

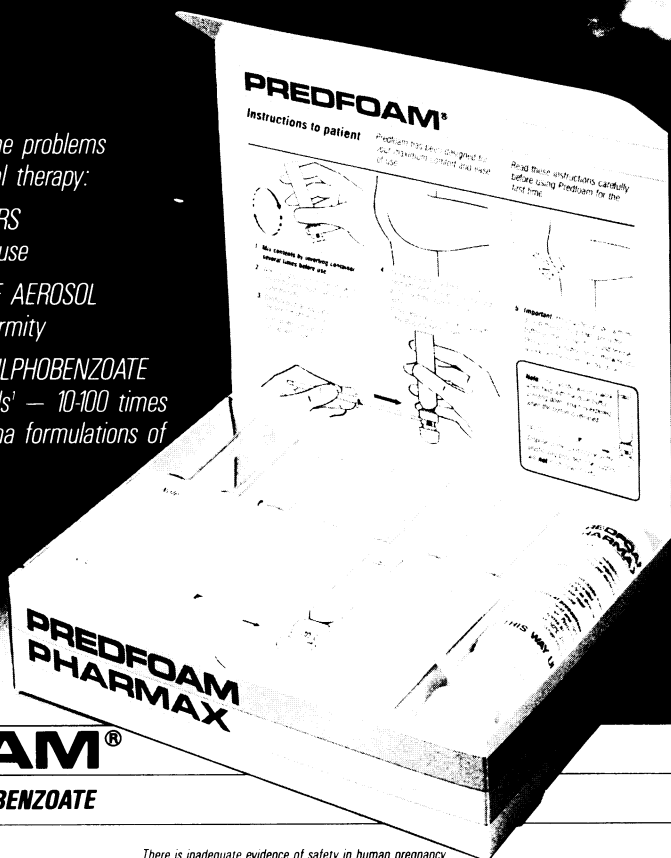
THIS WAY UP

Ulcerative Colitis?

dispose of a problem...

... How Predfoam helps solve the problems currently associated with local therapy:

- **DISPOSABLE APPLICATORS**
— Clean and simple to use
- **UNIQUE METERED DOSE AEROSOL**
— Ensures dosage uniformity
- **PREDNISOLONE METASULPHOBENZOATE**
— High local tissue levels¹ — 10-100 times those produced by enema formulations of prednisolone²



PREDFOAM®

PREDNISOLONE METASULPHOBENZOATE

Prescribing Information

Presentation: A white mucoadherent aerosol foam containing prednisolone metasulphobenzoate sodium equivalent to 20mg prednisolone per metered dose.

Uses: Treatment of proctitis and ulcerative colitis.

Dosage and Administration: One metered dose inserted rectally once or twice daily for two weeks, extending treatment for a further two weeks when a good response is obtained.

Contra-indications, warnings, etc:

Contra-indications: Local conditions where infection might be masked or healing impaired eg. peritonitis, fistulae, intestinal obstruction, perforation of the bowel.

Side effects: The consequences of systemic absorption should be considered with extensive use over prolonged periods. As with all rectal corticosteroids, prolonged continuous use is undesirable.

There is inadequate evidence of safety in human pregnancy.

Topical administration of corticosteroids to pregnant animals can cause abnormalities of foetal development including cleft palate and intra-uterine growth retardation. There may therefore be a very small risk of such effects in the human foetus. Overdosage by this route is unlikely.

Legal Category: POM

PL 0108/0101

Pack and basic NHS price: Box containing 1 fourteen-dose canister, 14 disposable nozzles and 14 plastic bags £7.00

® Registered Trade Mark

References: (1) McIntyre, P.B. et al. (1985) GUT 26 822-824
(2) Rodrigues, C. et al. (1987) Lancet, June 27th, 1497.

Full information is available on request



PHARMAX LIMITED
Bourne Road, Bexley, Kent. DA5 1NX
Telephone 0322 91321

NEW

SPECIFICALLY DEVELOPED

THE IMPORTANCE OF NIGHT-TIME COVER

An important factor in the causation of duodenal ulcer is nocturnal intragastric acidity.^{1,2} During the day, production of gastric acid is desirable for natural digestion and as protection against unwanted ingested bacteria.

'Pepcid' PM, the first H₂-receptor antagonist indicated solely for once-nightly use.

'Pepcid' PM, when administered at night, effectively controls nocturnal acidity in most duodenal-ulcer patients, providing rapid healing and swift relief of pain.

'Pepcid' PM has been shown to achieve up to 91% (124 of 136 patients) healing of duodenal ulcers within six weeks⁴ and up to 81% (62 of 77 patients) of gastric ulcers within eight weeks.⁵

That's 'Pepcid' PM. A small, once-nightly 40 mg tablet supplied in a convenient 28-day calendar pack to help maximise compliance.

ABRIDGED PRODUCT INFORMATION ▼

Full prescribing information is available and should be consulted before prescribing.

INDICATIONS Duodenal ulcer; prevention of relapses of duodenal ulceration; benign gastric ulcer; hypersecretory conditions such as Zollinger-Ellison syndrome.

DOSAGE In duodenal and benign gastric ulcer, 40 mg at night for four to eight weeks.

For prevention of duodenal ulcer recurrence, 20 mg at night.

Initiate antisecretory therapy of Zollinger-Ellison syndrome with 20 mg every six hours and adjust to individual response. The maximum dosage used for up to one year was 480 mg daily.

CONTRA-INDICATION Hypersensitivity.

PRECAUTIONS Exclude any likelihood of gastric carcinoma before using 'Pepcid' PM.

Consider reducing the daily dose if creatinine clearance falls to or below 30 ml/min.

'Pepcid' PM is not recommended in pregnancy, nursing mothers or children.

SIDE EFFECTS Rarely, headache, dizziness, constipation, diarrhoea. Less frequently, dry mouth, nausea, vomiting, rash, abdominal discomfort, anorexia, fatigue.

BASIC NHS COST 20 mg tablets, £14.00 for 28-day calendar pack and £25.00 for bottles of 50.

40 mg tablets, £26.60 for 28-day calendar pack and £47.50 for bottles of 50.

Product Licence Numbers: 20 mg tablets, 0025/0215; 40 mg tablets, 0025/0216.

▼ Special reporting to the CSM required.

Issued January 1988.

References

1. Gledhill, T., *et al.*, *Gut*, 1983, 24, 904.
2. Ireland, A., *et al.*, *Lancet*, 1984, ii, 274.
3. Santana, I. A., *et al.*, *Postgrad. med. J.*, 1986, 62 (Suppl. 2), 39.
4. Mann, S. G., Cottrell, J., *Ital. J. Gastroenterol.*, 1987, 19 (Suppl. 3), 68.
5. Data on file, Merck Sharp & Dohme Research Laboratories.



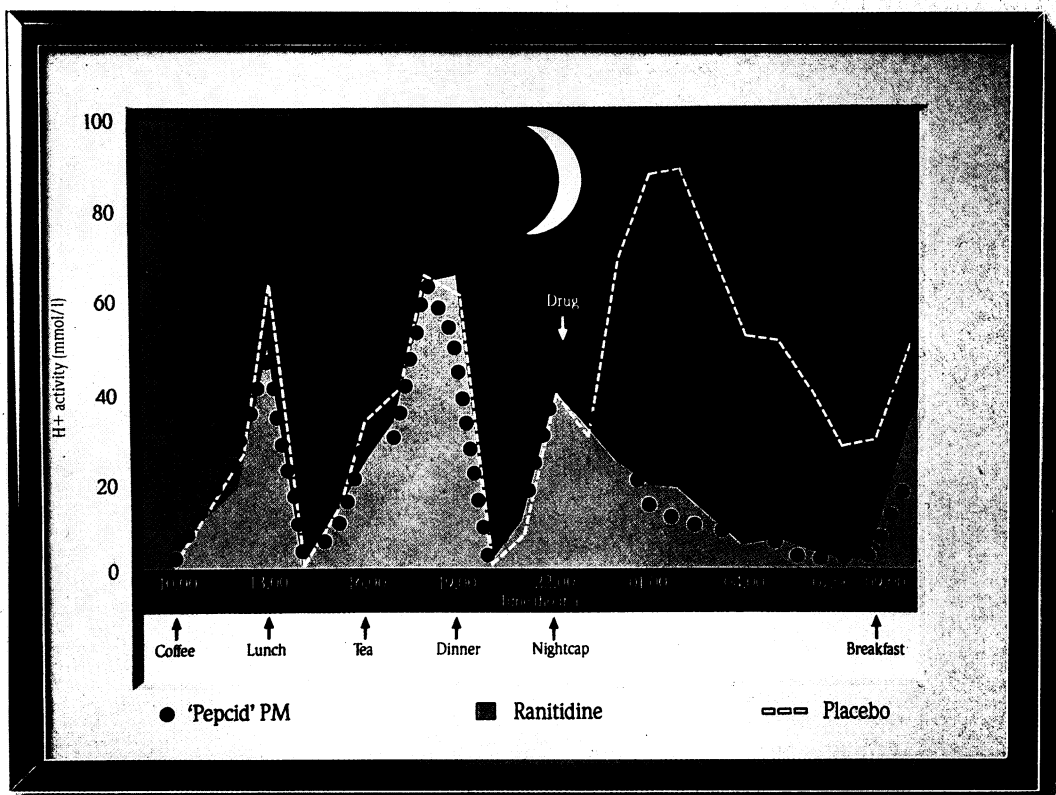
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Hertford Road, Hoddesdon, Hertfordshire
Division of Merck Sharp & Dohme Limited

TM denotes trademark



FOR ONCE-NIGHTLY USE

NIGHT-TIME COVER FROM A SINGLE DOSE³



Adapted from Reference 3.

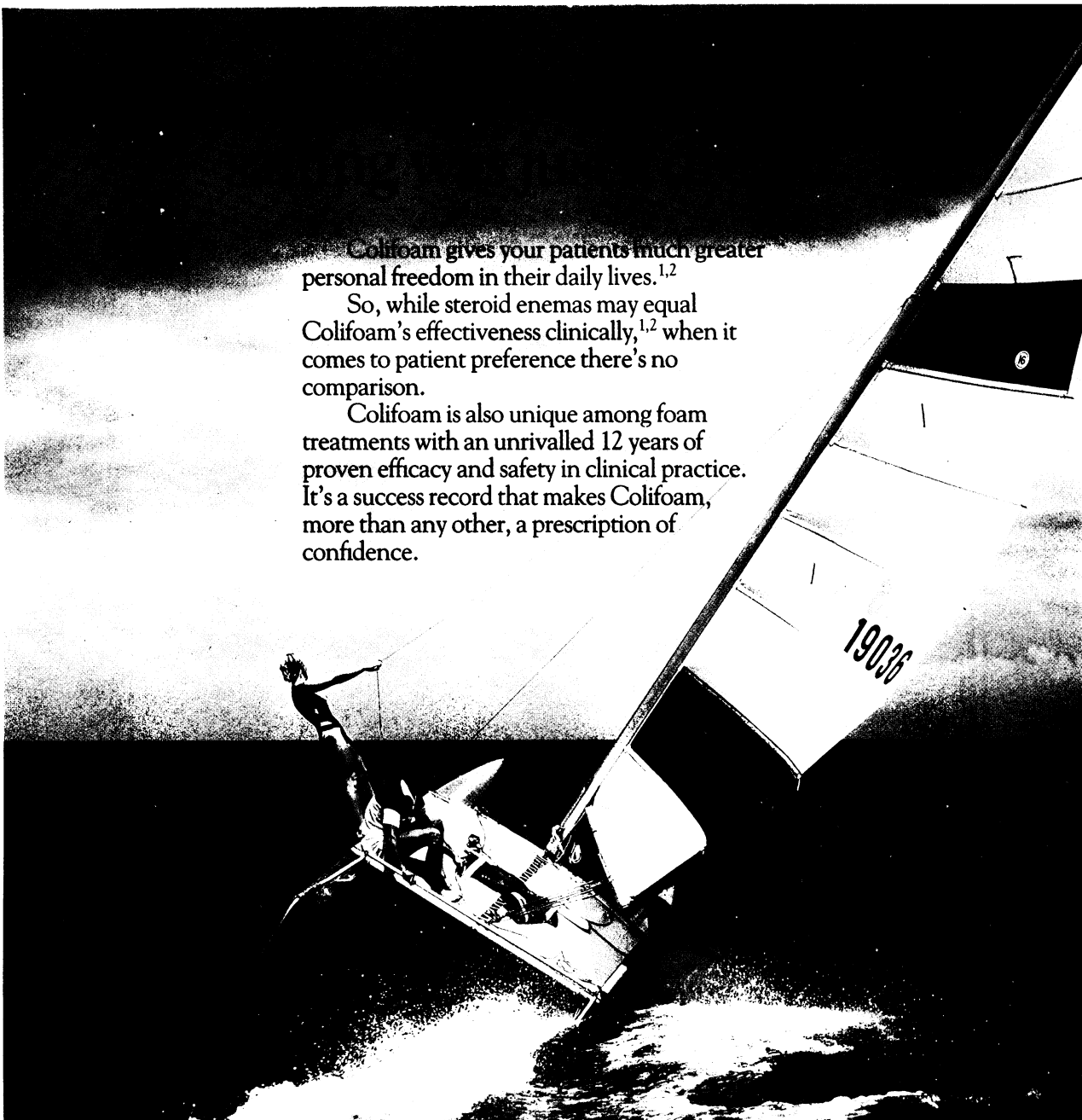
Mean hourly intragastric H⁺ activity in healthy subjects taking one dose of either famotidine 40 mg, ranitidine 300 mg or placebo.³

PEPCIDTM PM

40 mg

(famotidine)

One at night can make their day



Colifoam gives your patients much greater personal freedom in their daily lives.^{1,2}

So, while steroid enemas may equal Colifoam's effectiveness clinically,^{1,2} when it comes to patient preference there's no comparison.

Colifoam is also unique among foam treatments with an unrivalled 12 years of proven efficacy and safety in clinical practice. It's a success record that makes Colifoam, more than any other, a prescription of confidence.



The proven choice in distal inflammatory bowel disease

1. Ruddell WSJ et al. Gut 1980; 21: 885-889

2. Somerville KW et al. British Medical Journal 1985; 291: 866

PRESCRIBING INFORMATION: Presentation: White odourless aerosol containing hydrocortisone acetate PhEur 10%. Uses: 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 pack). 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. Keep out of reach of children. For external use only. Legal category: POM. Package Quantity & Basic NHS cost: 25g canister plus applicator, £7.25. 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. Further information is available on request. Stafford-Miller Ltd., Professional Relations Division, Hatfield, Herts. AL10 0NZ.

ASACOL

NEW INDICATION

**'Asacol' is now indicated as
initial therapy for the maintenance
of remission of ulcerative colitis.**

**'Asacol' delivers 5-ASA direct to the colon,
without the sulphapyridine carrier moiety
of sulphasalazine.**

**Your patients no longer have to run the risk of
sulphapyridine-associated side effects,
before receiving the benefits of 'Asacol'.**

ASACOL

MESALAZINE* (5-aminosalicylic acid)

**Effective maintenance of remission of ulcerative colitis
without the risk of sulphapyridine associated side effects**

Prescribing Information

Presentation 'Asacol' Tablets, PL 0002/0173, each containing 400 mg of mesalazine (5-aminosalicylic acid) coated with a pH-dependent acrylic based resin (Eudragit S) to ensure release of the active ingredient in the terminal ileum and colon. 100 (10 blister packs of 10 tablets), £21.85. Uses For the maintenance of remission of ulcerative colitis. Dosage and administration *Adults*: 3 to 6 tablets daily in divided doses. There is no dose recommendation for children. Contra-indications A history of sensitivity to salicylates. Children under 2 years of age. Precautions Not recommended in patients with renal impairment. Use with caution in patients with a raised blood urea or proteinuria. Avoid during pregnancy. Do not give with lactulose or similar preparations

which lower stool pH. Adverse reactions Nausea, diarrhoea, abdominal pain and headache. Exacerbation of the symptoms of colitis. Rarely, reversible pancreatitis. Legal category POM. 5.5.88

Smith Kline & French Laboratories Limited
A SMITHKLINE BECKMAN COMPANY
Welwyn Garden City, Hertfordshire AL7 1 EY

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Authorized User of the trade mark 'Asacol'
*Mesalazine is the British approved name of 5-aminosalicylic acid

SK&F
ASC:AD0558

Spoilt for choice



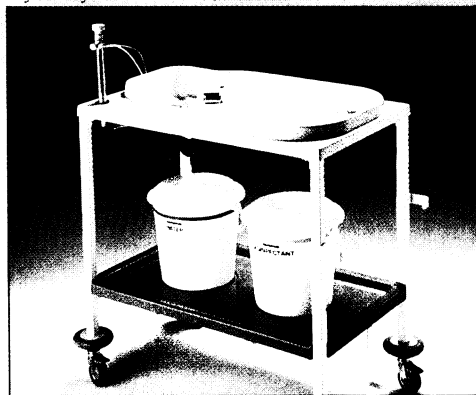
New Auto-Disinfector 2
— Now with a programmable pause



KeyMed KeySonic



Olympus EW-20



Olympus KC-10

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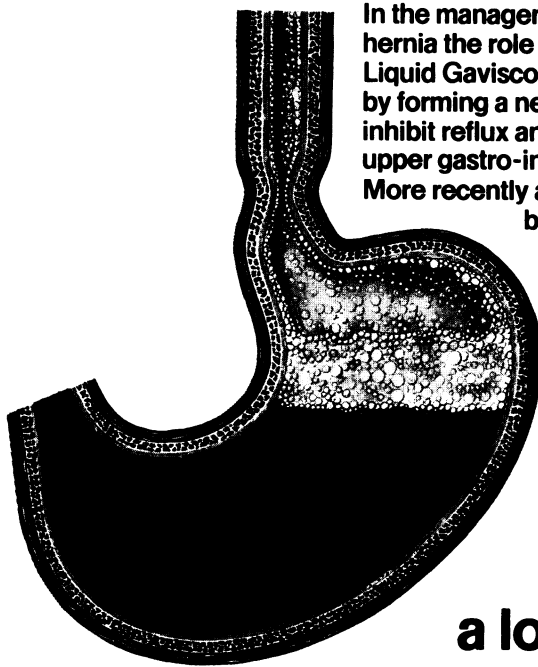
Ireland: KeyMed Ireland Ltd., KeyMed House, Lord Edward
Court, Bride Street, Dublin 8. Telephone: 774855

USA: KeyMed Inc., 400 Airport Executive Park,
Spring Valley, New York 10977. Telephone: (914) 425-3100



Medical Equipment

STRENGTH AGAINST REFLUX¹



In the management of reflux oesophagitis and hiatus hernia the role of Liquid Gaviscon is well established. Liquid Gaviscon deals with reflux simply and physically by forming a neutral layer or 'raft' on gastric contents to inhibit reflux and so bring effective relief of reflux-related upper gastro-intestinal symptoms.

More recently an in-vitro comparison¹ using computer-based techniques, has shown that Liquid Gaviscon produces a 'raft' more resistant to upward pressures than any other alginate-containing compound tested.

Liquid Gaviscon[®]

Sodium Alginate BPC, Sodium Bicarbonate Ph.Eur.,
Calcium Carbonate Ph.Eur.

a logical choice in reflux

Prescribing Information

Active Ingredients: Sodium Alginate BPC 500mg, Sodium Bicarbonate Ph.Eur. 267mg per 10ml; Calcium Carbonate 160mg per 10ml dose. **Indications:** Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux, hiatus hernia and reflux oesophagitis. **Contra-indications:** None known. **Dosage and Administration:** Adults, children over 12: 10-20ml liquid after meals and at bedtime. Infants: not recommended. Children under 12: 5-10ml liquid after meals and at bedtime.

Note: 10ml liquid contains 6.2mmol sodium. **Basic NHS Cost:** As at Jan. 1988: 500ml liquid £2.88, Irish Price IR £3.72.

PL: 44/0058. **Irish P.A. No.:** 27/12/1.

Reference

1. Washington, N. *et al.*, *Int. J. Pharmaceut.* (1986) **28**, 139-143
Further information is available on request.
Reckitt & Colman Pharmaceutical Division,
Hull HU8 7DS.

*Registered trade mark.



Lactaid's 2 lactases:

- Tablets—For oral use
- Drops—To add to milk

Lactaid enables your patients to make lactose digestible regardless of their level of tolerance or where or when they eat. Your patients will enjoy dairy foods once again and benefit from their nutritional value.

LACTAID TABLETS

*An oral stomach
acid-stable lactase*

As an acid-stable lactase, Lactaid Tablets work effectively in most gastric conditions from pH 2.5 to above 7.0. When taken at the beginning of a meal, Lactaid Tablets hydrolyze lactose into digestible sugars, glucose and galactose, as the food is eaten. Each Lactaid Tablet contains 3000 FCCLU (*Food*

Chemicals Codex
lactase units).

This amount will hydrolyze the lactose in 8 ounces of milk in 11 minutes at pH 4.5, 37° C.

Dosage ranges from one-half to three tablets taken with the lactose-content food, to treat various intolerance levels.

LACTAID DROPS

*A neutral pH-active lactase
for treatment of milk*

The neutral pH-active lactase in Lactaid Drops works most effectively around pH 6.8, that of fresh milk. Up to 99+% of the lactose in any milk can be hydrolyzed by adding Lactaid Drops as directed, so any lactose intolerant patient can drink milk symptom-free.

Lactaid Brand Milk is pre-treated at the dairy with Lactaid neutral pH-active lactase to 70% hydrolysis of the lactose. It can be further home-treated if necessary with Lactaid Drops for 99+% lactose reduction. Lactaid Lowfat Milk is real milk, ready to drink, and is available in the dairy case of almost all supermarkets.



Lactaid works effectively orally and for treating milk.
The clinical effectiveness of both tablets and drops is well established.

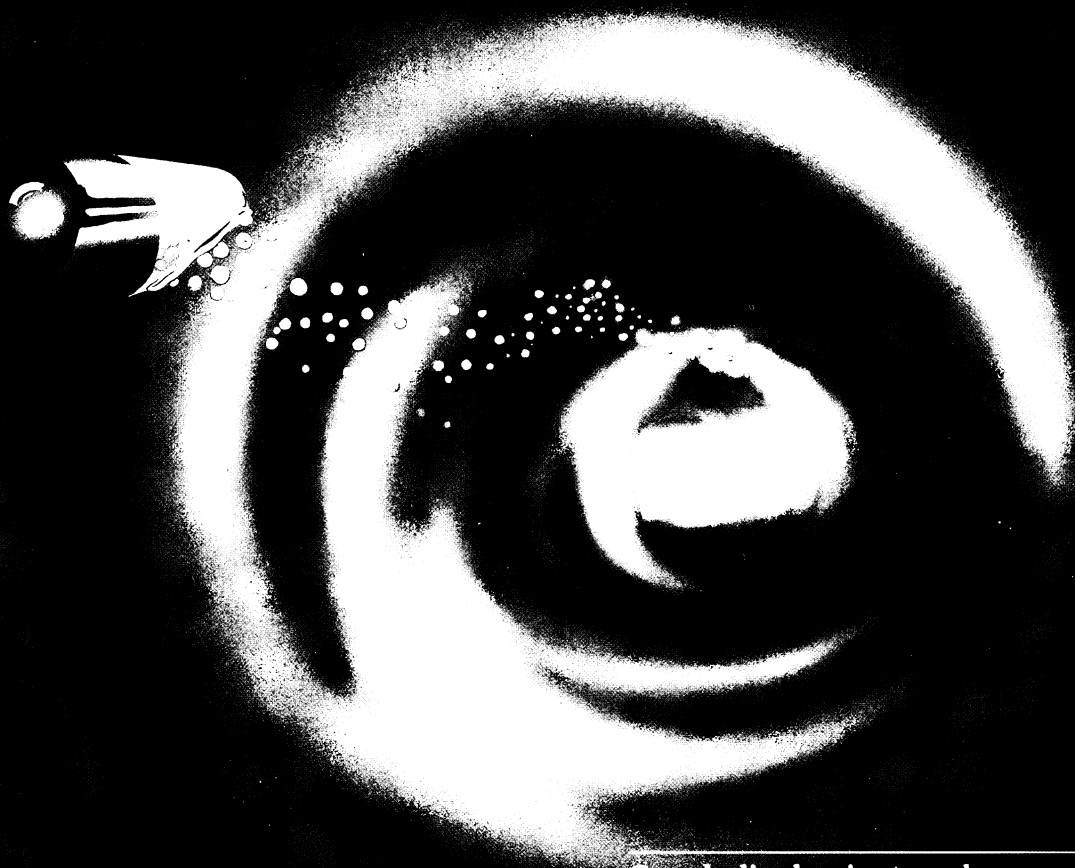
For our professional pamphlets on Lactaid Tablets and Lactaid Drops, patient literature, and free samples, please call our Lactaid Hotline. **800-257-8650** 9am to 4pm Eastern Time Monday - Friday

Lactaid®

BRAND

THE COMPLETE TREATMENT FOR LACTOSE INTOLERANCE

Enteric coated granules for improved enzyme delivery in chronic pancreatitis



creon[®]
pancreatin

Capsule dissolves in stomach

Granules unaffected by stomach acid

Enzymes released in duodenum

Mimics the normal digestive process

A predictable release for patients with chronic pancreatitis

PRESCRIBING INFORMATION: **Presentation:** Brown/yellow capsules containing enteric coated granules of pancreatin equivalent to: 9,000 BP units of amylase; 8,000 BP units of lipase; 210 BP units of protease. Available in packs of 100. Basic N.H.S. price £13.33. **Indication:** Pancreatic exocrine insufficiency. **Dosage and administration:** Adults and children: Initially one or two capsules with meals, then adjust according to response. The capsules should be swallowed whole, or for ease of administration they may be opened and the granules taken with fluid or soft food, but without chewing. If the granules are mixed with food, it is important that they are taken immediately, otherwise dissolution of the enteric coating may result. **Contra-indications, Warnings, etc.** Contra-indications: Substitution with pancreatic enzymes is contra-indicated in the early stages of acute pancreatitis. **Warnings:** Use in pregnancy: There is inadequate evidence of safety in use during pregnancy. The product is of porcine origin. Rarely, cases of hyper-uricosuria and hyper-uricaemia have been reported with high doses of pancreatin. Overdosage could precipitate meconium ileus equivalent. Perianal irritation could occur, and, rarely, inflammation when large doses are used. **Product Licence Number:** 5727/0001. **Name and address of Licence Holder** Kali Chemie Pharma GmbH, Postfach 220, D-3000, Hannover 1, West Germany.

duphar

Further information is available from:

Duphar Laboratories Ltd, Duphar House, Gaters Hill, West End, Southampton SO3 3JD. Tel: (0703) 472281

SELECTIVE ANTISPASMODIC

FREES THE IBS PATIENT FROM THE GRIP OF SPASM



Further information is available from:

Norgine

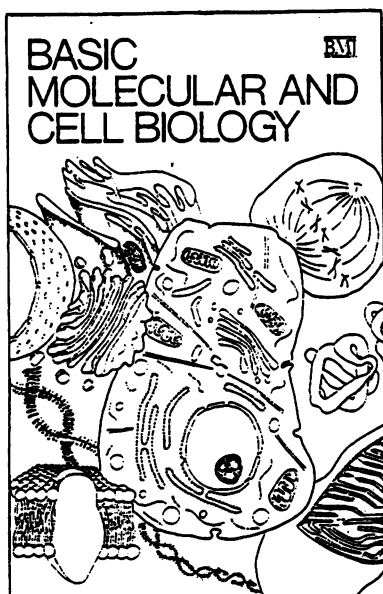
Norgine Limited, 116-120 London Road,
Oxford OX3 9BA.

Norgine is a British company
Spasmonal and Norgine are trademarks

Spasmonal
Trade Mark

alverine citrate

493UK/78A/O1M

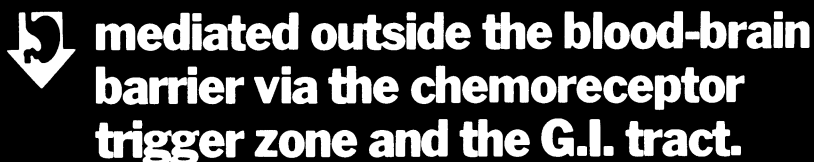


The extraordinary technical developments in molecular biology over the past few years, and the equally rapid advances in understanding of cell biology, will almost certainly result in far reaching changes in medical research and practice. In this collection of articles experts in molecular and cell biology provide the background information to give clinicians an insight into the way in which the medical sciences may be moving over the next few years and into the exciting possibilities opening up for the treatment of genetic disorders, cancer, and the common illnesses of Western society such as degenerative vascular disease and diabetes.

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domperidone



a move in the right direction for relief of dyspeptic nausea

Contra-indications/warnings etc: No specific contra-indications. In common with other dopamine blocking agents Evoxin produces a rise in serum prolactin which may be associated with galactorrhoea, and less commonly with osteoporosis. Safety of Evoxin in pregnancy has not yet been established. Evoxin is a trade mark. Further information available from **Evotec Pharmaceuticals Ltd, 100, Grosvenor Street, Guildford, Surrey GU1 1AA.**

1980, Series 1980, No. 36: 77-79.
 1981, Series 1981, No. 36: 140-146.



Rapid relief for patients gripped by IBS

Colofac rapidly relieves the symptoms of Irritable Bowel Syndrome by a direct action on colonic smooth muscle.

Colofac eliminates spasm without the anti-cholinergic side effects that can prove troublesome to the patient.



colofac[®] 
mebeverine
loosens the grip of IBS

Prescribing Information

Presentation: White, sugar-coated tablets each containing 135mg mebeverine hydrochloride. Available in packs of 100. Basic NHS price £8.35. Yellow, banana-flavoured sugar-free suspension containing mebeverine pamoate equivalent to 50mg mebeverine hydrochloride per 5ml. Available in bottles of 300ml. Basic NHS price £3.50.
Indications: 1. Irritable bowel syndrome. 2. Gastro-

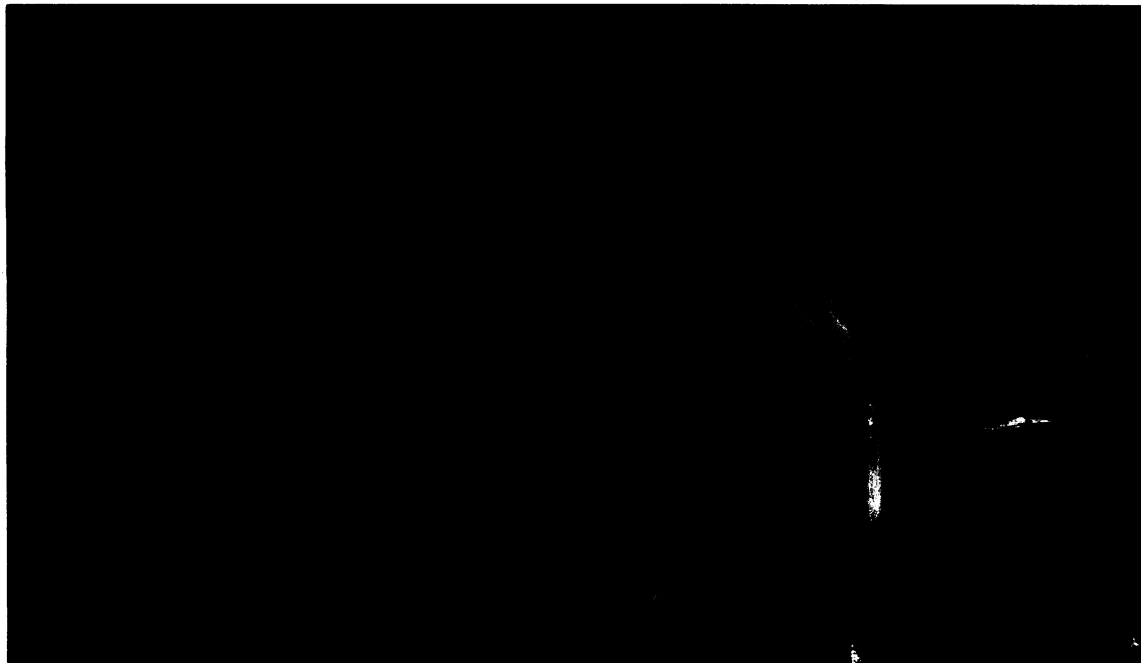
intestinal spasm secondary to organic diseases.

Dosage and Administration: Tablets: Adults and children ten years and over: One tablet three times a day, preferably 20 minutes before meals. Suspension: Adults and children ten years and over: 15ml (150mg) three times a day, preferably 20 minutes before meals. **Contra-indications, warnings, etc:** Animal experiments have failed to show any terato-

genic effects. However, the usual precautions concerning the administration of any drug during pregnancy should be observed. **Product Licence Number:** Tablets: 0512/0044. Suspension: 0512/0061.

Further information is available on request to the Company: Duphar Laboratories Limited, Gaters Hill, West End, Southampton, SO3 3JD. Telephone: 0703 472281

duphar



Lets ulcers heal by night and the stomach work by day

A single evening dose of AxiD suppresses acid production only during the night¹ when mucosal damage may occur.

Because of its short half-life, AxiD then produces minimal suppression of daytime gastric acid.

AxiD produces effective ulcer healing²⁻⁴ whilst allowing the stomach to work virtually normally during the day.

NEW **AXID** 300mg NIZATIDINE ONCE NIGHTLY H₂ ANTAGONIST

▼ **ABBREVIATED PRESCRIBING INFORMATION.** Presentation: Capsules containing 150mg or 300mg nizatidine INN. Uses: For the treatment of duodenal and benign gastric ulcer, and prevention of duodenal ulcer recurrence. **Dosage and Administration:** (For full information, see data sheet). AxiD is administered orally. **Adults:** For duodenal and benign gastric ulcer, the recommended daily dose is 300mg in the evening for 4 or, if necessary, 8 weeks. For prevention of duodenal ulcer recurrence, the recommended daily dose is 150mg in the evening. **The elderly:** Normally dosage modification is not required except in patients who have moderate to severe renal impairment. **Children:** Not recommended. **Patients with impaired renal function:** Moderate renal impairment (creatinine clearance less than 50ml/min), the dose should be reduced by 50% to 150mg in the evening. Severe renal impairment (creatinine clearance less than 20ml/min), the dose should be reduced by 75% to 150mg on alternate days. Prevention of duodenal ulcer recurrence in moderate renal impairment (creatinine clearance less than 50ml/min), the dose may be reduced to 150mg on alternate days. Severe renal impairment (creatinine clearance less than 20ml/min), the dose may be reduced to 150mg every third day. **Contra-indication:** Known hypersensitivity to H₂-receptor antagonists. **Warnings:** *Usage in pregnancy:* The safety of nizatidine for use during pregnancy has not been established. *Usage in lactation:* Administer to nursing mothers only if considered absolutely necessary. **Drug interactions:**

No interaction has been observed between nizatidine and aminophylline, theophylline, chlordiazepoxide, diazepam, metoprolol, warfarin or lorazepam. Nizatidine does not inhibit the hepatic cytochrome P450-linked drug metabolising enzyme system.

Precautions: Patients with impaired liver or kidney function should be treated with caution (see data sheet). **Side-effects:** Possible side-effects include headache, asthenia, chest pain, myalgia, abnormal dreams, somnolence, rhinitis, pharyngitis, cough, pruritus, sweating and reversible, asymptomatic elevations of transaminases.

Overdosage: There is no experience of overdose in humans. Tested at very high doses in animals, nizatidine has been shown to be relatively non-toxic. **Treatment:** Symptomatic and supportive therapy is recommended. Activated charcoal may reduce nizatidine absorption and haemodialysis may remove absorbed nizatidine. **Legal Category:** POM **Product Licence Numbers:** Capsules 150mg 0006/0230. Capsules 300mg 0006/0231. **Basic NHS Cost:** Per 28 day calendar pack - 150mg capsules £13.44; 300mg capsules £25.76. **Date of Preparation:** August

1987. Full prescribing information is available from: Eli Lilly & Company Limited, Dextra Court, Chapel Hill, Basingstoke, Hampshire RG21 2SY. Telephone: (0256) 473241. **References:** 1. Dammann HG *et al*, *Scand J Gastroenterol* 1987; 22: 56. 2. Simon B *et al*, *Ibid* 61. 3. Naccarato R *et al*, *Ibid* 71. 4. Cerulli MA *et al*, *Ibid* 79. 'AXID' is a Lilly trademark.



For Constipation



Fybogel Orange—gentle but effective
Fybogel Orange treats constipation gently but effectively by increasing bulk in the colon and thus encouraging normal, healthy peristalsis with soft, formed stools.¹

Fybogel Orange—rapid first-line therapy

In a recent study of 224 newly presenting constipation patients treated with Fybogel Orange, 63.1% had a motion within 24 hours—and after 48 hours of Fybogel Orange 89.9% of patients had achieved bowel movement.²

Fybogel Orange—the patients' first choice for flavour

Recent tasting research showed that patients prefer orange flavoured bulking agents.³

Fybogel Orange

Ispaghula husk BP

gently does it

Active ingredients: Each sachet contains 3.5g Ispaghula husk BP. **Indications:** Conditions requiring a high-fibre regimen. **Dosage and Administration:** (To be taken in water) Adults and children over 12: One sachet morning and evening. Children under 12: One half to one level 5ml spoonful depending on age and size, morning and evening. **Contra-indications, Warnings, etc.:** Fybogel is contra-indicated in cases of intestinal obstruction and colonic atony. **Basic NHS Price:** At April '88 60 sachets £4.24, Eire: 60 sachets IR £4.92. **PL No.:** Fybogel Orange 44/0068, Fybogel 44/0041. **Irish P.A. No.:** Fybogel Orange 27/2/2, Fybogel 27/2/1. **References:** 1. Data on file, 1985, Reckitt & Colman Pharmaceutical Division. 2. Data on file, 1988, Reckitt & Colman Pharmaceutical Division. 3. Data on file, 1987, Reckitt & Colman Pharmaceutical Division. Fybogel is a trade mark. Further information is available from Reckitt & Colman Pharmaceutical Division, Dansom Lane, Hull HU8 7DS.



Specialist Books from Springer-Verlag

J. R. Siewert, A. H. Hölscher, Munich (Eds.)

Diseases of the Esophagus

1988. 600 figures. XXV, 1400 pages. Hard cover DM 398,-.
ISBN 3-540-17697-7

This comprehensive book covers the entire range of esophageal diseases with regard to epidemiology, pathogenesis, pathophysiology, diagnosis, as well as conservative and, above all, surgical treatment.

R. Giuli, Paris, R. W. McCallum, Charlottesville (Eds.)

Benign Lesions of the Esophagus and Cancer

Answers to 210 Questions

1988. 309 figures, 229 tables. 904 pages. Hard cover
DM 218,-. ISBN 3-540-18446-5

Contents: Infrequent but recognized associations. - Esophageal dysplasia and reflux esophagitis. - Physiopathology of peptic esophagitis. - Medical treatments of peptic esophagitis. - Surgical treatment of peptic esophagitis. - Conservative surgical procedures. - Surgical resections and evaluation of surgical results. - Barrett's esophagus. - Malignant degeneration. - Symposium on the anatomic pathology of esophageal neoplasia.

French edition:

R. Giuli: *Lésions bénignes de l'oesophage et cancer*
1988. Hard cover DM 218,-. ISBN 3-540-18706-5

H. Menge, M. Gregor, G. N. J. Tytgat, B. J. Marshall (Eds.)

Campylobacter pylori

Proceedings of the First International Symposium on
Campylobacter pylori, Kronberg, June 12-13th, 1987

1988. 46 figures, 33 tables. XIV, 249 pages.
Hard cover DM 86,-. ISBN 3-540-18761-8

This book reflects the knowledge accumulated until now on the newly described bacterium *Campylobacter pylori*. It covers: the microbiology and biochemistry of *Campylobacter pylori*; the pathophysiology of gastritis and peptic ulcer disease; the epidemiology of *Campylobacter pylori* infection; the diagnosis of *Campylobacter pylori* infection; and the treatment of chronic gastritis and peptic ulcers with bismuth salts.

W. Domschke, Erlangen; H. G. Dammann (Eds.),

Prostaglandins and Leukotrienes in Gastrointestinal Diseases

B. M. Peskar, K. H. Holtermüller, (Co-Eds.)

1988. 83 figures. XVII, 332 pages
Soft cover DM 98,-. ISBN 3-540-18744-8

This book saves the reader time-consuming reference to different sources and provides a synoptic view of the essential aspects of prostaglandins and leukotrienes in one volume. Experts discuss matters of topical clinical interest together with the necessary physiological, biochemical and pharmacological background.

M. A. Meyers, State University of New York at Stony Brook

Dynamic Radiology of the Abdomen

Normal and Pathologic Anatomy

3rd edition. 1988. 1061 figures, 14 in full color, 10 tables.
X, 507 pages. Hard cover DM 248,-. ISBN 3-540-96624-2
Distribution rights for Japan: Nankodo Company, Tokyo

Extensively revised and updated, the third edition of *Dynamic Radiology of the Abdomen* remains the only text covering radiology of the abdomen as it relates to the progression of disease within an organ and from one organ to another.

P. Schlag, P. Hohenberger, University of Heidelberg;
U. Metzger, University of Zurich (Eds.)

Combined Modality Therapy of Gastrointestinal Tract Cancer

1988. 105 figures, 122 tables. XVII, 301 pages. (Recent
Results in Cancer Research, Volume 110).
Hard cover DM 148,-. ISBN 3-540-18610-7

Pre-, peri- and postoperative chemo- and radiotherapy, both as adjuvant means or as treatment in advanced stages of cancer, are described for this cancer. The results obtained derive from EORTC-randomized trials and from state-of-the-art lectures by experts. Furthermore, new preclinical and experimental approaches for certain types of cancer (liver, gastric and carcinoid) are reported and adjunctive measures, such as hyperalimentation, hyperthermia and intraoperative radiotherapy, are discussed.

F. R. Vicary, London (Ed.)

Computers in Gastroenterology

1988. 37 figures. XVI, 224 pages. Hard cover DM 140,-.
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