You don't have to go this far to treat acid reflux effectively

Zantac 300

RANITIDINE

The sooner the better

PRESCRIBING INFORMATION: INDICATIONS: DUODENAL ULCER, BENIGN GASTRIC ULCER, ULCERS ASSOCIATED WITH NON-STEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDs), REFLUX OESOPHAGITIS, CHRONIC EPISODIC DYSPEPSIA. **DOSAGE:** ADULTS: THE USUAL DOSAGE IS 150MG TWICE DAILY IN THE MORNING AND EVENING. ALTERNATIVELY, PATIENTS WITH DUODENAL ULCERATION, GASTRIC ULCERATION OR REFLUX OESOPHAGITIS MAY BE TREATED WITH A SINGLE BEDTIME DOSE OF 300MG. IN ULCERS FOLLOWING NON-STEROIDAL ANTI-INFLAMMATORY DRUG THERAPY, OR ASSOCIATED WITH CONTINUED NON-STEROIDAL ANTI-INFLAMMATORY DRUGS OR IN THE MANAGEMENT OF REFLUX OESOPHAGITIS UP TO EIGHT WEEKS' TREATMENT MAY BE NECESSARY. CHRONIC EPISODIC DYSPEPSIA: 150MG TWICE DAILY FOR SIX WEEKS; INVESTIGATE EARLY RELAPSERS AND NON-RESPONDERS. (SEE DATA SHEET FOR FULL DOSAGE INSTRUCTIONS.) **CONTRA-INDICATIONS:** PATIENTS WITH KNOWN HYPERSENSITIVITY TO RANITIDINE. **PRECAUTIONS:** EXCLUDE THE POSSIBILITY OF MALIGNANCY IN GASTRIC ULCER BEFORE INSTITUTING THERAPY, ESPECIALLY IN MIDDLE-AGED PATIENTS WITH RECENTLY CHANGED DYSPEPTIC SYMPTOMS. SUPERVISION OF PATIENTS WITH PEPTIC ULCERS AND ON NSAID THERAPY IS RECOMMENDED ESPECIALLY IF ELDERLY. REDUCE DOSAGE IN THE PRESENCE OF SEVERE RENAL FAILURE (SEE DATA SHEET). LIKE OTHER DRUGS, USE DURING PREGNANCY AND LACTATION ONLY IF STRICTLY NECESSARY. **SIDE EFFECTS:** HEADACHE, DIZZINESS, SKIN RASH, OCCASIONAL HEPATITIS. RARELY, REVERSIBLE MENTAL CONFUSION STATES, USUALLY IN VERY ILL OR ELDERLY PATIENTS. RARE CASES OF LEUCOPENIA AND THROMBOCYTOPENIA, USUALLY REVERSIBLE, AGRANULOCYTOSIS AND PANCYTOPENIA. HYPERSENSITIVITY REACTIONS, ANAPHYLACTIC SHOCK. RARE CASES OF BREAST SYMPTOMS IN MEN. AS WITH OTHER H_2-RECEPTOR ANTAGONISTS RARE CASES OF BRADYCARDIA AND A-V BLOCK (SEE DATA SHEET). **PRESENTATIONS:** ZANTAC 150 TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0279, 60 TABLETS £29·76); ZANTAC 300 TABLETS EACH CONTAINING 300MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0302, 30 TABLETS £27·43); ZANTAC DISPERSIBLE TABLETS EACH CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0298, 60 TABLETS £31·25); ZANTAC SYRUP EACH 10ML DOSE CONTAINING 150MG RANITIDINE (PRODUCT LICENCE NUMBER 0004/0310, 300ML BOTTLE £22·32). **PRODUCT LICENCE HOLDER:** GLAXO OPERATIONS U.K. LIMITED, GREENFORD, MIDDLESEX UB6 OHE.

ZANTAC IS A GLAXO TRADE MARK

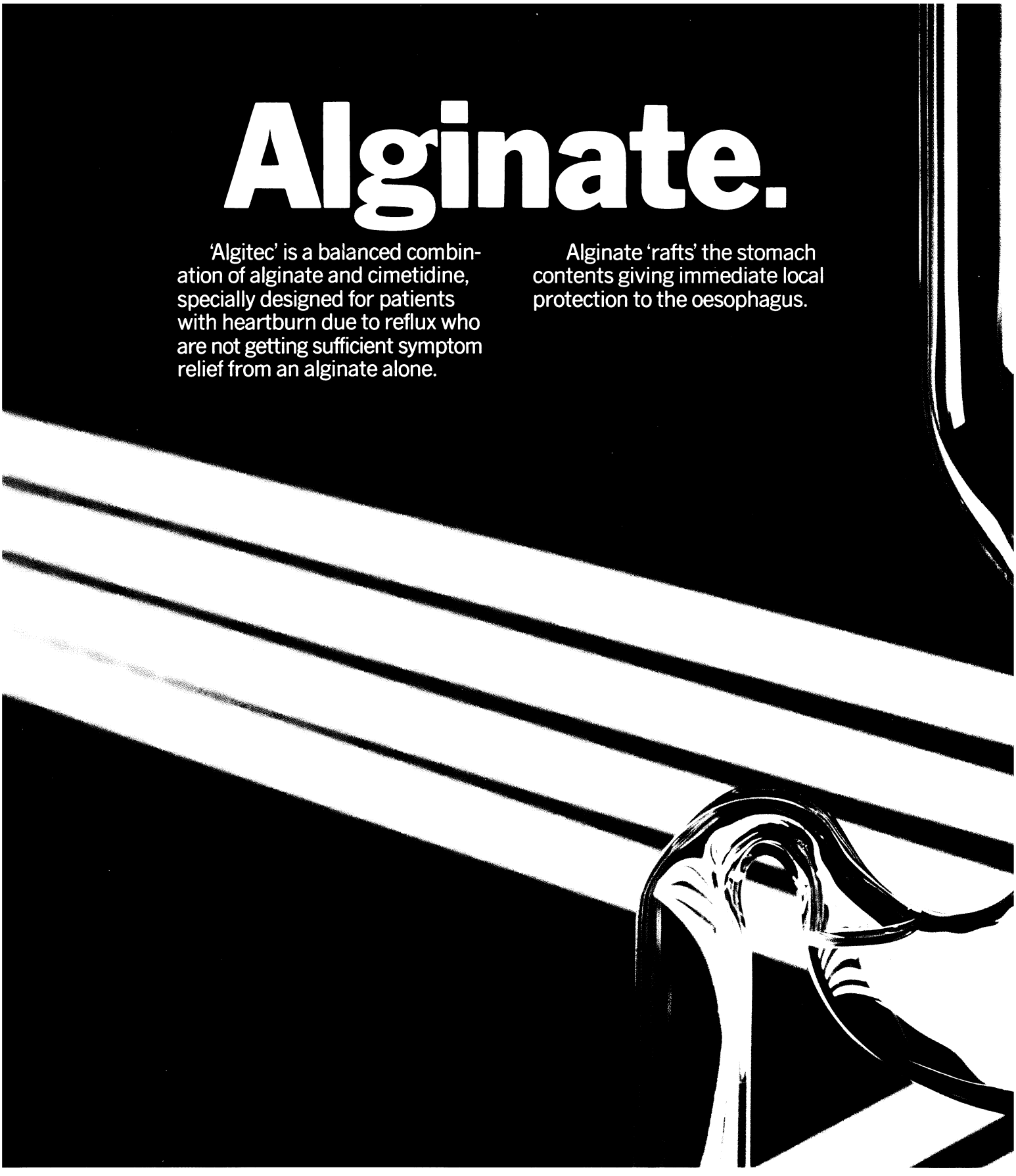
FURTHER INFORMATION IS AVAILABLE ON REQUEST FROM:
GLAXO LABORATORIES LIMITED
GREENFORD, MIDDLESEX UB6 0HE
TEL: 01-422 3434

Glaxo

Alginate.

'Algitec' is a balanced combination of alginate and cimetidine, specially designed for patients with heartburn due to reflux who are not getting sufficient symptom relief from an alginate alone.

Alginate 'rafts' the stomach contents giving immediate local protection to the oesophagus.



Reference: 1. Lennox B, Snell C, Lamb Y. Br J Clin Pract 1988;42:503-5.

Prescribing information. Presentation 'Algitec' Suspension, PL 0002/0176, containing 500 mg sodium alginate BPC and 200 mg cimetidine in 10 ml. 600 ml, £17.25. 'Algitec' Tablets, PL 0002/0149, each containing 500 mg alginic acid BPC and 200 mg cimetidine. 120 (6 tubes of 20 'Chewtab' tablets) £29.85. **Uses** Treatment of gastro-oesophageal reflux disease. **Dosage and administration** *Adults only:* 10 ml suspension or 1 tablet 4 times a day, after meals and at bedtime for 4 to 8 weeks. If response is inadequate increase to 20 ml suspension or 2 tablets 4 times a day. Chew tablets thoroughly and follow by a drink of water. **Contra-indication** Hypersensitivity to cimetidine. **Precautions** Not recommended where renal function impaired. 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. Gynaecomastia, occasional reversible liver damage, confusional states (usually in the elderly or very ill). Very rarely interstitial nephritis, acute pancreatitis, thrombocytopenia, agranulocytosis, headache, myalgia, arthralgia, sinus bradycardia, tachycardia, heart block, aplastic anaemia; very rare reports of alopecia, reversible impotence but no causal relationship established at usual therapeutic doses. **Legal category** POM. 31.8.89.

Smith Kline & French Laboratories Limited
Welwyn Garden City, Hertfordshire AL7 1EY

SK&F

AT:AD0899

Plus.

Cimetidine systemically controls gastric acid secretion providing continued protection from acid reflux.

This combination has been shown to be superior to a commonly prescribed alginate in the relief of heartburn due to reflux[1]

So, for those patients who need more than an alginate try an alginate plus — 'Algitec.'

In heartburn due to reflux...

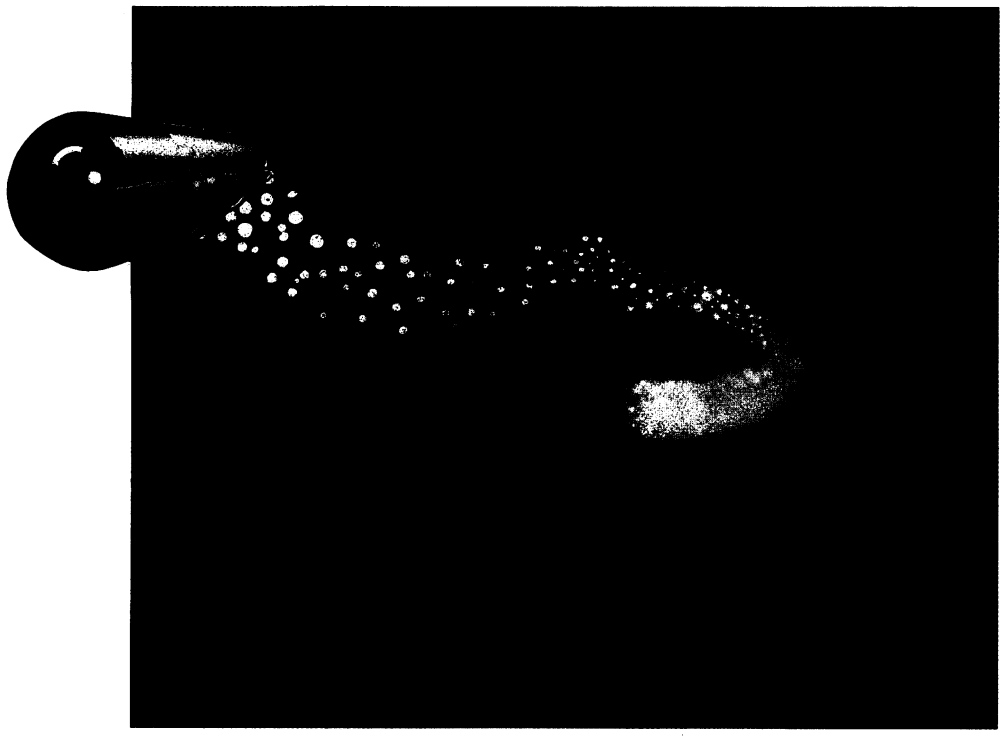
...when an alginate is not enough

Algitec

alginic acid BPC or
sodium alginate BPC
cimetidine

PROGRESS

In The Control Of Pancreatic Insufficiency



creon®
pancreatin

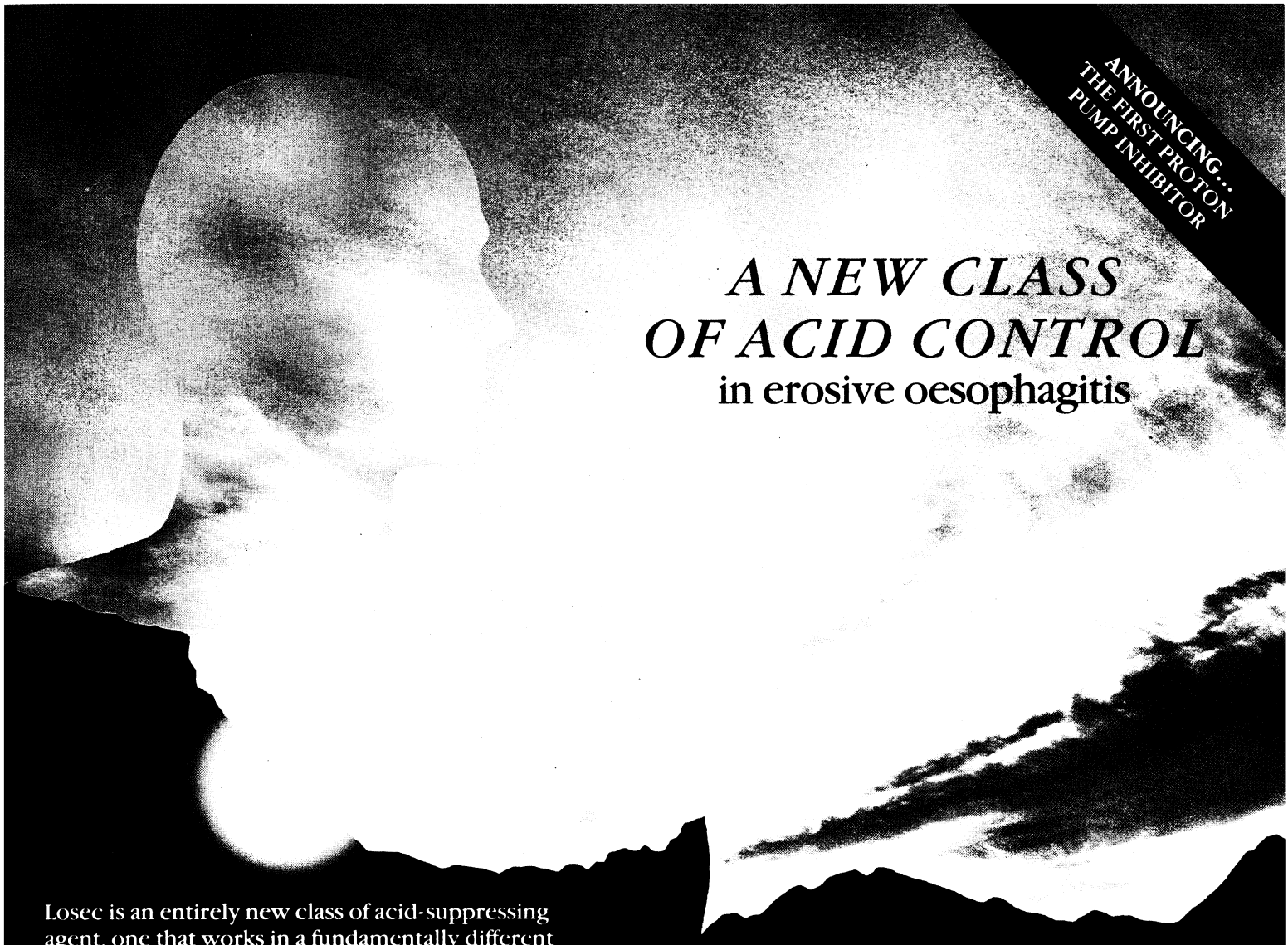
RIGHT ON TARGET – RIGHT FROM THE START

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 NHS 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 can 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 Limited, Gaters Hill, West End, Southampton SO3 3JD. Tel: 0703 472281.

CRAd/PEI/1/89



ANNOUNCING... THE FIRST PROTON PUMP INHIBITOR

A NEW CLASS OF ACID CONTROL

in erosive oesophagitis

Losec is an entirely new class of acid-suppressing agent, one that works in a fundamentally different way from current therapies.

For example, H_2-antagonists can only inhibit one type of receptor responsible for acid secretion, still leaving others available for stimulation.[1]

Losec, the first proton pump inhibitor, acts on the final step of acid production and therefore controls intragastric acidity irrespective of stimulus.[1]

Clinical studies have consistently shown that once daily Losec is highly effective in the healing of erosive oesophagitis.[2-8]

In just 4 weeks Losec can heal about 30% more patients than conventional doses of ranitidine or cimetidine, also achieving more rapid and effective symptom relief.[2-4]

ONCE DAILY

▽

omeprazole-Astra

A superior choice to H_2-antagonists[2-4]

*Conventional healing courses of ranitidine or cimetidine in erosive oesophagitis.(December 1989)

▼ **Abbreviated Prescribing Information.** **SPECIAL REPORTING TO CSM REQUIRED**
Presentation: Losec capsules containing 20mg omeprazole. **Indications:** Healing of erosive reflux oesophagitis. Symptom relief is rapid, and the majority of patients are healed after 4 weeks. Treatment of patients with benign peptic ulcers unresponsive to an adequate dose and duration of conventional therapy. Zollinger-Ellison syndrome. **Dosage and Administration:** Adults (including elderly). For erosive reflux oesophagitis the recommended dosage is 20mg Losec once daily, given for 4 weeks. For those patients not fully healed after the initial course, healing usually occurs during a further 4 weeks' treatment. Losec has also been used in a dose of 40mg once daily in patients with reflux oesophagitis refractory to other therapy. Healing usually occurred within 8 weeks. For duodenal ulcer the usual dose is 20mg Losec once daily for 4 weeks. For gastric ulcer the usual dose is 20mg Losec once daily for 8 weeks. In severe cases, the dose may be increased to 40mg Losec once daily. Long-term maintenance treatment with Losec is not recommended. *Zollinger-Ellison syndrome* The recommended initial dosage is 60mg Losec once daily. Adjust individually and continue as long as clinically indicated. Patients are usually effectively controlled on doses of 20-120mg daily. With doses above 80mg daily, the dose should be divided and given twice daily. *Children:* There is no experience of the use of Losec in children. *Impaired renal or hepatic function* Adjustment is not required. Patients with severe liver disease should not require more than 20mg Losec daily. **Contra-indications, Warnings, etc:** There are no known contra-indications to the use of Losec. When gastric ulcer is suspected, the possibility of malignancy should be excluded before treatment with Losec is instituted, as treatment may alleviate symptoms and delay diagnosis. Avoid in pregnancy unless there is no safer alternative. Breast feeding should be discontinued if the use of Losec is considered essential. Losec is well tolerated. Nausea, headache, diarrhoea, constipation and flatulence have been reported but are rare. Skin rashes have occurred in a few patients. These events have usually been mild and transient and there has been no consistent relationship with treatment. Losec can delay the elimination of diazepam, phenytoin and warfarin. Monitoring of patients receiving warfarin or phenytoin is recommended and a reduction of warfarin or phenytoin dose may be necessary when omeprazole is added to treatment. There is no evidence of an interaction with theophylline, propranolol or antacids. *Animal Toxicology:* Gastric ECL-cell hyperplasia and carcinoids, localised to the oxyntic mucosa, have been observed in life-long studies in rats. These changes have been related to sustained hypergastrinaemia. No treatment related mucosal changes have been observed in patients treated continuously for periods up to 4 years. **Pharmaceutical Precautions:** Use within one month of opening. Replace cap firmly after use. Dispense in original containers. **Legal Category:** POM **Package Quantities and Basic NHS Cost:** Bottles of 5 capsules, £6.49; Bottles of 28 capsules, £36.36. **Product Licence Number:** PL0017/0238 **Product Licence Holder:** Astra Pharmaceuticals Ltd., Home Park Estate, Kings Langley, Herts WD4 8DH.

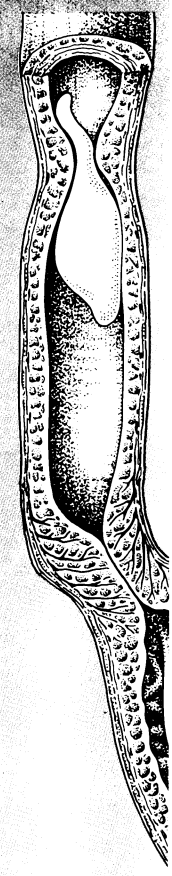
References
1. Wallmark B et al ISI Atlas of Science Pharmacology 1987; 1:158-61. 2. Sandmark S et al Scand J Gastroenterol 1988; ***23*** 625-32. 3. Zeitoun P et al Lancet 1987; ***11***: 621-2. 4. Bate C M et al Gut 1989; ***30***: A4193-4. 5. Hetzel D J et al Gastroenterology 1988; ***95*** 903-12. 6. Havelund T et al Brit Med J 1988; ***296*** 89-92. 7. Vantrappen G et al Dig Dis Sci 1988; ***33*** 523-9. 8. Lundell L et al Gastroenterology 1989; ***96*** (5 pt 2) A310.

ASTRA

For further information please contact
Astra Pharmaceuticals Ltd
Telephone: (09277) 66191

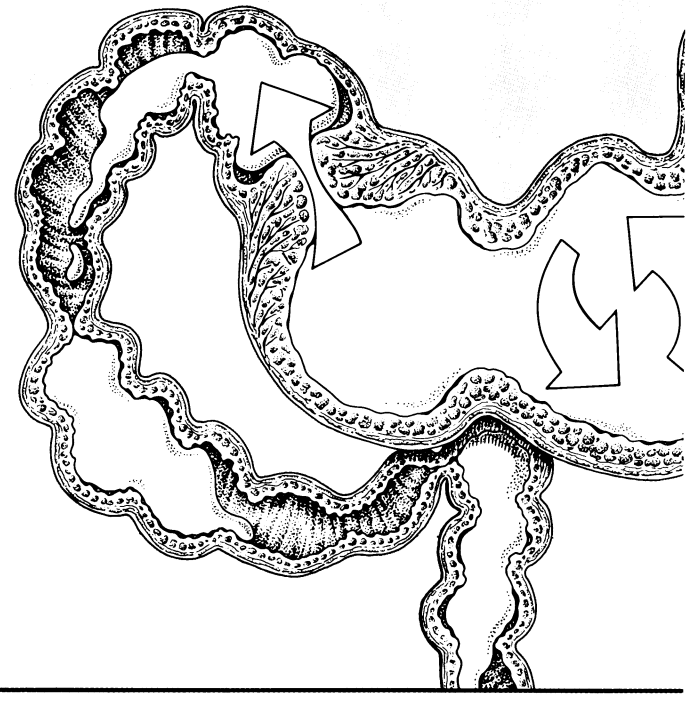
Losec is a registered trade mark

OESOPHAG

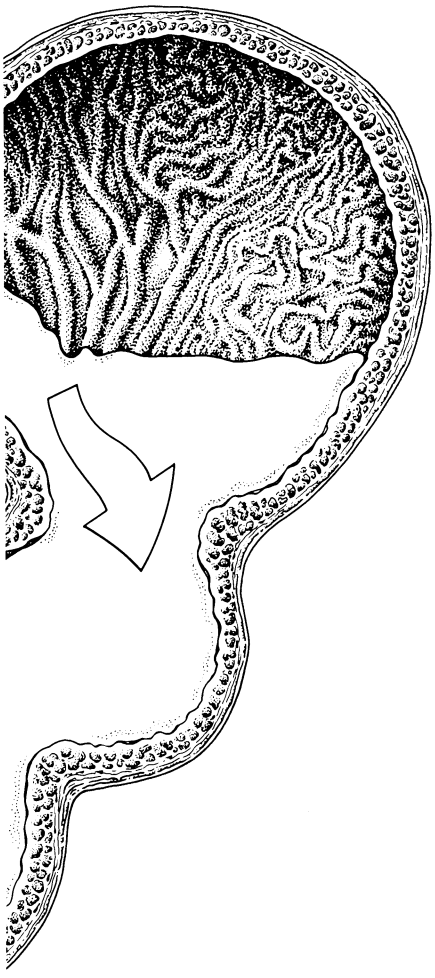


Current treatment strategy suggests that gastro-oesophageal reflux disease is caused by too much acid.

There is no evidence that increased gastric acid secretion is associated with this disorder.



PRESCRIBING INFORMATION. Presentation and Packaging: White, biconvex, scored tablets, engraved CIS/10 on one side and JANSSEN on the reverse in packs of 112. Each tablet contains 10 mg of cisapride. **Properties:** Prepulsid is the first of a new class of drug capable of correcting abnormal motility throughout the GI tract. **Indications:** GASTRO-OESOPHAGEAL REFLUX DISEASE. Treatment of the symptoms such as heartburn, regurgitation and healing of mucosal lesions. IMPAIRED GASTRIC EMPTYING. Relief of the symptoms such as epigastric pain, early satiety, anorexia, bloating and nausea associated with delayed gastric emptying secondary to systemic sclerosis and autonomic neuropathy of diabetes. **Dosage and administration:** ADULTS AND CHILDREN TWELVE YEARS AND OVER. **Gastro-oesophageal reflux:** 10 mg Prepulsid tds preferably 15 minutes before food. Night time symptoms can be treated with an extra 10 mg dose at bedtime. A 12 week course is recommended for healing oesophagitis. **Impaired gastric emptying:** 10 mg Prepulsid tds or qds. An initial course of 6 weeks is recommended but longer treatment may be required. **Use in Children:** Not recommended in children under 12. **Use in Elderly:** Dose as for adults, but monitor response. **Abnormal renal or liver function:** Initially the dose should be halved. **Contra-indications, warnings etc. Contra-indications:** Contra-indicated in pregnancy and in patients in whom gastro intestinal stimulation might be dangerous. eg gastrointestinal haemorrhage, mechanical obstruction or perforation. **Warnings:** It is not advisable to take Prepulsid whilst breastfeeding. **Drug interactions:** The absorption from the stomach of concomitantly administered drugs may be diminished,



Characteristically, patients with GORD have inappropriate relaxation of the lower oesophageal sphincter allowing gastric acid into the oesophagus.

Coupled with poor oesophageal clearing, this leads to prolonged acid-mucosal contact time — the important factor in heartburn and oesophagitis.

Prepulsid* is the first of a new class of GI prokinetic drug. It enhances lower oesophageal sphincter tone, improves oesophageal clearing and gastric emptying. Prepulsid* enables, for the first time, treatment of both the underlying condition and the disease.

Prepulsid* reduces the duration of reflux episodes — effectively treating heartburn and healing oesophagitis.

TRADEMARK

Prepulsid

(cisapride–Janssen)

SIMPLE. YET HIGHLY EFFECTIVE

whereas absorption of drugs from the small intestine may be accelerated. For drugs that require careful individual titration, such as anticonvulsants, it may be useful to measure their plasma concentrations. In patients receiving anticoagulants, the prothrombin time may be increased. Prepulsid does not effect psychomotor performance nor does it induce sedation or drowsiness. However, the sedative effects of benzodiazepines and alcohol may be accelerated when administered concomitantly with Prepulsid. The effects of Prepulsid are antagonized by anticholinergic drugs. **Side effects:** Abdominal cramps, borborygmi and loose stools (diarrhoea) are mainly mild and transient and rarely require discontinuation of treatment. Reports of headaches, lightheadedness and convulsions have been received infrequently. **Overdosage:** Treatment should include gastric lavage, close observation and general supportive measures. **Pharmaceutical Precautions:** Store at room temperature and protect from light. **Product Licence Number:** Prepulsid 10mg tablets. PL 0242/0136. **Basic NHS cost:** 112 tablets — £36.00. (correct at time of printing). Further information available from:—

JANSSEN
PHARMACEUTICAL LTD
Grove, Wantage, Oxon. OX12 0DQ

 JPL 221/89

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. Gastrointestinal 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 teratogenic 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

C/Hosp Ad/1/88

FAST WORKER

PEPCID® PM 40

(famotidine) mg

ONE AT NIGHT CAN MAKE THEIR DAY

Abridged Product Information

Refer to Data Sheet 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.

Issued December 1989

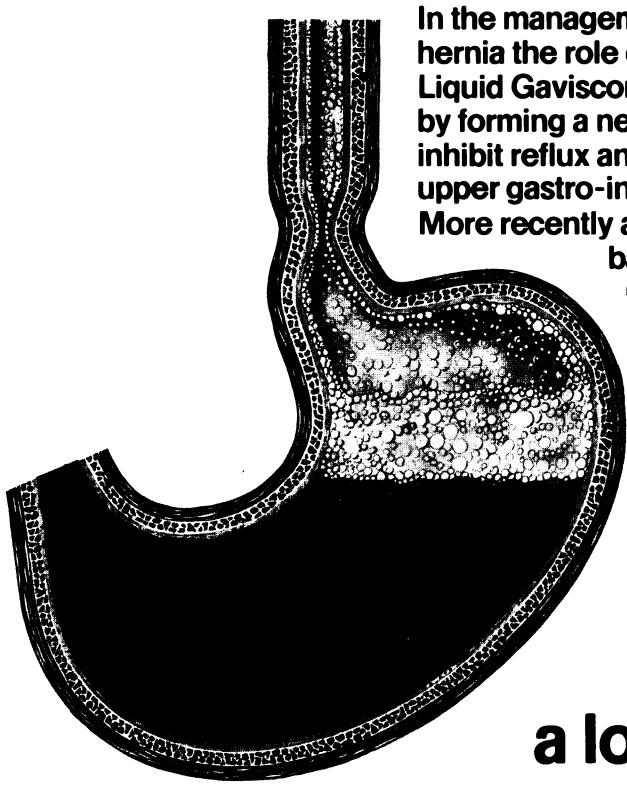
® denotes registered trademark of Merck & Co., Inc., Rahway, NJ, USA

Thomas Morson Pharmaceuticals
Division of Merck Sharp & Dohme Limited
Hertford Road, Hoddesdon, Herts., EN11 9BU

SPECIFICALLY DEVELOPED FOR THE SUPPRESSION OF NOCTURNAL ACID

08-90 PCD.89.GB.4393.J

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, Calcium Carbonate Ph.Eur. 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. Children under 12: 5-10ml liquid after meals and at bedtime. Infants: not recommended.

Note: 10ml liquid contains 6.2mmol sodium. **Basis NHS Cost:** As at Jan. 1989: 500ml liquid £2.88. **PL:** 44/0058. **Irish Price IR** £3.72. **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.

IT MAKES LIFE WORTH LIVING.

Effective control of ulcerative colitis is only half of Colifoam's success story. As thousands of patients previously managed with aqueous enemas have found, its simplicity and ease of retention has transformed their lives.

Colifoam causes little if any disturbance to their daily routine, and enables patients to enjoy their normal social and outdoor activities.[1]

Equally as effective as steroid enemas,[1,2] Colifoam is now established as the leading treatment for ulcerative colitis.[3] It is also unique among foam treatments with an unrivalled 12 years of proven efficacy and safety in clinical practice.

COLIFOAM
10% Hydrocortisone acetate foam.

The leading topical treatment for ulcerative colitis.

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. References 1. Somerville KW et al. British Medical Journal 1985; 291:866. 2. Ruddell WSJ et al. Gut 1980; 21:885-889. 3. Independent Research Audit. Data on File. Further information is available on request. Stafford-Miller Ltd., Professional Relations Division, Broadwater Road, Welwyn Garden City, Herts. AL7 3SP.

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 Pharmaceuticals. 2 Data on file, 1988, Reckitt & Colman Pharmaceuticals. 3. Data on file, 1987, Reckitt & Colman Pharmaceuticals. Fybogel is a trade mark. Further information is available from Reckitt & Colman Pharmaceuticals, Dansom Lane, Hull HU8 7DS.

CYTOTEC ▽
Abbreviated Prescribing Information
Presentation: Tablet containing misoprostol 200 micrograms.
Uses: Healing of duodenal and gastric ulcer induced by non-steroidal anti-inflammatory drugs (NSAID) in arthritic patients at risk, whilst continuing NSAID therapy. Prophylaxis of NSAID-induced ulcers. Healing of duodenal and gastric ulcer.
Dosage: Adults including the elderly. Healing of duodenal and gastric ulcer: 800 micrograms daily in two or four divided doses taken with breakfast and/or each main meal and at bedtime.
Prophylaxis of NSAID-induced ulcer: 200 micrograms twice daily, three times daily or four times daily. Refer to data sheet for additional information.
Contraindications: Pregnant women, women of child-bearing age, patients allergic to prostaglandins.
Precautions: Cytotec does not produce hypotension in clinical studies at ulcer-healing doses, nevertheless exercise caution in disease states where hypotension might precipitate severe complications.
Adverse reactions: Mild and transient diarrhoea may occur. Other adverse events reported included abdominal pain, dyspepsia, flatulence and nausea, although a causal [illegible] to Cytotec has [illegible]

Soften the impact of NSAIDs on the stomach with prostaglandins

Cytotec is a prostaglandin analogue and therefore replaces G.I. prostaglandins depleted by NSAIDs.

Unlike H_2 receptor antagonists, Cytotec not only inhibits gastric acid secretion[1] but also protects the gastric mucosa by stimulating bicarbonate secretion,[2] increasing mucus secretion[1] and enhancing gastric mucosal blood flow.[3]

Rajapaksa [illegible] Adams A, Noar M. Dig Dis Sci 1986; 31 (suppl): 126s-129s.
2. Isenberg JL, Hogan DL, Koss MA, Selling JA. Gastroenterology 1986; 91: 370-378.
3. Sato N, Kawano S, Fukuda M, Tsuji S, Kamada T. Am J Med 1987; 83 (suppl 1A): 15-21.

ONLY

CYTOTEC®
misoprostol

SEARLE
GOLD CROSS

G.D. Searle & Co. Ltd.,
P.O. Box 53, Lane End Road,
High Wycombe, Bucks. HP12 4HL.

SOME THINGS APPEAR TO BE SLIGHTLY DIFFERENT

Take for example peptic ulcers. For years people were convinced that the pathophysiology was related to gastric acid; healing no longer seemed to be a major problem, except for the high relapse rates.[1)]
In 1983 J.R. Warren and B.J. Marshall[2)] unearthed another pathological factor: Helicobacter pylori*. Since their historic rediscovery, evidence of the connection between H. pylori in the gastric mucosa on one hand and histologically proven gastritis and peptic ulcers on the other has become stronger and stronger. Chronic gastritis and ulcer relapse are highly associated with H. pylori.[3)]
De-Nol® is the only ulcer healer that is active against H. pylori. Therefore the relapse rates after termination of therapy are much lower than with acid-suppressant preparations.[4)] What is more: among patients in whom H. pylori was eradicated and who remained H. pylori negative in the year of follow-up, the relapse rate of peptic ulcers was only 0-10%.[4, 5, 6, 7, 8)]
The pathogenesis and cure of peptic ulcers therefore appear to be slightly different from what was assumed for years.

* formerly known as Campylobacter pylori

1) Marshall BJ et al. Lancet 1988; 2: 1437-1442. 2) Marshall BJ, Warren JR. Lancet 1984; 1: 1311-1315. 3) Goodwin CS. Lancet 1988; 2: 1467-1469. 4) Smith AC et al. Gut 1988; 29: A711. 5) Rauws EAJ. Tytgat GNJ. ISBN 90-9002938-9. Amsterdam 1989. 6) Lambert JR et al. Gastroenterology 1987; 92: 1489. 7) Borody T. et al. Gastroenterology 1988; 94: 43 (abstract). 8) Coghlan JG et al. Lancet 1987; 2: 1109-1111.

Prescribing information. Presentation: Coated tablets and liquid (a chewable tablet is also available in some countries). Each tablet (or 5 ml dose) contains 120 mg tri-potassium di-citrato bismuthate (calculated as Bi_2O_3). Indications: Gastric and duodenal ulcers. Dosage and administration: Two tablets (or two 5 ml doses) twice daily half an hour before breakfast and half an hour before the evening meal or alternatively one tablet (or one 5 ml dose) four times a day half an hour before each of the three main meals and two hours before going to bed, for 28 days. If necessary a further month's treatment may be given. Maintenance therapy with De-Nol is not indicated, but treatment may be repeated after an interval of one month. Contra-indications, warnings, etc.: De-Nol should not be administered to patients with renal disorders and on theoretical grounds is contra-indicated in pregnancy. Special precautions: De-Nol may inhibit the efficacy of orally administered tetracyclines. Side-effects: Blackening of the stool usually occurs; nausea and vomiting have been reported. Darkening of the tongue may occur with De-Nol liquid only. Overdosage: Overdosage has rarely been reported; gastric lavage with intestinal evacuation and if necessary supportive therapy would be indicated. Package quantities: Treatment pack of 112 tablets or 560 ml liquid. Basic NHS price: Tablets £ 20.98, Liquid £ 14.65. Product licence numbers: Tablet 0166/0124, Liquid 0166/5024. GMS prices: De-Noltab IR £ 20.65, De-Nol IR £ 16.37. Product authorization numbers: De-Noltab 62/22/2, De-Nol 62/23/1. Product licence authorization holder: Brocades Great Britain Ltd., Brocades House, West Byfleet, Surrey KT14 6RA. Telephone (09323) 45536.
Product information can differ from country to country. Please consult Gist-brocades NV, The Netherlands for specific country information. (UK 8912)

Tri-potassium di-citrato bismuthate (internationally known as colloidal bismuth subcitrate)

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Presentation ...tablet or 5ml dose ...ns 120mg tri-potassium di-citrato bismuthate (calculated as Bi_2O_3). **USES** Ulcer healing agent. For the treatment of ... **DOSAGE AND ADMINISTRATION** By oral administration **Adults:** The more convenient dosages is two tablets or two 5ml spoonsful twice daily (half an hour before breakfast and half an hour before the evening meal) for 28 days. Alternatively one tablet or one 5ml spoonful four times a day (half an hour before each of the three main meals of the day and two hours after the evening meal) for 28 days. If necessary a further months treatment may be given. Maintenance therapy with De-Nol is not indicated, but treatment may be repeated after an interval of one month. The tablets are to be taken with a draught of water and each 5ml or 10ml dose of the liquid diluted with 15ml of water. **Children:** Not recommended. **CONTRA-INDICATIONS, WARNINGS, ETC** De-Nol/De-Noltab should not be administered to patients with renal disorders and, on theoretical grounds, is contra-indicated in pregnancy. **Special precautions:** De-Nol/De-Noltab may inhibit the efficacy of orally administered tetracyclines. **Side effects:** Blackening of the stool usually occurs; nausea and vomiting have been reported. Darkening of the tongue may occur with De-Nol liquid only. **Overdosage:** Overdosage has rarely been reported; gastric lavage with intestinal evacuation and, if necessary, supportive therapy would be indicated. **FURTHER INFORMATION** Milk should not be drunk by itself during the course of treatment as this can prevent the medicine from working properly. Small quantities of milk on breakfast cereal or in tea or coffee taken with meals are permissible. Antacids should not be taken for half an hour before or half an hour after taking a dose of De-Noltab as these can interfere with the action of the drug. **PACKAGE QUANTITIES:** De-Noltab: Treatment pack of 112 tablets. De-Nol: Treatment pack of 560ml. **LEGAL CATEGORY UK P. BASIC NHS PRICE** De-Noltab: £20.98. De-Nol: £14.65. **PRODUCT LICENCE NUMBERS** De-Noltab: 0166/0124. De-Nol: 0166/5024. **LEGAL CATEGORY REPUBLIC OF IRELAND** To be supplied on prescription only. **GMS PRICES** De-Noltab: IR£26.65. De-Nol: IR£16.37. **PRODUCT AUTHORISATION NUMBERS** De-Noltab: 62/22/2. De-Nol: 62/23/1. **References** 1. Smith, AC., Gut, (1988); **29:** A711 2. Bianchi Porro, G., *et al*, Proc. Br. Sco. Gastroenterol., (1984): Liverpool.

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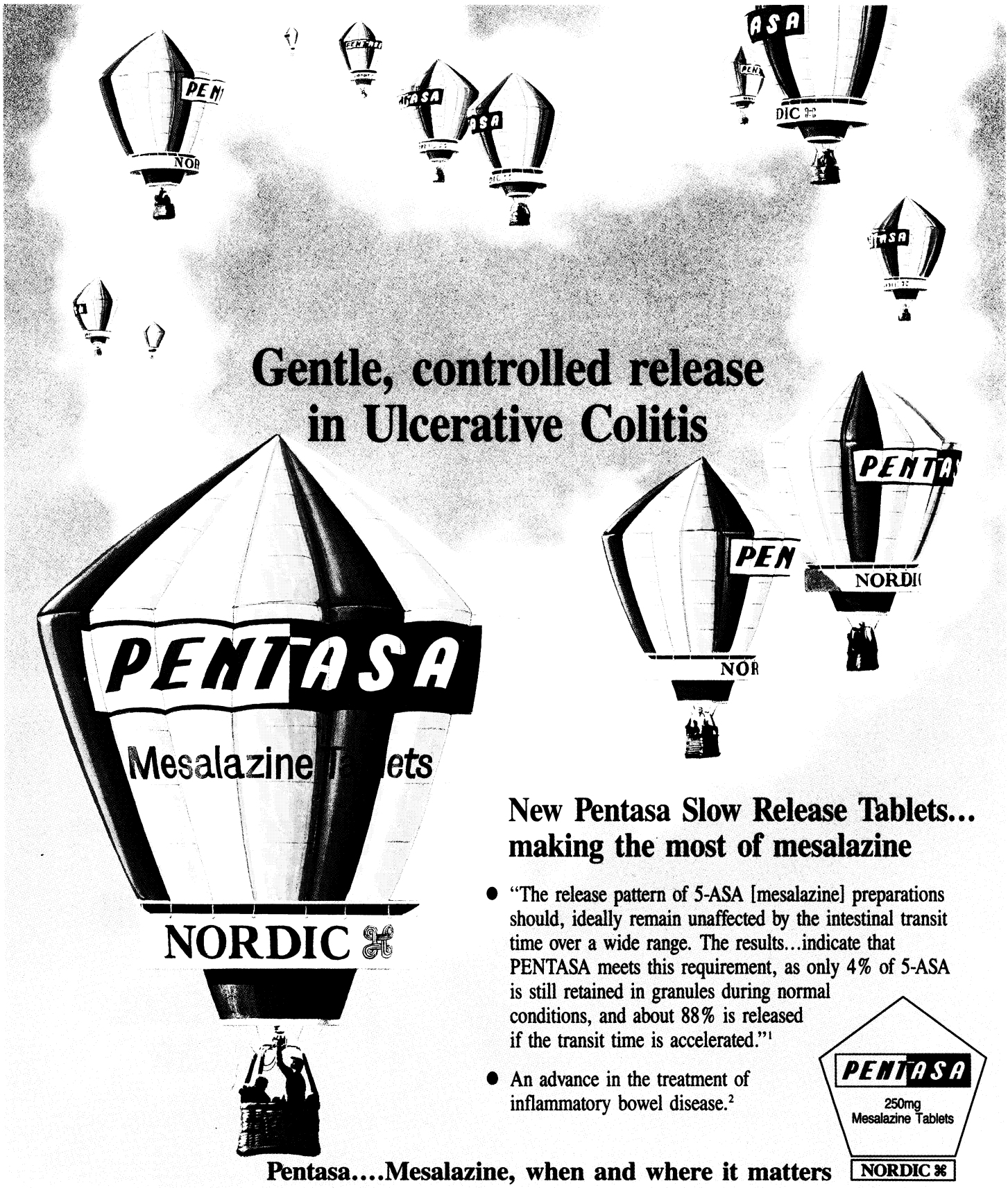

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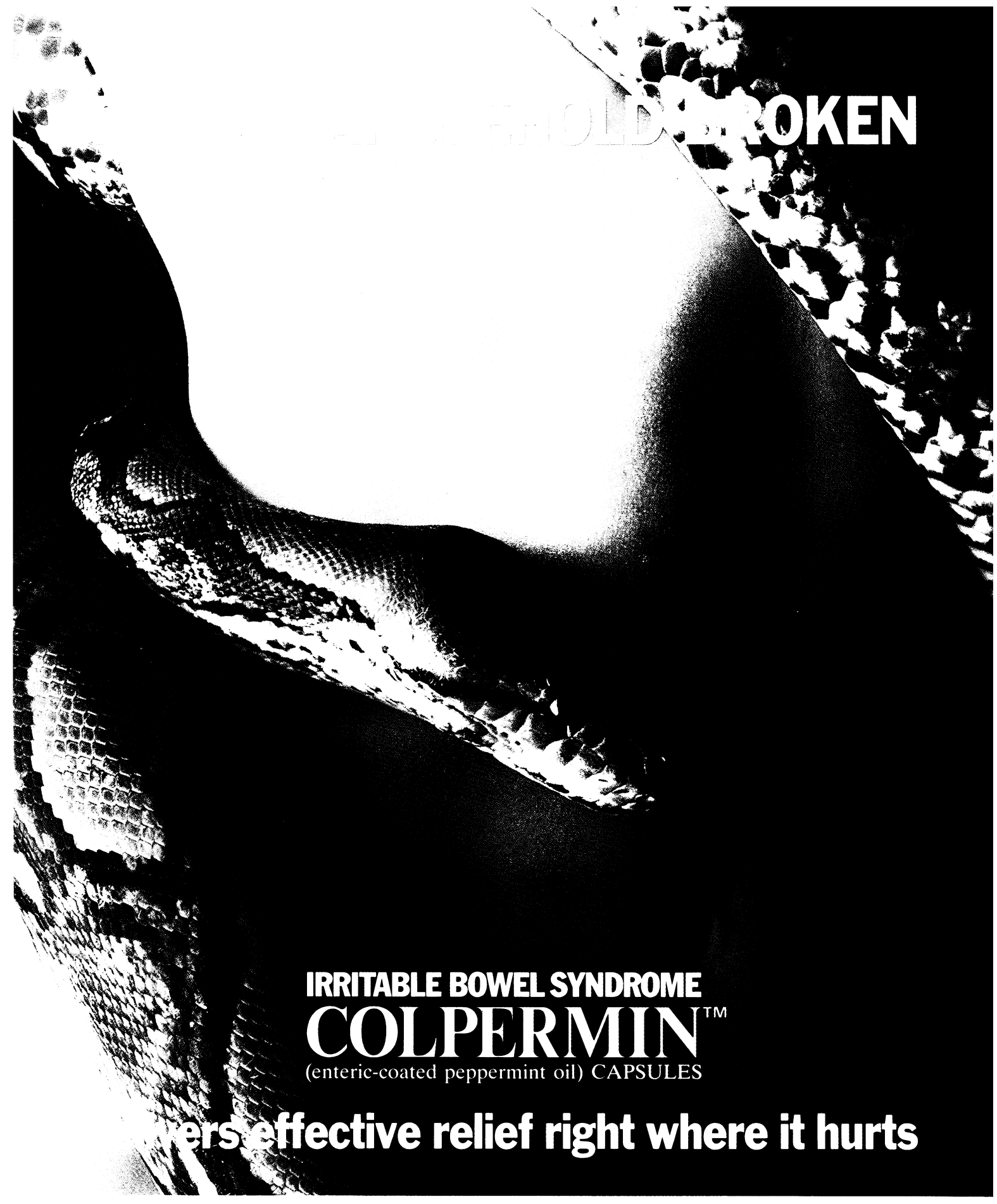
Pentasa....Mesalazine, when and where it matters

Abridged Prescribing Information

Name of Product: PENTASA Slow Release Tablets. **Presentation:** Round, white to light grey mottled tablets with a break line on one side. Each tablet contains 250mg mesalazine in a slow release presentation. **Uses:** For the maintenance of remission in mild to moderate ulcerative colitis. **Dosage and administration:** Adults: The usual dose is two tablets, three times daily. **Contra-indications:** Children under the age of 15 years. Known sensitivity to salicylates. **Precautions, warnings etc:** PENTASA is not recommended in patients with renal impairment. Patients with raised blood urea or proteinuria should be treated with caution. PENTASA should be used with caution during pregnancy and lactation. Headache, diarrhoea and dyspepsia may occur in a small proportion of patients. Exacerbation of the symptoms of colitis may arise in patients who have previously had this problem with sulphasalazine. **Packing quantity:** Bottles containing 200 tablets. **Product Licence:** PL 3194/0043 **Basic NHS Price:** 200 x 250 mg tablets £32.28. **Product Licence Holder:** Ferring Pharmaceuticals Ltd, 11 Mount Road, Feltham, Middlesex. TW13 6JG. **Date of preparation:** March 1990. **Reference:** 1. Brit. J. Clin. Pharmac. (1987), 23: 365-369. 2. Ann. Intern. Med. (1988) 106: 911-912. **PENTASA is a registered trademark.**

Further information is available from: Nordic Pharmaceuticals, 11 Mount Road, FELTHAM, Middlesex. TW13 6JG. NORDIC



Presentation: Each enteric-coated capsule contains 0.2ml peppermint oil Ph. Fur. **Uses:** Treatment of symptoms of irritable bowel syndrome. **Dosage and Administration:** Adult dose: 1-2 capsules three times a day, 30 minutes to one hour before food. Not to be taken immediately after food. The capsules should be taken until symptoms resolve, usually within one or two weeks. There is no experience of use in children under the age of 15 years. **Contra-indications, warnings, etc.** *Precautions:* Do not break or chew the capsules. Patients who already suffer from heartburn sometimes experience an exacerbation of these symptoms when taking the capsule. Treatment should be discontinued in these patients. Do not take indigestion remedies at the same time of day as this treatment. **Adverse effects:** Heartburn; sensitivity reactions to menthol, which are rare and include erythematous skin rash, headache, bradycardia, muscle tremor and ataxia. **Pharmaceutical Precautions:** Store in a cool place. Avoid direct sunlight. **Legal category:** P. **Product Licence:** PL 0424/0009. **Basic NHS Cost:** £12.15 per 100. **Date of issue:** September 1989. Colpermin is a Trade Mark. 9168018-04-90

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References: 1. Bijlsma JWJ. Aliment Pharmacol Therap 1988;2S:75-83. 2. ibid 85-96. 3. Simon B *et al.* J Clin Gastroenterol 1986;8:367-70. 4. Lee FI *et al.* Gut 1986;27: 1091-5. 5. Granata F. Ital J Gastroenterol 1985;7:208-10. 6. Brackmann HP *et al.* Therapiewoche 1984;34:5232-7. 7. Gibinski K *et al.* Gastroenterol 1985;88:1393. 8. Dobrilla G *et al.* Scand J Gastroenterol 1987;22 (Suppl 134):21-8. 9. Simon B *et al.* Scand J Gastroenterol 1987;22 (Suppl 136): 61-70. 10. Bovera E *et al.* Hepato-gastroenterol 1987;34: 269-72. 11. Marks IN, Wright JP. S Afr Med J 1987;72:18-20. 12. Rampal P *et al.* Gastroenterol 1988;94:A167. 13. Kogut DG *et al.* Gastroenterol 1988;94:A233. 14. Merki H *et al.* Am J Gastroenterol 1988;83:362-4. 15. Reynolds JC Gastroenterol 1988;94:A374. 16. Bianchi Porro G *et al.* J Clin Gastroenterol 1987;9 (Suppl 12):14-18. 17. Gitlin N *et al.* Gastroenterol 1987;92:48-53. 18. Mann SG, Cottrell J. Ital J Gastroenterol 1987;19 (Suppl 30):68. 19. Dyck WP *et al.* Scand J Gastroenterol 1987;22 (Suppl 136):47-55. 20. Delattre M *et al.* Curr Ther Res 1985;37:677-84.
Prescribing Information. Presentation 'Tagamet Tiltab' Tablets, PL 0002/0128, each containing 800 mg cimetidine. 30 (2 calendar strips of 15 tablets), £17.76. 'Tagamet' Tablets, PL 0002/0092, each containing 400 mg cimetidine. 60 (4 calendar strips of 15 tablets), £18.69. **Uses** Duodenal and benign gastric ulceration, including that associated with NSAIDs. Other conditions where reduction of gastric acid by 'Tagamet' is beneficial: persistent dyspeptic symptoms, particularly meal-related, including such symptoms associated with NSAIDs. **Dosage and administration** *For full dosage instructions see Data Sheet. Adults:* Duodenal or benign gastric ulceration, 800 mg once a day at bedtime. Otherwise usually 400 mg b.d. with breakfast and at bedtime. If inadequate, 400 mg q.d.s. with meals and at bedtime (1.6 g/day). Treat for at least 4 weeks (6 weeks in benign gastric ulcer, 8 weeks in ulcer associated with continued NSAIDs). To prevent relapse of peptic ulcer, usually 400 mg at bedtime or else 400 mg morning and at bedtime. *Children:* Over 1 year: 25-30 mg/kg/day, divided. **Contra-indication** Hypersensitivity to cimetidine. **Precautions** Impaired renal function: reduce dosage (see Data Sheet). Potentiation of oral anticoagulants, phenytoin and theophylline (see Data Sheet). Prolonged treatment: observe patients regularly. Potential delay in diagnosis of gastric cancer (see Data Sheet). Regularly observe patients with a history of peptic ulcer and on NSAIDs, especially if elderly. Care in patients with compromised bone marrow (see Data Sheet). Avoid during pregnancy and lactation. **Adverse reactions** Diarrhoea, dizziness, rash, tiredness. Gynaecomastia, occasional reversible liver damage, confusional states (usually in the elderly or very ill). Very rarely interstitial nephritis, acute pancreatitis, thrombocytopenia, agranulocytosis, headache, myalgia, arthralgia, sinus bradycardia, tachycardia, heart block, aplastic anaemia; very rare reports of alopecia, reversible impotence but no causal relationship established at usual therapeutic doses. **Legal category** POM. 7.3.89.
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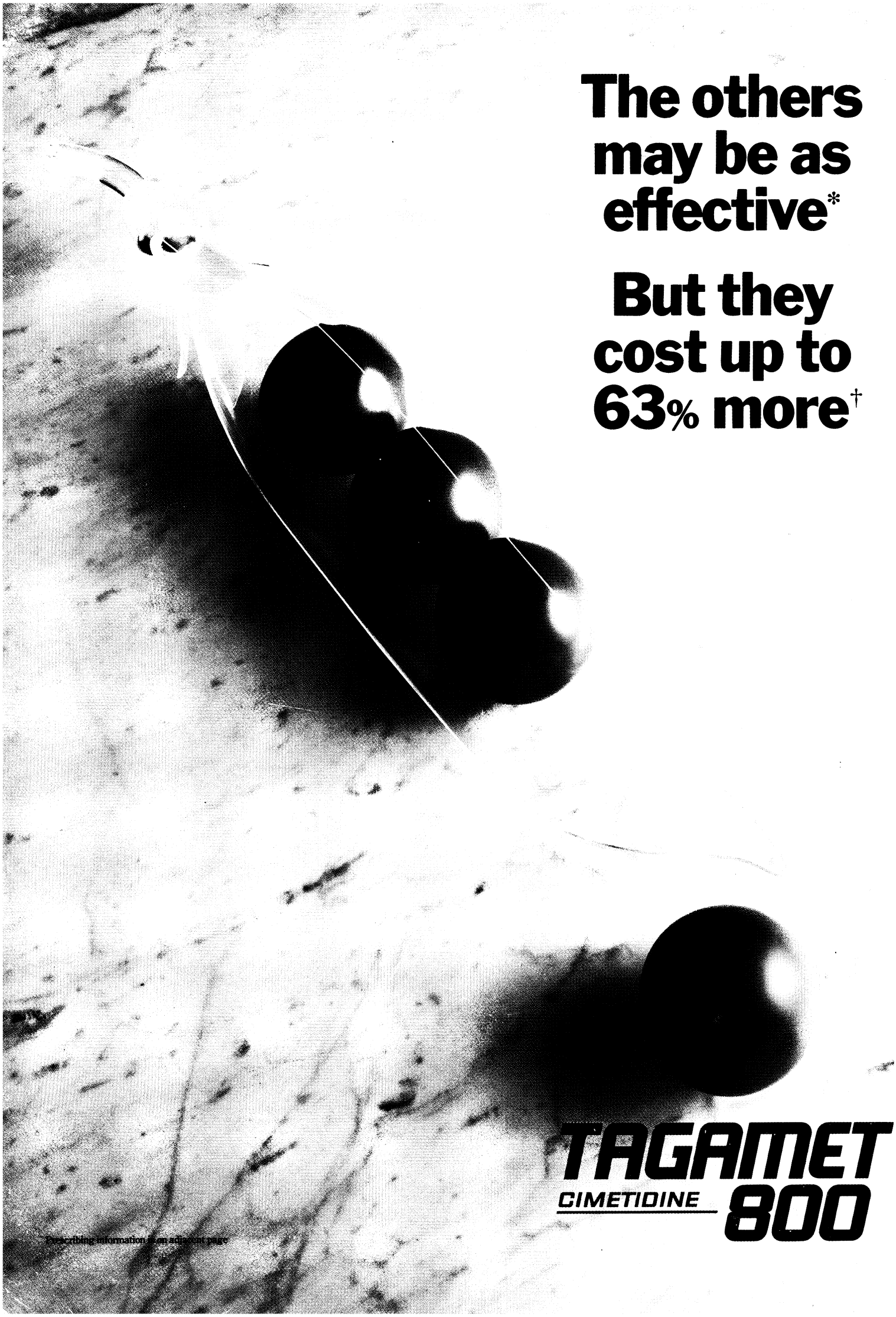
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