINISTRATION
For oral administration. Adult dose: 3-5 drops four or five times daily. No dose recommendation for children
CONTRAINDICATIONS, WARNINGS, ETC.
Caution should be used in patients receiving oral anti-coagulants, or other agents metabolised by the liver, where the dose is critical.
Reduced cholesterol intake in the diet is advisable. Although no teratogenic effects have been reported, Rowachol should not be given in the first trimester of pregnancy.
Adverse effects: Eructation and a taste of peppermint can occasionally occur. Very occasionally, soreness of the mouth, or even buccal ulceration have been reported, these effects disappear on withdrawal of the drug.
BASIC NHS PRICE
10ml dropper bottle: $5.70
LICENCE HOLDER
Rowa Ltd., Bantry, Co. Cork, Ireland
PLR 0531/6286

REFERENCES:
1. Ellis WR, et al. "Oral dissolution therapy a valid option in management of biliary duct stones. Gastroenterology" in press.
2. Ellis WR, Bell GD, Middleton B, et al. "Adjunct to bile acid treatment for gallstone dissolution. Low dose chenodeoxycholic acid combined with a terpene preparation." BMJ 1981; 282: 611-612

Further information is available on request from
Tillotts Laboratories
Henlow Trading Estate
Henlow, Beds. SG16 6DS
Telephone
0462 811 393
Telex 82 313

Tillotts LABORATORIES

Created by Nature. Proven by Science.

For relief of irritable bowel and abdominal pain

The unique enteric-coated Colpermin capsule is a long-acting, slow-release product containing a thixotropic paste of peppermint oil. The enteric coating permits this naturally occurring medication to be delivered direct to the distal small bowel. Recent studies confirm that Colpermin offers direct relief to the patient by effectively relaxing intestinal smooth muscle to relieve colonic pain and gaseous distension.

- Irritable bowel symptoms are highly responsive to placebo, but in a recent double-blind cross-over trial, Colpermin was found to be superior to placebo in alleviating irritable bowel symptoms over a three-week period.[1]

- A delayed-release preparation, Colpermin reaches the colon in an unmetabolised state, allowing it to effectively reduce colonic motility.[2]

- Recent ultrasound studies show a consistent inhibitory effect of topical peppermint oil on colon motility and symptomatic improvement of irritable bowel patients given peppermint oil.[3]

References:

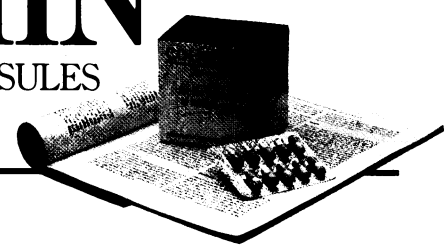
1. Rees WDW, Evans BK, Rhodes J: Treating irritable bowel syndrome with peppermint oil. *Br Med J* 2:835-836, 1979.

2. Somerville KW, Richmond CR, Bell GD: Delayed release peppermint oil capsules (Colpermin) for the spastic colon syndrome: A pharmacokinetic study. Proceedings of the British Pharmacological Society, Cambridge, April 1983. *Br J Clin Pharmacol*, to be published.

3. Taylor BA, Duthie HL, Oliveira RB, et al: Ultrasound used to measure the response of colonic motility to essential oils. Proceedings of *The International Motility Symposium* Aix-en-Provence, France, September 1983, to be published.

COLPERMIN™

(enteric-coated peppermint oil) CAPSULES



PRESCRIBING INFORMATION

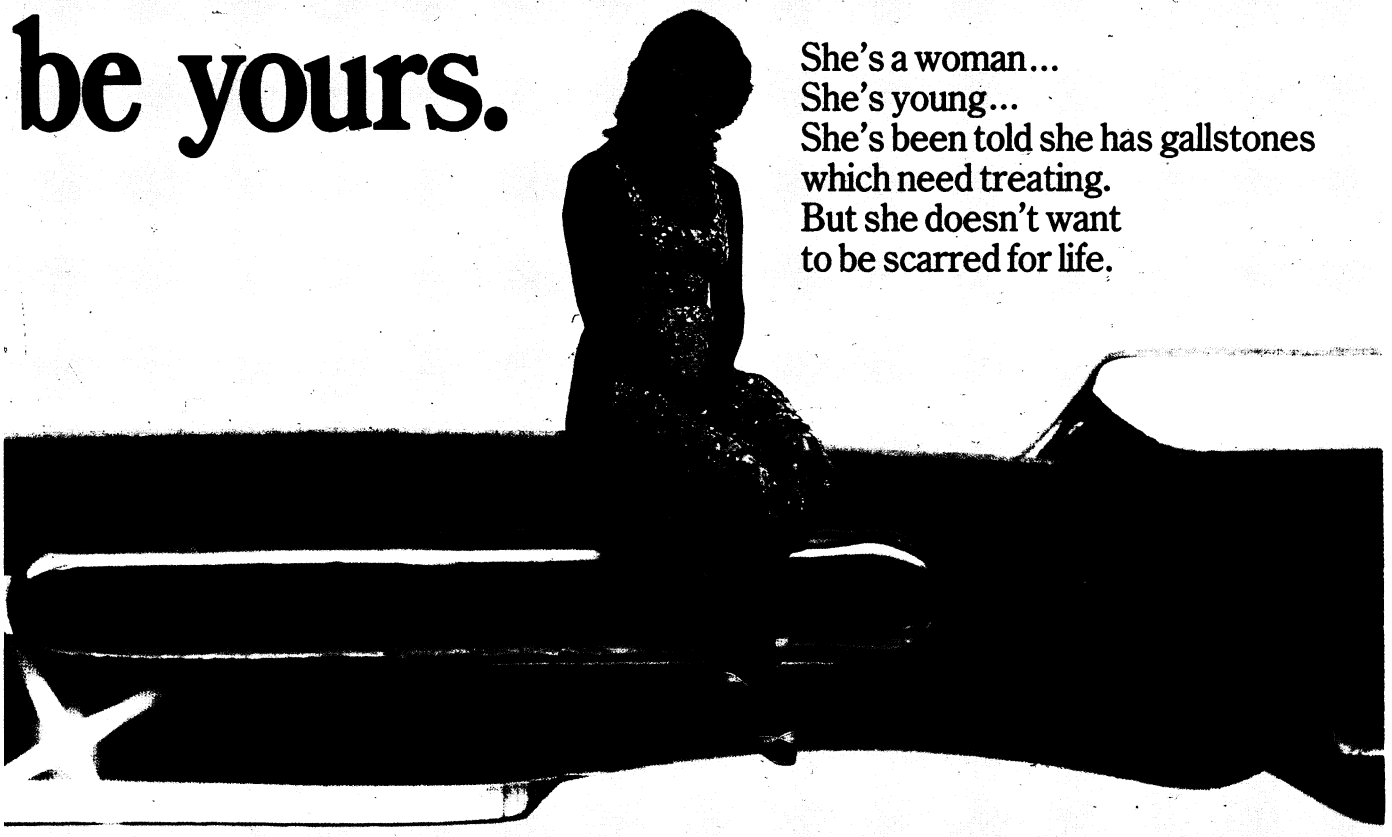
Presentation: Enteric-coated gelatin capsule. Each contains 0.2 ml standardised peppermint oil B.P., Ph. Eur. **Uses:** For the treatment of symptoms of discomfort and of abdominal colic and distension experienced by patients with irritable bowel syndrome. **Dosage and Administration:** One capsule three 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.

Tillotts LABORATORIES

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:** £10.58 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.
European Patent No. 0015334. **UK Patent No. 2006011.**

Henlow Trading Estate, Henlow, Beds. SG16 6DS

Nature is her first choice and on reflection could be yours.



She's a woman...
She's young...
She's been told she has gallstones which need treating.
But she doesn't want to be scarred for life.

Quite understandably a young woman with gallstones may not want surgery. After all, her friends are hardly likely to admire a scar. So before surgery is considered, maybe medical dissolution of the gallstones is possible, especially with a tried and tested product... CHENDOL.

CHENDOL contains chenodeoxycholic acid, a major component of human bile, so it works as nature intended... naturally.

Furthermore, unlike treatment with ursodeoxycholic acid calcification is rarely a problem.[1][2][3]

And while CHENDOL is working the symptoms of gallstones are often reduced.[4][5]

So for radiolucent gallstones in an opacifying gallbladder, medical dissolution with CHENDOL is the natural choice.

Chendol ® Registered Trade Mark.

chenodeoxycholic acid

The Medical Alternative

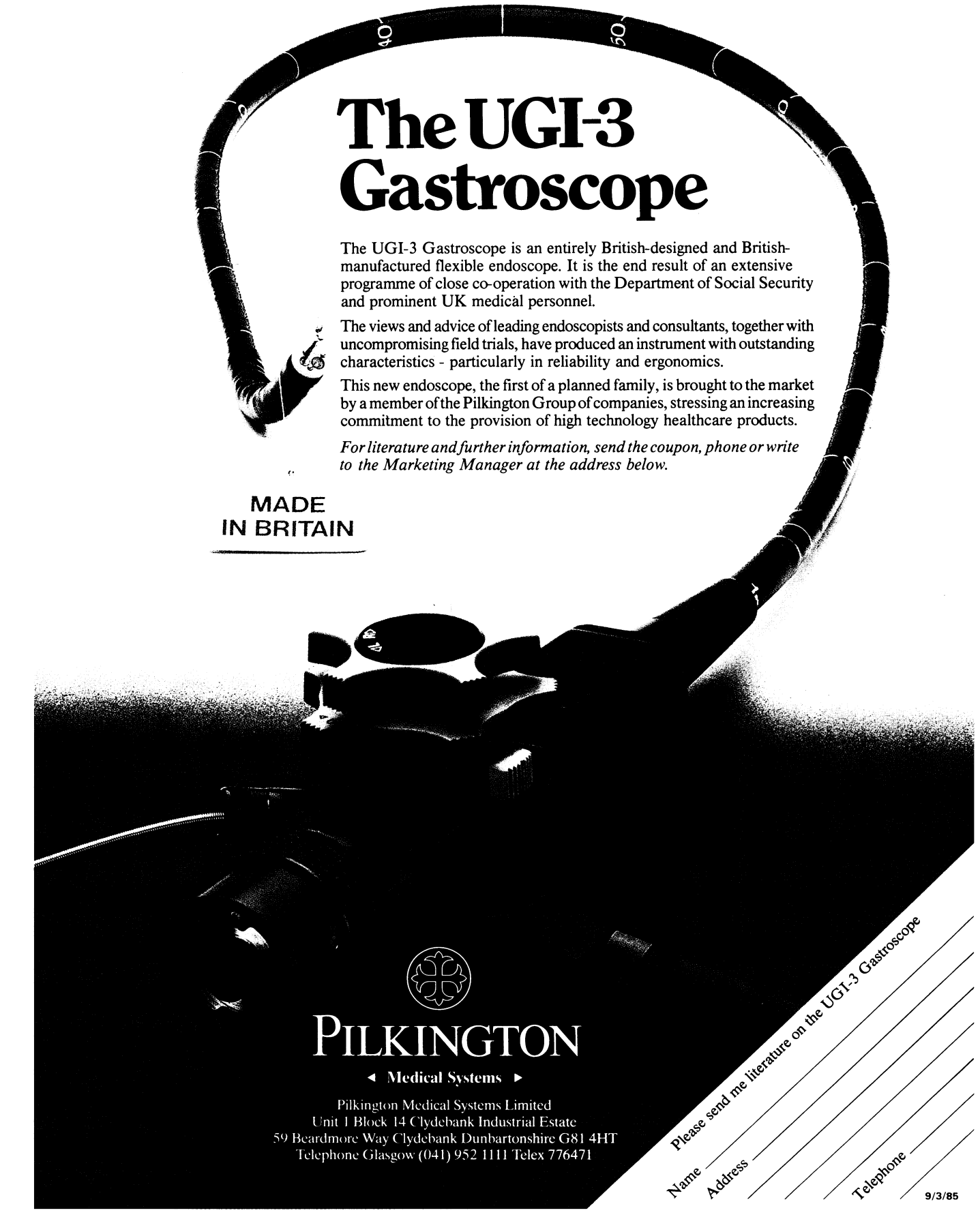
Prescribing Information

PRESENTATION: CHENDOL is available as tablets, each containing 250mg chenodeoxycholic acid. **INDICATIONS:** For dissolution of radiolucent cholesterol-rich gallstones in functioning gallbladders. It has a particular place in the treatment of patients in whom surgery is contra-indicated or who are anxious to avoid surgery. **DOSAGE AND ADMINISTRATION:** The present clinical evidence suggests that optimum results will be obtained on a dose level of 10-15mg per kg body weight daily, either as a single night time dose or in divided doses. It is recommended that treatment continues for three months after dissolution. **CONTRA-INDICATIONS, WARNINGS, ETC.** CHENDOL should not be administered to patients with radio-opaque calcified gallstones nor to patients with non-functioning gallbladders. CHENDOL should not be administered to women who may become pregnant, nor to patients with chronic liver disease, nor with inflammatory diseases of the small intestine and colon. **CHENDOL is generally well tolerated; the only side effects reported to date are diarrhoea and pruritis. It has been found that after a slight reduction in dose for a few days, diarrhoea ceases and the dose can then gradually be increased to the former level.** The clinician's discretion should be applied to the necessity, in individual cases, for laboratory monitoring. Chenodeoxycholic acid given in long-term studies at doses of 600mg/kg/day to rats and 1000mg/kg/day to mice, induced malignant liver cell tumours in female rats and benign liver cell tumours in female rats and male mice. The clinical significance of these findings is not known. **PHARMACEUTICAL PRECAUTIONS:** Store in a well closed container. **LEGAL CATEGORY:** POM. **PACKAGE QUANTITIES AND BASIC NHS COST:** Securitainer of 50 tablets £18.50. **PRODUCT LICENCE NO.:** 0495/0026. **DATE OF PREPARATION:** August 1984. **MEDICAL INFORMATION:** 12 Derby Road, Loughborough, Leicestershire LE11 0BB. Tel: (0509) 263113.

Further information on request from **CP Pharmaceuticals Ltd., Red Willow Road, Wrexham Industrial Estate, Wrexham, Clwyd LL13 9PX.**
A Fisons plc Company – incorporating Weddel and Charnwood Pharmaceuticals.

References 1) R. Raedsch et al (letter) 1981, *Lancet*, 2, 1296 2) M. C. Bateson et al, 1981, *Brit. med. J.*, 283, 645
3) F. di Mario et al, 1982, *Brit. med. J.*, 284, 1047 4) T. J. Meredith et al, 1982, *Gut*, 23, 382 5) H. J. Weis et al, 1980, *Klin. Wochenschr.*, 58, 313

NOW IN A NEW MORE CONVENIENT DOSE FORM
250mg TABLET



The UGI-3 Gastroscope

The UGI-3 Gastroscope is an entirely British-designed and British-manufactured flexible endoscope. It is the end result of an extensive programme of close co-operation with the Department of Social Security and prominent UK medical personnel.

The views and advice of leading endoscopists and consultants, together with uncompromising field trials, have produced an instrument with outstanding characteristics - particularly in reliability and ergonomics.

This new endoscope, the first of a planned family, is brought to the market by a member of the Pilkington Group of companies, stressing an increasing commitment to the provision of high technology healthcare products.

For literature and further information, send the coupon, phone or write to the Marketing Manager at the address below.

MADE IN BRITAIN

PILKINGTON

◄ Medical Systems ►

Pilkington Medical Systems Limited
Unit 1 Block 14 Clydebank Industrial Estate
59 Beardmore Way Clydebank Dunbartonshire G81 4HT
Telephone Glasgow (041) 952 1111 Telex 776471

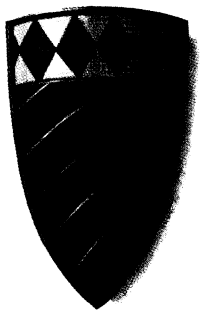
Please send me literature on the UGI-3 Gastroscope

Name

Address

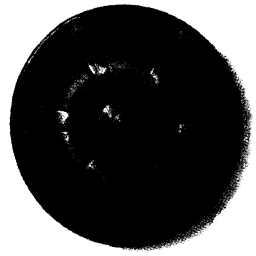
Telephone

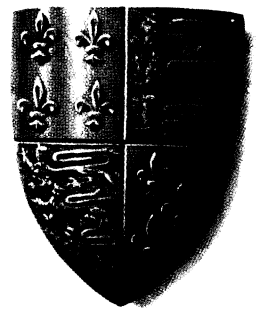
9/3/85



Renaissance

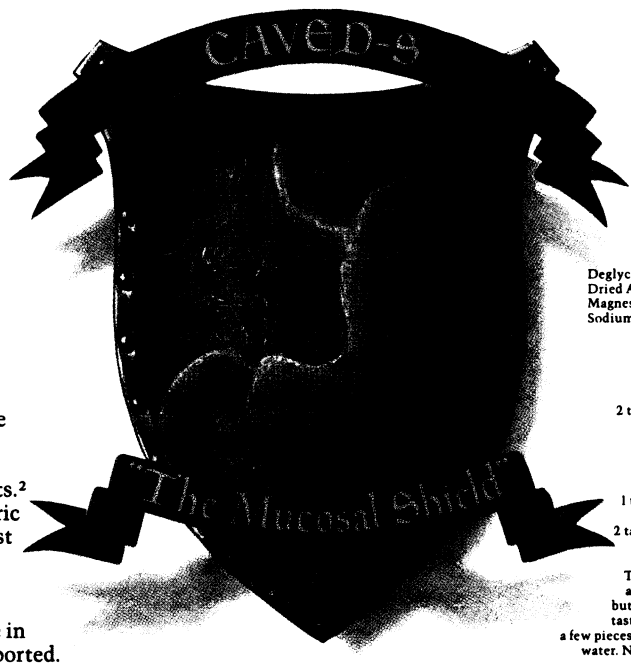
Mediaeval Crusades





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:
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Ursofalk®

ursodeoxycholic acid

The simple approach to gallstone dissolution

* effective[1,2,3]
* lack of side effects[1,4,5]
* cost-effective
* simple regimen

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1. Roda, E *et al.* Hepatology 1982; 2; no6: 804-810.
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3. Leuschner U. Bilanz der medikamentosen Gallestein Auflosung. Med Klin 1981; 76: 232-234.
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Prescribing Information

Presentation White opaque hard gelatin capsules containing 250 mg ursodeoxycholic acid (UDCA). **Uses** Dissolution of radiolucent gallstones measuring up to 15 mm diameter, as assessed on X-ray films, in patients whose gall bladders opacify on oral cholecystography. Ursofalk lowers biliary cholesterol secretion, reduces cholesterol saturation in bile, and facilitates transfer of cholesterol from gallstones to bile. **Dosage and Administration** The following dosage regime is recommended to provide a daily dosage of 8–12 mg UDCA/kg:

Body Weight (kg)	Dose of Ursofalk: Capsules daily (in 2 doses)	mg/kg/day
50–62	2	8.1–10
63–85	3	8.8–11.9
86–120	4	8.3–11.6

If doses are unequal the larger dose should be taken in late evening to counteract the rise in biliary cholesterol saturation which occurs in the early hours of the morning. The late evening dose may usefully be taken with food to help maintain bile flow overnight. The time required for dissolution of gallstones is likely to range from 6 to 24 months depending on stone size and composition. Follow up cholecystograms or ultrasound investigations may be useful at 6 month intervals until the gallstones have disappeared. Treatment should be continued until 2 successive cholecystograms and/or ultrasound investigations 4–12 weeks apart have failed to demonstrate gallstones. This is because these techniques do not permit reliable visualisation of stones less than 2 mm diameter. The likelihood of recurrence of gallstones after dissolution by bile acid treatment has been estimated as up to 50% at 5 years. The efficacy of Ursofalk in treating radio-opaque or partially radio-opaque gallstones has not yet been tested but these are generally thought to be less soluble than radiolucent stones. Non-cholesterol stones may not be dissolved by bile acids. These account for 10–15% of radiolucent stones. Obese patients may require a higher dose of Ursofalk for gallstone dissolution, for example up to 15 mg/kg daily. **Contra-indications, Warnings etc.** Like other bile acids, Ursofalk is absorbed from the intestine, passed to the liver, conjugated and excreted into the bile. Little information is available on the effects and tolerance of Ursofalk in the presence of hepatic damage or inflammatory bowel disease. The following drugs bind bile acids in vitro and may therefore interfere with absorption of Ursofalk – cholestyramine, charcoal, colestipol and certain antacids e.g. aluminium hydroxide. As with all but essential drugs the use of Ursofalk in early pregnancy is contra-indicated. (In the rabbit, but not in the rat, embryotoxicity has been observed). A product of this class has been found to be carcinogenic in animals. The relevance of these findings to the clinical use of UDCA has not been established. **Overdosage** Doses of up to 4 g UDCA/day have been used therapeutically. The compound is almost entirely excreted in the stool as UDCA or bacterial metabolites. Serious toxicity from a gross overdose is not to be expected although some looseness of the bowels may occur. **Pharmaceutical Precautions** Store in a cool dry place. **Legal Category** POM. **Package Quantity** Ursofalk 250 mg capsules in packs of 60. **Further Information** Many patients report a reduction in severity and frequency of biliary colic during bile acid treatment. **Product Licence Number** 4408/0001 **Basic NHS cost**: £28.00 for pack of 60 capsules.

Thames Laboratories Ltd

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