# 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 $H_2$-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 weeks[4] 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.

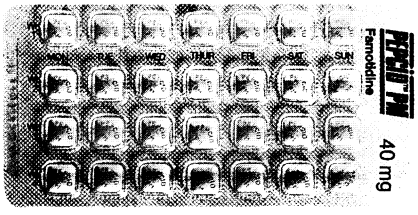
▼ Special reporting to the CSM required.

Issued January 1988.

TM denotes trademark


**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.



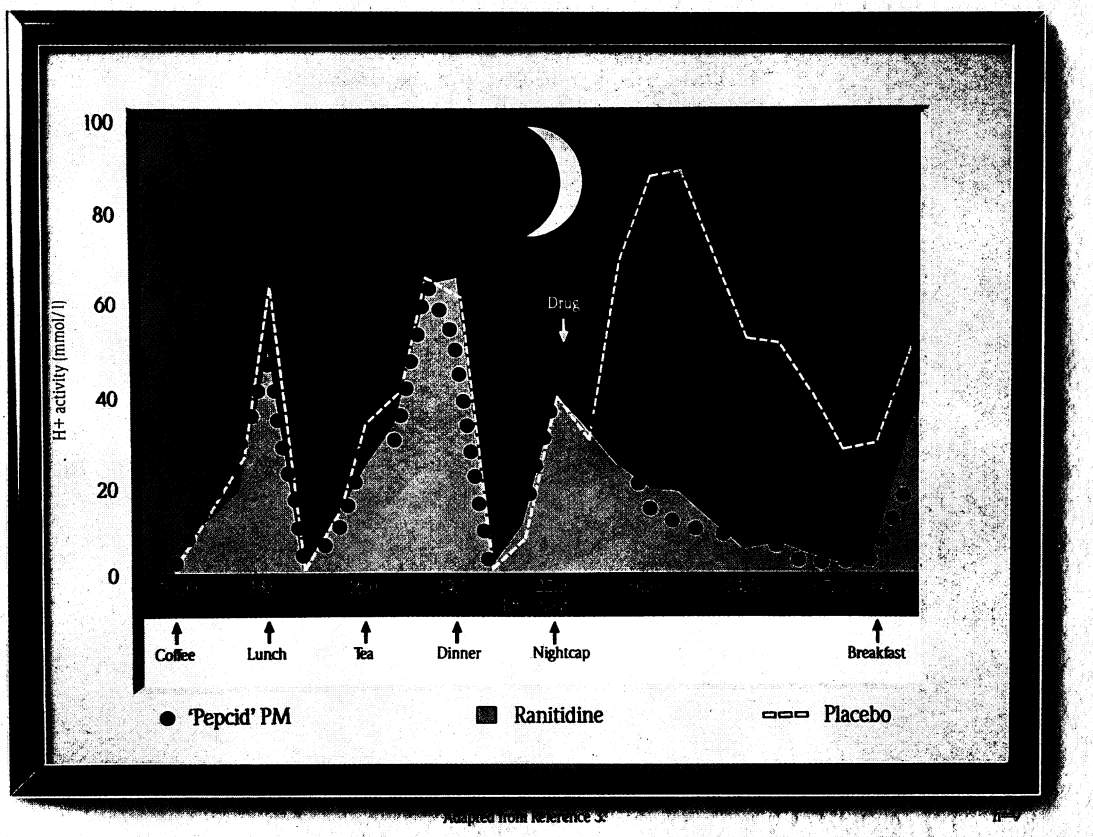
Thomas Morson Pharmaceuticals
Hertford Road, Hoddesdon, Hertfordshire
Division of Merck Sharp & Dohme Limited



11-88 PCD.87.GB.1763.J

# FOR ONCE-NIGHTLY USE

## NIGHT-TIME COVER FROM A SINGLE DOSE[3]



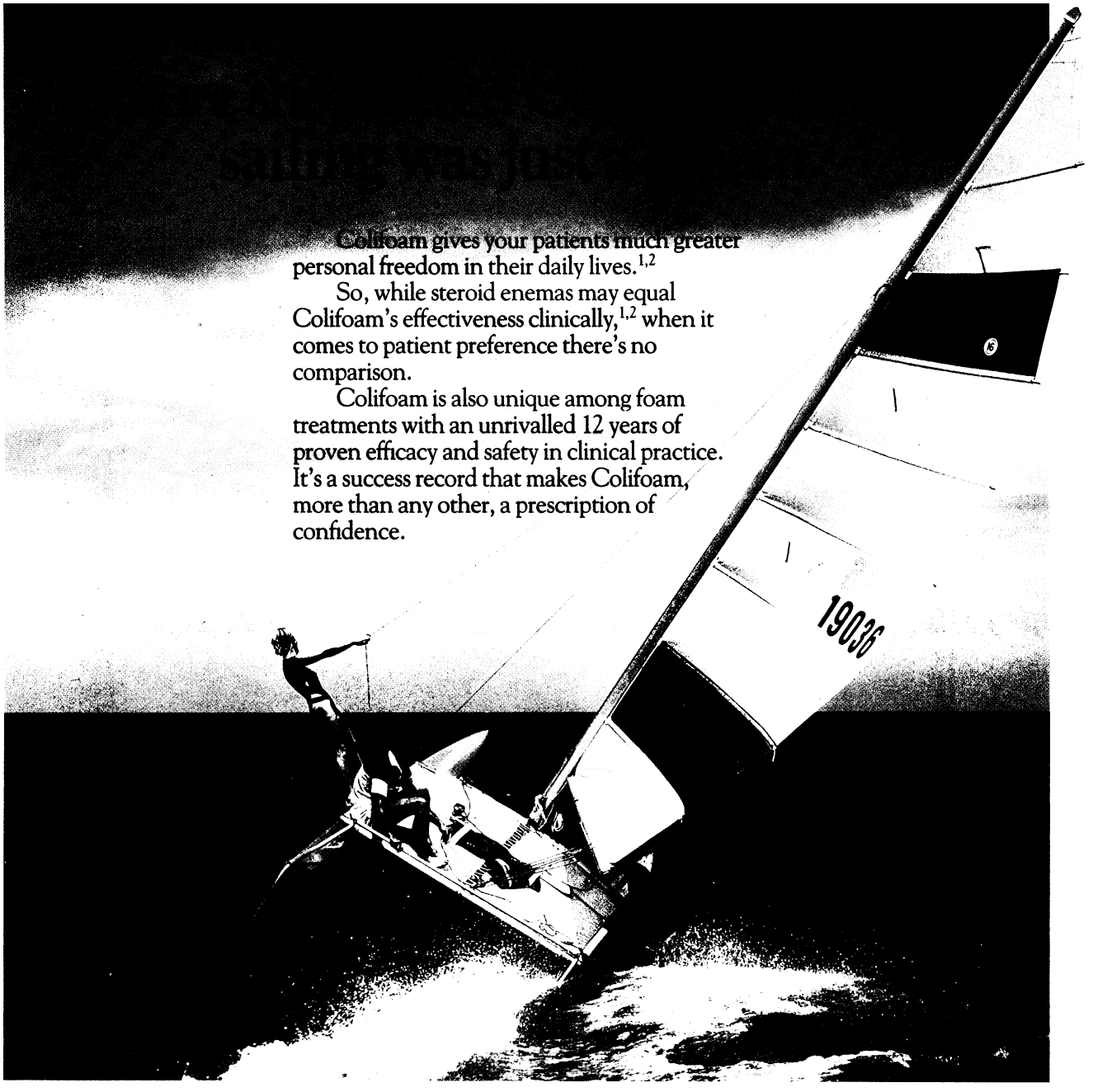

Adapted from reference 3.

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

**PEPCID™ PM**

**40mg (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.

# HELP THE ULCERATIVE COLITIS PATIENT TO GET ON WITH LIFE WITHOUT INTERRUPTIONS

'Asacol' maintains remission in ulcerative colitis patients intolerant of sulphasalazine without side effects associated with sulphapyridine (the sulphonamide component of sulphasalazine).[1,2]

*Mesalazine is the British approved name of 5-aminosalicylic acid.

**ASACOL**

**Mesalazine* (5-aminosalicylic acid)**

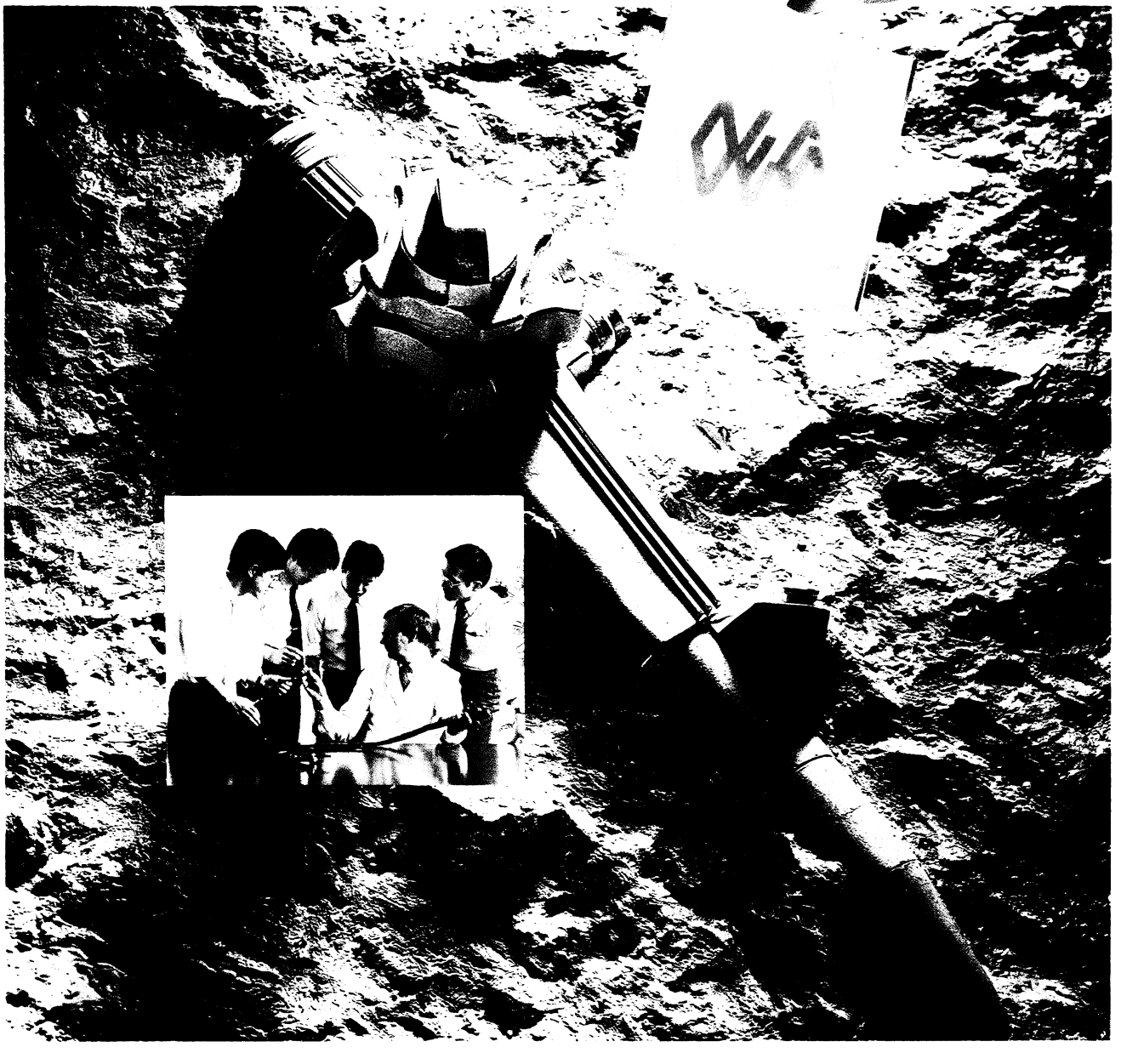
**Prescribing information: Presentation:** Red tablets containing 400 mg of mesalazine (5-aminosalicylic acid) coated for release in the terminal ileum and colon. **Uses:** For the maintenance of remission of ulcerative colitis in patients who cannot tolerate sulphasalazine. **Dosage and administration:** *Adults:* 3 to 6 tablets daily in divided doses. There is no dose recommendation for children. **Contra-indications, warnings, etc: Contra-indications:** A history of sensitivity to salicylates. Children under 2 years of age. **Precautions:** Renal disorder. Mesalazine is excreted rapidly by the kidney, mainly as its metabolite N-acetyl 5-aminosalicylic acid. In rats large doses of mesalazine injected intravenously produce tubular and glomerular toxicity. Although no renal toxicity has been reported in patients taking 'Asacol,' it is not recommended in patients with renal impairment and caution should be exercised in patients with a raised blood urea or proteinuria. 'Asacol' should not be given with lactulose or similar preparations which lower stool pH and may prevent release of mesalazine. **Use during pregnancy:** Use of 'Asacol' during pregnancy should be with caution, and only if, in the opinion of the physician, the potential benefits of treatment are generally greater than the possible hazards. **Adverse reactions:** Adverse reactions occur in a small proportion of patients who previously could not tolerate sulphasalazine. The side effects are predominantly gastrointestinal (nausea, diarrhoea and abdominal pain) and headache. 'Asacol' may be associated with the exacerbation of the symptoms of colitis in those patients who have previously had such problems with sulphasalazine. Other side effects observed with sulphasalazine, such as depression of bone marrow and of sperm count and function, have not been reported with 'Asacol.' **Legal category:** POM. **PL:** 0002/0173. **Daily treatment cost:** 66p–£1·31. 7.4.87. **References:** 1. Riley SA *et al.* Gastroenterology. In press (1988). 2. Peppercorn MA. J Clin Pharmacol 1987;27:260-5.

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

ASC:AD0008

# Olympus Endoscopy System

# THE GOLD



# – an evolution in endoscopy

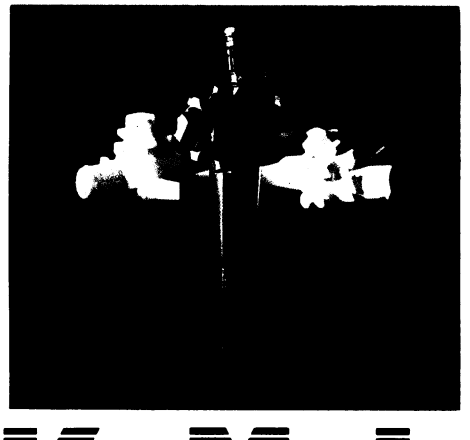
# STANDARD

The evolution of the Olympus Endoscopy System (OES) 10 series has resulted in a new range — OES-20 — destined to become the 'Gold Standard' in endoscopy.

OES-20 is the culmination of a four year development programme, resulting in instruments which represent a significant advance in fiberscope technology.

High resolution optics, lighter in weight, improved durability, outstanding handling and insertion characteristics are just some of the exciting features offered by the unique OES-20 range of fiberscopes.

The Olympus Endoscopy System — OES-20.



KeyMed

**Specialised Services to Medicine**

KeyMed (Medical & Industrial Equipment) Ltd.
KeyMed House, Stock Road, Southend-on-Sea, Essex SS2 5QH.
Telex: 995283, Facsimile: (0702) 65677, Telephone: (0702) 616333 (24 lines).

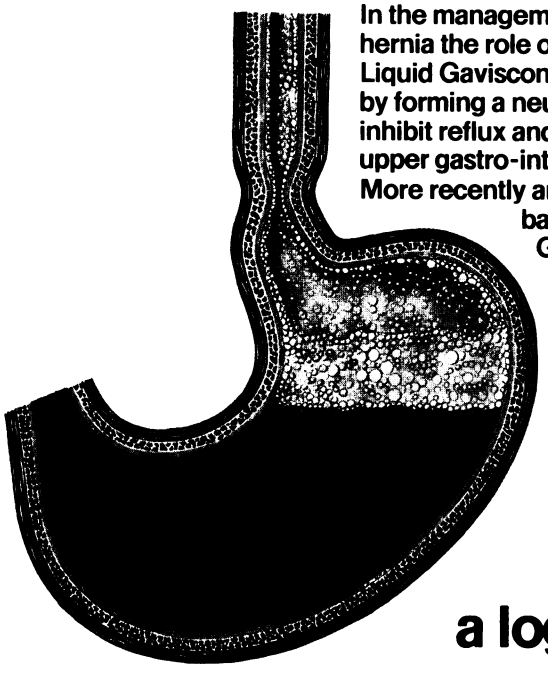
**Scotland:** KeyMed, Peel House, Ladywell East, Livingston EH54 6AH. Telephone: (0506) 416655

**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

# The Gold Standard – Seeing is believing

# STRENGTH AGAINST REFLUX[1]



**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 comparison[1] 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.

# Why more and more Surgeons are selecting Coated VICRYL*.


ETHICON

a Johnson & Johnson company

ETHICON Ltd., P.O. Box 408, Bankhead Avenue, Edinburgh EH11 4HE, United Kingdom.

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**TECHNICAL DATA**

# COATED VICRYL* (POLYGLACTIN 910) STERILISED BRAIDED SYNTHETIC ABSORBABLE SUTURE

**Presentation** The basic VICRYL (Polyglactin 910) Suture is prepared from a copolymer of glycolide and lactide. The substances are derived respectively from glycolic and lactic acids. The empirical formula of the copolymer is $(C_2H_2O_2)m(C_3H_4O_2)n$.

Coated VICRYL (Polyglactin 910) Sutures are obtained by coating the braided suture material with a mixture composed of a copolymer of glycolide and lactide and an equal amount of calcium stearate. This coating does not affect the biological properties of the suture.

Coated VICRYL (Polyglactin 910) Sutures are coloured by adding D & C Violet No 2 during polymerisation of the lactide and glycolide. Sutures may also be manufactured in the undyed form.

These sutures are relatively inert, nonantigenic, nonpyrogenic and elicit only a mild tissue reaction during absorption.

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

Subcutaneous tissue implantation studies of Coated VICRYL Suture in rats show at two weeks post-implantation approximately 55% of its original tensile strength remains, while at three weeks approximately 20% of its original strength is retained.

Intramuscular implantation studies in rats show that the absorption of these sutures is minimal until about the 40th post-implantation day. Absorption is essentially complete between the 60th and 90th days.

**Uses** Coated VICRYL synthetic absorbable sutures are intended for use where an absorbable suture or ligature is indicated.

**Dosage and Administration**
By implantation.

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

Sutures placed in skin and conjunctiva may cause localised irritation if left in place for longer than 7 days and should be removed as indicated.

At the discretion of the surgeon, appropriate non-absorbable sutures may be used to provide additional wound support when Coated VICRYL sutures are used in ophthalmic procedures.

The safety and effectiveness of Coated VICRYL (Polyglactin 910) Sutures in neural tissue and in cardiovascular tissue have not been established.

**Pharmaceutical Precautions**
Do not re-sterilise.

**Legal Category.**
Not applicable.

**Package Quantities** Various lengths of material packaged in sealed aluminium foil sachets. This primary pack is contained in a peel-apart secondary pack. The unit of sale is 12 packs contained in a film wrapped drawer style carton.

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

Product Licence No 0508/0009
Br. Pat. No. 1583390

*Date of Preparation of Data Sheet April 1981.*
*Revised 11/1987.*

**ETHICON LTD.**
**PO BOX 408, BANKHEAD AVE**
**EDINBURGH EH11 4HE**

*Trademark

# VIDEO IMAGE

# Spoilt for

1

The Olympus Electronic Video Information System (EVIS) uses the latest technology to transmit high-resolution electronic images direct from the distal tip to the monitor screen – a new era in endoscopy. A complete and practical system, EVIS also incorporates all the features associated with the Olympus Endoscopy System, including all-channel access and total immersibility.

OLYMPUS EVIS

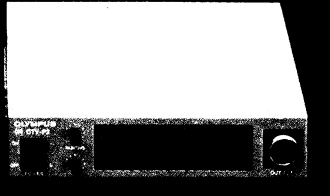
# In the lead with OLYMPUS

# ENDOSCOPY

# choice

2

A small, compact CCD camera for large, bright, high-resolution images, incorporating a zoom facility for close-up views.
Totally immersible, the OTV-F2 has an integral beamsplitter/fiberscope adaptor and remote control switches, allowing easy operation of a video tape recorder or hard-copy photographic system.
Designed for use with all Olympus Endoscopy System (OES) fiberscopes and standard light sources, offering the best possible versatility.





OLYMPUS OTV-F2 & OES FIBERSCOPES

# innovation and choice

KeyMed

**Specialised Services to Medicine**

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KeyMed House, Stock Road, Southend-on-Sea, Essex SS2 5QH.
Telex: 995283, Facsimile: (0702) 65677, Telephone: (0702) 616333 (24 lines).

**Scotland:** KeyMed, Peel House, Ladywell East, Livingston EH54 6AH. Telephone: (0506) 416655

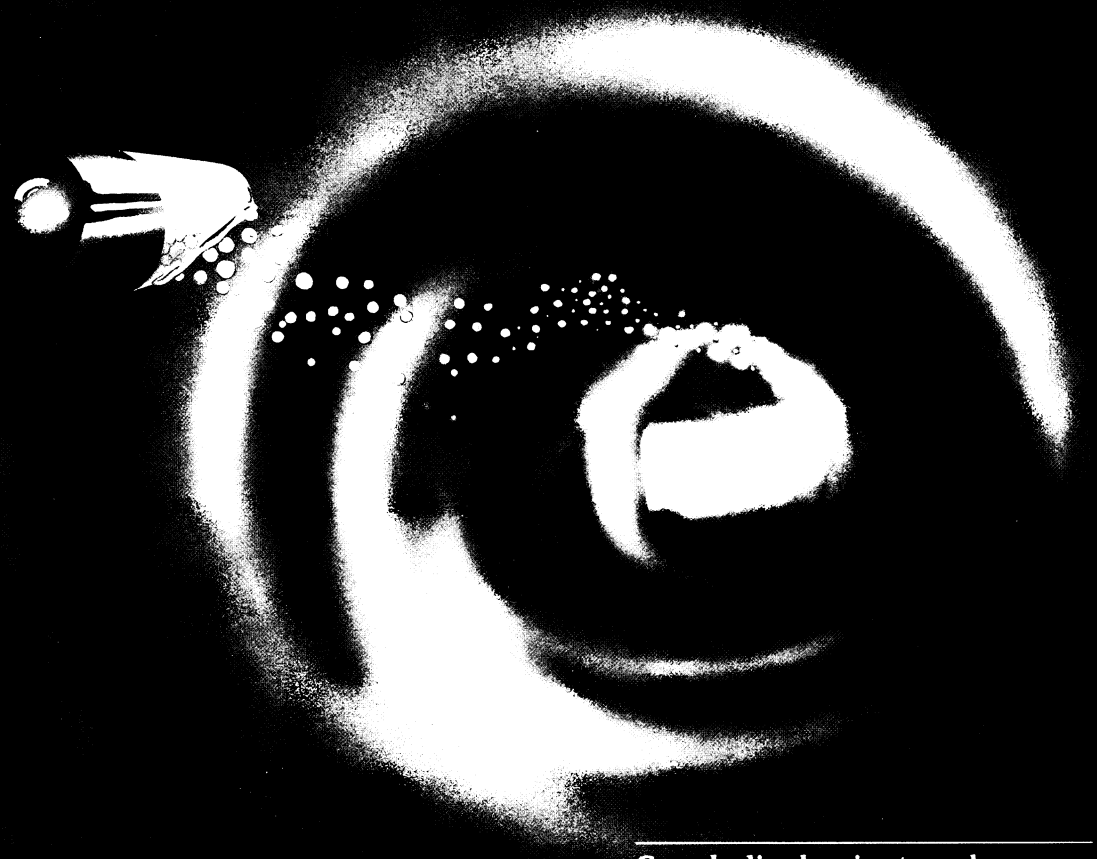
**Ireland:** KeyMed Ireland Ltd., KeyMed House, Lord Edward Court, Bride Street, Dublin 8. Telephone: 774855

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

REGISTERED MANUFACTURER · DHSS ·

**Medical Equipment**

# 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.

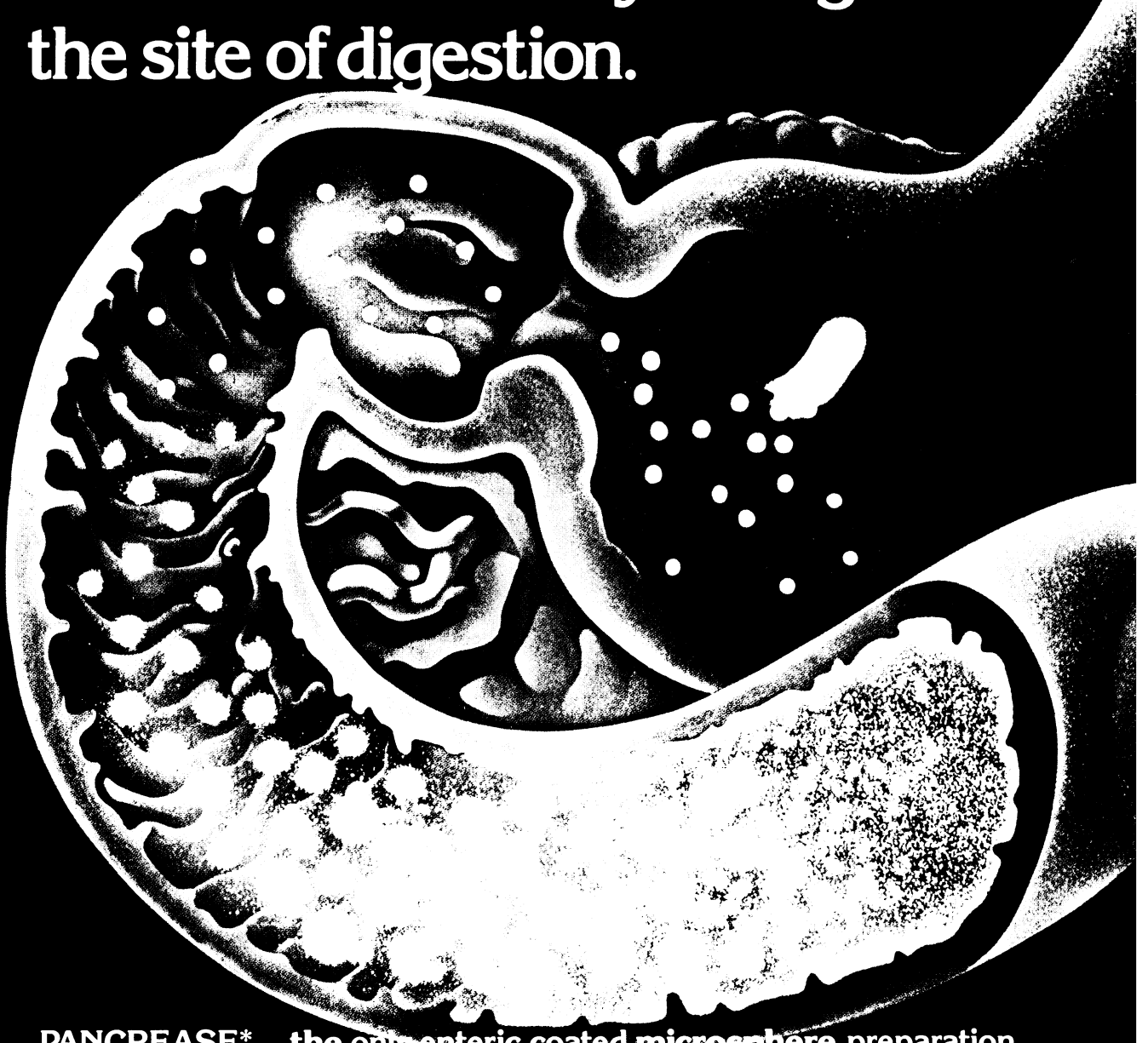
duphar

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

# PANCREASE* Capsules deliver

PANCREATIN BP

# the full dose of enzyme right to the site of digestion.



## PANCREASE* – the only enteric coated microsphere preparation.

- Protected from gastric inactivation
- Improves nutritional status
- Effective in Cystic Fibrosis and Chronic Pancreatic Insufficiency.

**PRESCRIBING INFORMATION – PANCREASE* Capsules**

**Presentation:** Hard white gelatin capsules containing enteric coated beads of pancreatin BP. Each capsule has a protease activity of not less than 330 BP Units and amylase activity of not less than 2,900 BP Units and lipase activity of not less than 5,000 BP Units. **Uses:** Exocrine pancreatic enzyme deficiency. **Dosage and administration:** For adults and children 1 or 2 capsules during each meal and one capsule with snacks. To protect the enteric coating the beads should not be crushed or chewed. **Contra-indications, warnings, etc.** Hypersensitivity to pork protein. The safety of Pancrease* during pregnancy has not yet been established. Such use is not recommended. The most frequently reported adverse reactions to Pancrease* Capsules are gastrointestinal in nature. Contact of the beads with food having a pH higher than 5.5 can dissolve the protective enteric shell. **Pharmaceutical precautions:** Keep bottle tightly closed. Store at room temperature in a dry place. Do not refrigerate. **Legal category:** P. **Package Quantities:** Containers of 100 capsules. **Basic NHS Cost:** £15.98 (for 100 capsules). **Product Licence Number:** PL 76/129.

ORTHO Cilag

Further information available from:
Ortho Cilag Pharmaceutical Ltd.,
P.O. Box 79, Saunderton,
High Wycombe, Bucks. HP14 4HJ

# 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.

# PERCUTANEOUS GALL BLADDER SURGERY AND RADIOLOGY

## THE NEW ONE-STAGE TECHNIQUE

**Monday, 17 October 1988**

**London, England**

B D i conferences

### WELCOME . . .

A new one-stage technique to remove gall stones percutaneously has been developed from experience with percutaneous nephrolithotomy. This **INTENSIVE ONE DAY COURSE** will summarise recent endoscopic and radiological developments with **LIVE** closed circuit **TELEVISION DEMONSTRATIONS** of percutaneous endoscopic gall stone extraction.

### MEETING STRUCTURE

Lectures – Live television demonstrations – Panel discussions – Trade exhibition

### ORGANISING COMMITTEE

***C Hudd** FRCS*
***M J Kellett** MA FRCR*
***R C G Russell** MS FRCS*
***J E A Wickham** MS FRCS*

### SPEAKERS TO INCLUDE

***R Mason** FRCS DMRD*
***C Mallinson** FRCP*
***W Lees** MD FRCR*
***E Van Sonnenberg** MD*
***and Members of the Organising Committee***

### GENERAL INFORMATION

**VENUE**

*The Kensington Close Hotel,* Wrights Lane, London W8 5SP, England

*Telephone:* 01-937 8121

**TRAVEL AND ACCOMMODATION**

A limited number of rooms have been reserved at *The Kensington Close Hotel.* If you are interested in these or wish to have details on special air fares please complete the appropriate section on the registration form.

**MIXING MEDICINE WITH DINNER AT THE SCIENCE MUSEUM**

We have arranged a delightful reception to take place shortly after the course ends on the evening of October 17th. We shall be dining at the famous Science Museum which has one of the finest and most unusual medical collections in the world and is situated within walking distance of the Kensington Close Hotel.

**METHOD OF PAYMENT**

Cheques in sterling drawn on an English bank and made payable to *BDI Conferences Ltd.* or by credit card. We accept Access, Visa and American Express cards.

**CANCELLATION REMITTANCES**

Before September 17th – 70%
After September 18th – 25%

**SECRETARIAT**

Pauline Sleight, *BDI Conferences Ltd.,* 9-11 Kensington High Street, London W8 5NP, England

*Telephone:* 01-938 2151
*Telex:* 268828

Please return this form to:
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### REGISTRATION FORM

**PERCUTANEOUS GALL BLADDER SURGERY AND RADIOLOGY**

Name *Prof/Dr/Mr/Mrs*_____

Full mailing address_____

_____

_____

Telephone_____

Registration fee (excl VAT) **£118.20** _____

+ VAT at 15% **£17.80** _____

**Evening Social Programme 17th October**

I shall be attending the buffet supper at The Science Museum (7.00pm) **£15 per person*** ☐ _____

Total payable_____

I enclose a cheque* ☐ _____

**PAYMENT BY CREDIT CARD**

Access ☐ Visa ☐ American Express ☐

Credit Card Number

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I authorise *BDI Conferences Ltd.* to charge my Access/Visa/ American Express card.

Signature_____

**ACCOMMODATION AND TRAVEL ARRANGEMENTS**

Please send me details of accommodation at The Kensington Close Hotel* ☐

Please send me details of/organise my travel arrangements to and from London* ☐

My requirements are as follows *(please specify)*

_____

_____

**Please tick boxes as appropriate*

**THERE ARE ONLY A VERY LIMITED NUMBER OF PLACES ON THIS COURSE SO PLEASE REGISTER IMMEDIATELY**

# ABBREVIATED PRESCRIBING INFORMATION

**Presentation:** Yellow elliptical convex film-coated tablets, containing 0.5g sulphasalazine (USP) with Pharmacia logo on one side. **Uses:** 1. Induction and maintenance of remission of Ulcerative Colitis. 2. The treatment of active Crohn's disease. **Dosage and Administration:** Salazopyrin EN-tabs should not be broken or crushed. **A.** ULCERATIVE COLITIS *Adults Severe:* 2-4 tablets four times a day given in conjunction with steroids as part of an intensive management regime. The night-time interval between doses should not exceed eight hours. In severe disease rapid passage of the tablets may reduce the effect of the drug. *Mild-moderate:* 2-4 tablets four times a day given in conjunction with steroids. Maintenance: With induction of remission reduce the dose gradually to four tablets per day in divided doses. This dosage should be continued indefinitely, since discontinuance even several years after an acute attack has been shown to be associated with a four fold increase in the risk of relapse. *Children:* The dose is reduced in proportion to body weight. *Severe:* 40-60mg/kg per day. *Mild-Moderate:* 40-60mg/kg per day. *Maintenance:* 20-30mg/kg per day. **B.** CROHN'S DISEASE In active Crohn's disease Salazopyrin EN-tabs should be administered as for severe ulcerative colitis. **Contra-indications:** Sensitivity to sulphonamides and salicylates. Infants under 2 years of age. **Precautions:** Blood checks and LFTs should be carried out monthly for 3 months. Care in renal or hepatic disease, in glucose-6-phosphate dehydrogenase deficiency and porphyria. **Adverse Effects:** The most commonly encountered reactions are nausea, headache, rash, loss of appetite and raised temperature. The following adverse reactions have been reported: *Haematological:* Heinz body anaemia, methaemoglobinaemia, hypoprothrombinaemia, haemolytic anaemia, leucopenia, agranulocytosis, aplastic anaemia, megaloblastic anaemia, thrombocytopenia. *Hypersensitivity reactions:* Generalised skin eruptions, Stevens-Johnson syndrome, exfoliative dermatitis, epidermal necrolysis, pruritus, urticaria, photosensitisation, anaphylaxis, serum sickness, drug fever, periorbital oedema, conjunctival and scleral injection, arthralgia, allergic myocarditis, polyarteritis nodosa, LE-phenomenon and lung complications with dyspnoea, fever, cough, eosinophilia, fibrosing alveolitis. *Gastro-intestinal reactions:* Stomatitis, parotitis, pancreatitis, hepatitis. *CNS reactions:* Vertigo, tinnitus, peripheral neuropathy, ataxia, convulsions, insomnia, mental depression and hallucinations. *Fertility:* Oligospermia reversible on discontinuance of drug. *Renal reactions:* Crystalluria, haematuria, proteinuria and nephrotic syndrome. **Pregnancy and Lactation:** Long term clinical usage and experimental studies have failed to reveal any teratogenic or icteric hazards. Amounts of drug in milk should not present a risk to a healthy infant. **Basic NHS Cost:** EN-tabs 125 £12.75. **Legal Status:** POM. **Product Licence Number:** PL 0009/5007R. Issued June 1988.

Pharmacia

**Further information available from:**
Pharmacia Ltd., Pharmacia House,
Midsummer Boulevard,
Milton Keynes. MK9 3HP.

Salazopyrin and EN-tabs are trade marks.

037/-7/-88.

# IF ANYONE TELLS YOU MOST PATIENTS NEED A MORE EXPENSIVE TREATMENT FOR ULCERATIVE COLITIS SHOULD YOU BELIEVE THEM?

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**EN-tabs**
**enteric coated sulphasalazine**

REMEMBER. TWO TABLETS b.d. ONLY COSTS 41p A DAY.

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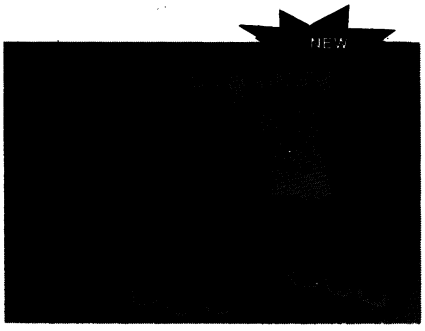


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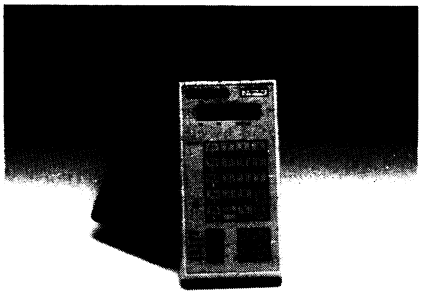

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